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*Jane Eyre and The Woman in White:*  
a Study on Female Madness and the  
Impossibility of Self-determination

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## Abstract

The conversation about insanity has a long history, as the existence of Ancient Greek documents on the theme of derangement attests. In the 18<sup>th</sup> and 19<sup>th</sup> century insanity came to be perceived, in Europe, as a major problem that required a solution, thus leading to the massive construction of asylums and to the development of studies and theories on mental illness. In nineteenth-century England, medical theories on madness distinguished between generic insanity and female insanity; the latter was understood to stem from implicitly feminine, biological characteristics, such as volatility, weakness, sensitivity and irrationality, so much so that women became increasingly liable to the label of insanity.

This work investigates how Charlotte Bronte's *Jane Eyre* (1847) and Wilkie Collins's *The Woman in White* (1859) represent how the threat of being labelled insane, with the subsequent deterioration of mental, physical, and social integrity, was used as a weapon to curb women's freedom. This thesis argues that the two novels depict Victorian women as standing in a precarious balance among definitions of insanity. Furthermore, it will demonstrate that the female figures in the novels illustrate the dynamics that prevented Victorian women from defining themselves, due to men's desire to define them according to Victorian ideals of propriety; and that those women who transgressed the boundaries of their social role as angels in the house were liable to the label of madness.



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## Introduction

[...] and I thought [...] of the shut doors of the library; and I thought how unpleasant it is to be locked out; and I thought how it is worse perhaps to be locked in; and, thinking of the safety and prosperity of the one sex and of the poverty and insecurity of the other [...], I thought at last that it was time to roll up the crumpled skin of the day, with its arguments and its impressions and its anger and its laughter [...]. (Woolf 21)

In this quote from Virginia Woolf's *A Room of One's Own* the author reflects on the condition of women; specifically, she ponders on the inequality between the two sexes in a society where men occupy a sheltered and advantageous position, while women are unsafe, they do not have access to education (the library), and run the risk of being "locked in" (Woolf 21): imprisoned either physically, being allowed no freedom of movement, or metaphorically, being caged into a social role restraining their potentialities. Woolf was writing in 1929, but the problems she denounces were already a reality in the nineteenth century, the period this thesis takes into consideration. Indeed, the present work illustrates how women in Victorian England were subjected to the control of patriarchal institutions and of men, who, from their position of superiority, had the power to decide over them and imprison them. Moreover, the anger Woolf evokes mirrors the exasperation of a number of Victorian women, such as Florence Nightingale, who felt oppressed by the role of passivity and subjection Victorian society expected from, and imposed on, them.

Through an analysis of two nineteenth-century novels, namely Charlotte Brontë's *Jane Eyre* (1847) and Wilkie Collins's *The Woman in White* (1859), this thesis addresses the subject of women's lack of freedom in Victorian England, focusing specifically on how women who rebelled against male oppression and overreached the boundaries of their social role as angels in the house were threatened with the label of insanity. Indeed, it will be argued that the two novels show how the threat of the label of "insane" posed on women's mental, physical, and social integrity was used in the nineteenth century as a weapon to curb women's freedom and annihilate their rebellious potential. Moreover, this thesis holds that the two novels depict Victorian women as standing in a precarious balance among definitions of insanity, and that the female characters illustrate the

dynamics that prevented Victorian women from defining themselves, due to men's desire to define them according to Victorian ideals of propriety.

The social problems of the past this thesis addresses are, in some cases, still relevant for women in today's society. Indeed, Woolf's quote on the condition of women in the early twentieth century is, in some measure, applicable to contemporary women as well. The female insecurity the writer mentions was as actual in the 1920s as it was in the nineteenth century and it still is now, to an extent. Indeed, despite the rise of feminist movements and the advances in terms of women's rights, contemporary women are not yet safe: a portion of the population still perceives women to be men's property, and this triggers a series of dangerous dynamics that may culminate in femicide. The patriarchal mindset that in Victorian England allowed fathers or husbands to exercise legal authority and ownership over women still endures today in certain contexts and, although there are laws protecting women and asserting their rights, abusive men may resort to murder to assert their authority.

Arguably, a parallel could be traced between modern day femicide and the Victorian practice to intern women in asylums, as both stem from a wish to punish their transgression of boundaries and limit their freedom. Indeed, as this thesis will show, when Victorian women demonstrated self-assertion and requested freedom, or evaded the strict behavioural schemes of propriety society imposed on them, the threat of being labelled as insane and the subsequent commitment to an asylum were efficient weapons for repressing their rebellious impulses. Similarly, a number of femicides nowadays stem from women's desire to escape the control and, in many cases, the violence, of authoritative male partners: since these men consider their partners as property, they cannot accept their freedom, and, most of all, they cannot accept their being with (and belonging to) someone else. Hence, they claim for themselves the ultimate right to decide on women's life or death. As in the nineteenth century the patriarchal organisation of society deprived women of the right to self-determine and created a power imbalance that exposed them to the schemes of ill-intentioned relatives and partners, so today the enduring influence of patriarchal culture puts women in danger, making them feel unsafe.

Complementary to the idea of women as men's property is the conception of women's inferiority to men. Such notion, which constituted the fundamental assumption at the base

of the patriarchal system, was unquestioned in the nineteenth century, and still has repercussions on contemporary society. For instance, there is a significant salary gap between men and women, who, according to the European Commission, earn on average 13% less than their male co-workers in European countries (“Gender Pay Gap EU”). Women are also discriminated in their capacity to cover leading positions, so, the vast majority of CEOs are men. These circumstances are also linked with the idea that associates women to the domain of the home: indeed, the idea that women have to devote themselves to the family and to the raising of children, has not yet been completely overcome. In some countries, such as Hungary, there are laws which contribute to preserve and spread this outdated concept: Hungarian family policy offers tax benefits for women if they get married and have children. The fact that these incentives are addressed specifically to women, while men are excluded, reinforces the idea that women are designed to be the primary caretakers of children. A controversial study published by the Hungarian State Audit Office further attests to this tendency to perceive women as destined chiefly to childbearing: the study claims that there are dangers inherent in granting women access to higher education, and alleges that an increase in the number of graduated women could lead to a fall in birth rates (“Hungarians Warning”). These assertions recall the Victorian conception of women as angels in the house, excluded from education and devoted to the care of home and children, and of men as intended for work, leadership, study, and leading roles in the public sphere. Indeed, the Hungarian study claims men are characterised by “technical skills, risk taking and entrepreneurship” (“Hungarians Warning”).

The idea of female inferiority is difficult to eradicate, and, nowadays, when women are vocal about issues concerning gender inequality or the dangers women are exposed to in contemporary society, they are often labelled as men haters and hysterics. Hence, the main argument opposers employ to silence the voices of those women who denounce inequalities is the claim of irrationality, supposedly inherent in their condition of women. Indeed, protesting women are ironically accused of ‘being on their period,’ a claim through which accusers attempt to delegitimise their voices and dismiss their words as the ravings of menstruating women. Such dynamics attest to how false claims of women’s biologically determined irrationality, which this thesis will point out as central elements in Victorian social and scientific characterisation of women, are still employed today to



oppose and annihilate women's efforts to denounce the injustice of their condition and to prompt a change in society.

This thesis will discuss the condition of women in Victorian England, with reference to themes which still have repercussions on the present, such as the idea of female inferiority, the conception of women as men's property and the ideal of the angel in the house; the main focus of this work will be the use of the label of madness to curb women's freedom and delegitimise their voices. As previously mentioned, this subject will be considered through an analysis of the position of women and of insane female characters in two Victorian novels, *Jane Eyre* and *The Woman in White*. The comparison of these two novels is important since, in the observation of the profoundly different representations of insanity offered by the two works, it is possible to identify some points in common: in both novels the label of insanity is imposed on women by men, who hold definitional power, and exploit their power to label women as insane to control and punish those women who transgress the boundaries of propriety. Moreover, both novels show how, once a woman is labelled insane, her voice is delegitimised, and it is extremely difficult for her to shake off the definition imposed by men.

This comparative close reading of the two texts falls within the disciplinary fields of feminist studies and health humanities, indeed, the condition of women will be analysed from the point of view of their mental health. Female characters' conformity, or non-conformity, to social standards finds confirmation on a mental health level, since women are consequently labelled as sane or insane, and the label attributed to their mental health determines their social positioning in the story.

In the last decades, the topic of insanity has attracted the attention of many scholars, and it has been widely discussed from different perspectives. Such scholars as Michel Foucault and Roy Porter have retraced the history of madness, while Andrew Scull produced a crucial study on the changeability of the concept of insanity, examining the legislation regulating the phenomenon of insanity in the course of the centuries and the reasons that led to the different conceptions of madness across the years. Other scholars, such as Showalter and Shuttleworth, have studied the topic of insanity from feminist perspectives, especially focusing on the social status that mad subjects retained in the Victorian period. In her seminal study *The Female Malady: Women, Madness and*

*English Culture, 1830 – 1980*, Elaine Showalter, points out the sexual connotations that were attributed to female insanity. She investigates the different theories on insanity which followed one another over the course of one hundred and fifty years, studying the figures of prominent medical men who claimed to possess the true knowledge on female madness. In conclusion, she argues that the determination of female sanity or insanity in the Victorian period was largely dependent on the social role society had outlined for women. Another important contribution to this field is Samantha Pegg's "Madness is a Woman': Constance Kent and Victorian Constructions of Female Insanity", where she points out that, in many instances, in the Victorian period the label of madness was applied to women in order to explain those actions which were in contrast with the social behaviour expected and required from them, so that the idea of the perfect woman would not need to be discarded, and women could thus retain their role of "guardians of society" (222). In other words, if a woman decided that she did not want to remain silent, and started to give voice to her ideas, or if she expressed discomfort in her subordinate position, it was convenient to point her out as a mad woman. Not only did this logic apply to women who rebelled to their social position, but also to women who were perceived as morally corrupted, since Victorian society tended to refuse to acknowledge the possibility that women might be imperfect.

For what concerns madness in more general terms, its history, and the different responses to it over the course of the years, this thesis has taken into consideration primarily the work of two important scholars in the field of folly, namely, the French philosopher Michel Foucault and the sociologist Andrew Scull. In his work *Madness and Civilization: a History of Insanity in the Age of Reason*, Foucault analysed the development of the concept of insanity and the changing social response to this phenomenon over the course of approximately three hundred years, from 1500, when madness was perceived as a natural part of everyday life, to 1800, when insane individuals started to be understood as unnatural beings, and were often seen as a threat and a burden to society, a fraction of the population which needed to be isolated and locked up into asylums. On a larger scale, in his *Madness: A Very Short Introduction* Andrew Scull presented an examination of the different conceptions of mental illness which replaced one another over the course of the centuries, starting from ancient Greece and proceeding up to the twentieth century. He analysed the different responses to insanity and the consideration and treatments which

were reserved to mad people throughout over two millennia. By contrast, in his work *The Most Solitary of Afflictions: Madness and Society in Britain, 1700-1900*, Scull provided readers with a close up on the condition of madness in the Georgian and Victorian eras, focusing particularly on the evolution of the response to the mentally ill in England and in Wales. He analysed the socio-historical reasons that caused a shift in the conception of madness, from the status of unreason and beastliness which required physical detention, to a fluctuation towards a concept of loss of control that had to be regained through moral management.

To analyse the general concept of insanity in the Victorian period medical and legal documents have also been considered, mainly through the work of other scholars, which reported extracts from medical certificates of the alleged lunatic patients and excerpts from nineteenth century laws and court cases dealing with insanity. However, to get more in depth into the question of female insanity in the Victorian era official documents do not suffice, since scant evidence is available among medical and legal documents concerning female insanity, and those data that are indeed attainable have all been collected by men. Therefore, the first-hand knowledge on the condition of female mental health as experienced by women themselves, is accessible almost uniquely through diaries and novels. A good example of such testimony can be found in the renowned essay *Cassandra*, by Florence Nightingale, which denounces the emptiness of Victorian women's lives and the strict boundaries of the role of women in nineteenth-century society, a condition that was dangerous for their mental health. More deeply involved with the topic of insanity is the book *A Blighted Life* by Rosina Bulwer Lytton, which is a first-hand testimony of the incarceration of a sane woman in an asylum, denouncing the abuse of power of men towards their female relatives, who were socially, legally, and economically dependent upon them.

*Jane Eyre* by Charlotte Brontë and *The Woman in White* by Wilkie Collins are two novels which are profoundly entangled with the subjects of female condition and mental health in the Victorian period. The latter, in particular, deals precisely with a case of incarceration of a sane woman in a lunatic asylum at the hands of a male relative, which found it convenient to get rid of the wife by way of this institution. Collins's novel has been analysed from the perspective of female characters and their subordinate position: in her article "The Madwoman Outside the Attic: Eavesdropping and Narrative Agency

in *The Woman in White*”, Ann Gaylin addresses the question of narrative agency, examining how the tenacious Marian of *The Woman in White* eventually loses the battle for definition and narrative agency, since Walter Hartright relegates her to a submissive position in the house, along with all the other women in the novel. Jenny Bourne Taylor likewise examined the theme of insanity and psychic identity in Collins’ novel: in her work *In the Secret Theatre of Home: Wilkie Collins, Sensation Narrative, and Nineteenth-Century Psychology* Taylor analyses the influence of nineteenth century psychology on Collins’s fiction. She includes a close reading of *The Woman in White* and examines female characters in light of nineteenth-century debates on insanity, with reference to women’s struggle for self-management and self-definition. Alison Milbank’s *Daughters of the house: modes of the Gothic in Victorian fiction* explores women’s position in Victorian society, focusing specifically on the motives of female imprisonment in the sphere of Victorian domesticity. In the chapter “Breaking and Entering: Wilkie Collins’s Sensation Fiction” she focuses on *The Woman in White*, pointing out women’s transgression of the boundaries of domesticity and their invasion of the male sphere. Finally, Helen Small’s *Love’s Madness: Medicine, the Novel, and Female Insanity, 1800-1865* features an analysis of Collins’s novel, specifically exposing its connection to the lunacy panic of mid-nineteenth century and the influence of contemporary medical theories. She also analyses women’s condition of vulnerability in a context where men could steal their identity and threaten them with the label of insanity.

As far as Brontë’s novel is concerned, Sally Shuttleworth’s study *Charlotte Brontë and Victorian Psychology* provides a detailed analysis of Brontë’s fiction, considering the theme of insanity, of sexuality and of nineteenth century medicine and psychology. Specifically, it links Brontë’s fiction with the social and scientific context of her time, pointing out how medical and psychological assumptions of Victorian society are reflected in the writer’s work. For what concerns *Jane Eyre* in particular, she investigates the characteristics of Bertha Mason’s madness, and delineates a precise psychological analysis of the character of Jane. A number of interesting articles have been written on the characterisation of insanity in *Jane Eyre* and on the central role which men played in affixing the label of madness on women, such as “The Mystery at Thornfield: Representations of Madness in “Jane Eyre”” by Valerie Beattie and “No Rest for the Wicked: Immoral Implications of Insanity and Sleeplessness in *Jane Eyre*” by Karen Beth

Strovas. In her work *Love's Madness* Helen Small includes an analysis of Brontë's *Jane Eyre*: she explores the characterisation of Bertha Mason as an insane woman, pointing out how an outdated eighteenth-century conception of madness as bestiality overlaps with the nineteenth-century notion of moral insanity in the figure of Rochester's first wife. She also analyses Jane's struggle for self-determination against male's attempts to define and label her, and points out the centrality of the power of the will in processes of female self-determination. In the previously mentioned *Daughters of the House*, Alison Milbank proposes an analysis of the power struggles at play in *Jane Eyre*, particularly pointing out Rochester's attempts to impose on Jane a new identity, making her fit within the boundaries of the model of the Victorian angel in the house; attempts which Jane is able to contrast thanks to the strength of her desire for freedom and self-determination.

While the theme of insanity in Brontë's *Jane Eyre* and Collins's *The Woman in White* has been previously discussed, the novelty of this thesis lies in its comparison of the characterisation of insanity in the two novels, and specifically in an analysis of how the label of insanity, or the threat of such label, is used by male characters to keep women in a position of subjection and obedience, as Victorian society expected of them, and to punish those women who transgressed the boundaries of the model of the Victorian angel in the house.

The first chapter of this thesis analyses the history of the concept of insanity and its evolution over the centuries, as well as of the legislation regulating it and of the scientific theories speculating on its causes and its treatments. Moreover, it delineates the position of women in Victorian society, exposing Victorian conceptions of women as inferior to men and as biologically predisposed to insanity through an analysis of nineteenth-century theories on female insanity and of the treatment of moral management.

The second chapter analyses the representation of insanity in *Jane Eyre* and *The Woman in White*, pointing out how contemporary theories on insanity influenced the characterisation of mad women in the two novels.

Lastly, the third chapter deals with the subject of women's voices and their efforts to assert their own definition of themselves. The centrality of writing in female's attempts at self-determination will be considered, specifically referring to the writing activity of the two female narrators, Jane Eyre and Marian Halcombe. Finally, the complicity of

Victorian institutions in men's scheme to silence and enclose women will be addressed, pointing out how the patriarchal system at the base of Victorian society is the origin of all the sufferings women have to endure, since such a system entails the inferiority of women, and the consequent absolute power and control of men over them.

# 1. Context: the history of insanity, laws and scientific theories

The topic of insanity has always been a fascinating one over the course of history, since insanity deals with derangement, something that is outside the common schemes of human behaviour, it is unknown, inexplicable, and therefore attracting. Such a subject has enthralled humanity since ancient Greece, where representations of madness can be found in art, as for instance in Homeric myth, but also in the field of science, where Hippocratic medicine was advancing the first theories on madness and its possible cures (Scull, *Madness Introduction* 21). However, it is in the seventeenth and eighteenth century that a growing concern with insanity started to develop, impacting all strata of society in different ways: the lower strata as the social class who had the highest degree of internment into institutions (Adair et al. 7), and the upper strata as a conversation theme and as a problem to be managed. The subject of insanity and its treatment was a fundamental component of the intellectual debate of the time (J. Taylor, *Secret Theatre* 29), but it soon started to be discussed among the general public, too. Indeed, it was generally believed that the average individual possessed the knowledge to detect mental illness, as well as any doctor (Leavy 97). In this context, a number of innovations took place: the psychiatric profession emerged, new laws appeared to regulate and control the mass of insane individuals, and new structures were built in order to manage this newly originated group (Scull, *Solitary Afflictions* 41, 42).

## 1.1. The concept of insanity and its historical evolution

Before proceeding to analyse the change in the status of madness over the decades, and the consequent institutionalisation of insanity occurred in the course of the eighteenth and nineteenth century, particularly in England, it is essential to analyse the abstract concept of insanity, and especially the nature of this concept. Indeed, madness is a socially constructed notion, in the sense that human judgement over the nature of insanity and the social reaction to, and handling of, insanity have altered significantly across time and place. Madness is an evaluative concept (Busfield 261), that has no fixed appearance and no fixed boundaries; it changes according to a series of socio-political and economic factors, according to the discoveries in the field of medicine and to philosophical and psychological theories. Therefore, in the years that this thesis considers, different

conceptions and responses to insanity followed one another, according to the gradual development of new theories and changes affecting society – such as the industrial revolution and scientific discoveries – and when the understanding of insanity changed, its treatment evolved accordingly.

In the span of time that extends from approximately 500 CE to the seventeenth century different perceptions of insanity alternated, in an interplay of religious conceptions of demonic possession and medical ideas on the body (Horden and Trener 75). Different images of madness can be found in art and literature dating back to that period, where mad individuals were represented as either comical or tragical entities. Notorious mad characters in literature are Shakespeare's Hamlet and Ophelia, but the theme of madness was present also in epic poems, as for example in *Orlando Furioso* by the Italian Ludovico Ariosto, and it is a fundamental topic in *Don Quixote* by the Spanish Miguel de Cervantes. Hence, it is clear that the notion of madness has always been present over the course of the centuries.

However, leaving the field of art to focus instead on the management of insanity, Andrew Scull asserts that the most dangerous individuals among the mad had always been controlled through some form of confinement (*Short Introduction* 38), but in the majority of cases families were the primary social entities that had to care for their mad (*Short Introduction* 15). It is from the mid-seventeenth century that the adoption of restrictive measures to deal with deranged individuals increases (Scull, *Short Introduction* 38), until it seems to become the habitual procedure. Over time, the conception of insanity had changed, leading to a change in the treatment of insane individuals. Indeed, in the eighteenth century, madness was perceived as an irreversible loss of reason, and the idea that reason was what distinguished human beings from other species led to the conclusion that mad people were like beasts, and had to be treated accordingly (Scull, *Solitary Afflictions* 92). This fundamental conception of insanity was what 'inspired' the spread of restrictive means of controlling the mad population. Moreover, in these years, with the rise of the middle class, the consequent diffusion of bourgeois values of respectability, and the importance bourgeois society accorded to appearances, a number of wealthy families who had to take care of a family member with mental health issues started to make arrangements with individual subjects outside the family to dispose of their mad relatives (Scull, *Solitary Afflictions* 21). This allowed them to spare the social



embarrassment and the mental and physical effort which the caring for an insane person required. Accordingly, mad individuals would be sent to reside in accommodations away from home, isolated from their community; this achieved the double goal of limiting the gossip around them, and preventing those individuals who were perceived as potential threats from harming anyone in their neighbourhood (Scull, *Short Introduction* 39). Where a demand originated, readily a supply was provided, and in response to this new need for care and accommodation for deranged people a new profession soon emerged who undertook the mad-business (Scull, *Short Introduction* 39). Due to the very nature of the newly originated phenomenon of the madhouse, fascinating and intriguing by reason of its secrecy, remoteness, and overall oddness, the mad-business started to gain a strong hold over popular imagination, leading to the engendering of gothic fantasies regarding the treatment of lunatics in the care structures (Scull, *Short Introduction* 40,41). The more the so called “trade in lunacy” (Scull, *Solitary Afflictions* 23) grew, with increasing demand for care among social strata other than the wealthy ones, the more the market of offers also started to expand, and competition between madhouses started to develop (Scull, *Solitary Afflictions* 82). At this historical moment, the mad-business was an entirely private phenomenon, one which was not regulated by the law but was silently accepted by the institutions (Scull, *Solitary Afflictions* 80). Furthermore, although the 1601 Poor Law Act acknowledged poverty to be a secular problem, one that institutions should tackle (Scull, *Solitary Afflictions* 15), in the course of the seventeenth century outdoor relief was supplemented by the recourse to private charitable alms houses to care for chronic patients (Scull, *Solitary Afflictions* 16). Some of these structures gradually became places of confinement for individuals whose mental illness made them violent or dangerous (Scull, *Solitary Afflictions* 15,16).

The growing, unregulated trade caused an abatement of the prices which were required to intern a mad subject, but the costs of care did not diminish; therefore, asylum managers started cutting back on the nursing staff and on the general management of the structures (food, clothes, buildings) (Scull, *Solitary Afflictions* 82). This is one of the main reasons why the carers relied on chains and other coercive means, as well as on physical threats and violence, to keep the situation under control (Scull, *Solitary Afflictions* 82). Moreover, the buildings designated to the accommodation and detention of mad individuals were for the most part converted buildings, which were not planned on

purpose to hold insane patients, thus leading to structural deficiencies, and this was an additional cause of the resort to physical constraining in the management of the inmates (Scull, *Solitary Afflictions* 22). All these elements combined triggered a reaction in the wider public halfway between horror and fascination, and the madhouse started to be perceived as a place where atrocious abuses and extravagant experiments were performed over inmates. One madhouse in particular became the main object of interest and the subject of the wildest conjectures: the Bethlem Hospital for the mentally ill. More commonly referred to as Bedlam, this mental asylum in London was perceived as the arena where the battle between reason and lack thereof was fought, where unrest and tumult were subdued through the recurring to brutal violence and cruelty (Scull, *Madness Introduction* 27).

The violent and coercive treatment asylum inmates underwent was largely a consequence of cultural assumptions about madness. As Scull writes:

[...] dragged down to a state of brutish insensibility and incapacity, the lunatic occupied a wholly unenviable ontological status. Legally, as those writing on the jurisprudence of insanity acknowledged, he or she became virtually a nonentity, one whose 'Promises and Contracts' were 'void and of no force' and whose behaviour could never attain the dignity and status of human action. (*Solitary Afflictions* 58)

Mentally unstable people were perceived as beastly and deprived of humanity; as a consequence, the most common practice for treating mental illness in the eighteenth century was attempting to subjugate it through fear (Scull, *Solitary Afflictions* 69).

## 1.2. Capitalist society: economy and science

The diffusion of mental asylums is tied to the social and economic changes and scientific advancements that characterised the eighteenth and nineteenth centuries. In the eighteenth century, English economy underwent profound changes related to the rise of the industrial revolution and an increasingly prominent commercialism, which was affecting all aspects of life (Scull, *Solitary Afflictions* 31). With the growth of industrial cities, English population was expanding rapidly, growing from around 5 million in 1700 to nearly 9 million in 1801 (White). As the population grew, so did poverty rates, and an increasingly

larger segment of the population had to recur to outdoor relief in order to sustain itself. The wealthier classes, observing that, despite the supply of outdoor relief, poverty seemed to increase instead of decreasing, started looking for alternatives to the system of outdoor relief, and became progressively attracted to the idea of institutionalising the poor, and the insane poor, thus originating such institutions as the workhouse and the asylum (Scull, *Solitary Afflictions* 33).

It is in this period that a general institutionalisation of life takes place, and society is gripped in a mechanism where power is attained through control; a phenomenon Foucault has analysed in his work. The new society was no longer one constituted of subjects, but it now came to be made of labourers. In the capitalist mindset individuals were divided into able-bodied and non-able-bodied (Scull, *Solitary Afflictions* 36), everyone had to work and participate to the creation of wealth, and people were valued according to their ability to produce. In such a society, poor people who needed help for their sustenance were perceived as a burden for the productive members of society to carry, and they could no longer rely on outdoor relief to survive, but instead had to be rendered as productive as they could be (Foucault 53). This is where workhouses came into play.

Formally conceived as a place where poor people could find a shelter and maintain themselves through the work provided by the institution, workhouses gradually turned into places of detention to keep paupers isolated from the rest of society (Newman 125), and where idleness and unproductivity were punished with malnutrition, hard work, brutality, forced child labour, the breaking up of families and unbearable life conditions. The Poor Law Amendment Act of 1834, also known as New Poor Law, clearly illustrates how Victorian society considered poverty to be caused primarily by idleness (Newman 123), and therefore condemned it and punished it as a vile vice. The New Poor Law suspended the distribution of public relief, which was previously administered at a parish level, and instead established that all able-bodied poor who needed institutional help should be admitted in the workhouse (Newman 123).

The New Poor Law made it easier for poor people to be institutionalised and consequently controlled, according to the mechanisms of power of the new capitalist society. Moreover, the system of the workhouse had a double function: on one hand it was an economic tool that aimed to give work to those who were confined, thus making them contribute to the

wealth of the whole community (Foucault 53); on the other hand it was a moral entity, punishing those who were guilty of idleness. Foucault summarised the situation in few lines:

[...] confinement was required by something quite different from any concern with curing the sick. What made it necessary was an imperative of labor. Our philanthropy prefers to recognize the signs of a benevolence toward sickness where there is only a condemnation of idleness. (Foucault 49)

Once the issue of pauperism was addressed through the emergence of the workhouse, problematic individuals had to be divided into categories. During the systematic medical examination required for the admission to the workhouse, those individuals who were found to be mentally unstable, and particularly those who showed signs of being a potential threat for the order of the workhouse, had to be sent to an asylum within fourteen days from admission (Adair et al. 7). Arguably, the mechanisms activated by the New Poor Law were responsible for the creation of the pauper lunatic, since it was a series of local, institutional figures who determined the sanity or insanity of poor individuals (Adair et al. 3). According to Michel Foucault, the power relations which gave to one group (the functionaries of the new institutions) the authority to segregate the insane, was based on ethics: asylum and workhouse administrators functioned as moral judges over those people who deviated from morality; indeed, the philosopher sustained that in the classical age the concept of madness started to be linked to idleness, a moral sin, therefore isolating and punishing the mad was equivalent to condemning idleness and social uselessness (58).

Nevertheless, to fully understand the status of madness in the Victorian period it is necessary to consider the bigger picture of Victorian society. The field of science in particular was extremely influential, with its new theories and discoveries. In 1859 Charles Darwin published *On the Origin of the Species*, a revolutionary work that had the deepest impact on Victorian society, since it alleged that human beings are a species and that, like other animals, they evolve through a process of natural selection, and are eventually liable to extinction. These declarations, published by an affirmed scientist in a book destined not only to the scientific community, but to common readers as well, caused panic in Victorian society, which saw its religious belief in the almighty God of

creation crumble. In the agitation that followed, English society started to worry about its own degeneration, and an unspoken project originated, aimed at strengthening the genetic quality of the English population and giving birth to the perfect society. One of the ideologies that stemmed from Darwin's concept of natural selection, and had the building of the perfect society as its objective, was eugenics, that is, the idea that there were good genes in society that had to be preserved, and bad genes that needed to be isolated and swept away. Such genes, eugenic theories suggested, were at the origin of a wide range of issues, including criminality, poverty, immorality, and madness (Blackman 24). Lisa Blackman explains that:

The problem of madness, criminality, vice and unemployment were understood as the expression of inferior primitive psychic and bodily qualities and processes that were mapped onto particular populations through raced, classed, sexed and gendered distinctions. (24)

Therefore, English society started to isolate those individuals that were perceived as potential obstacles to the creation of the perfect society.

The rise of pseudo-sciences, and specifically of phrenology and physiognomy, had a crucial role in justifying beliefs and convictions about madness and derangement in general. These two pseudo-sciences, which claimed to be able to determine the character and disposition of an individual based on a study of their head (phrenology) and physical appearance (physiognomy), eventually became central for the determination of insanity. The theories developed within these fields maintained that madness was "written on the body" (Blackman 25), and could therefore be spotted out through an accurate study of the suspected individuals (Blackman 24). Madness was therefore perceived as a degradation, whose physical manifestation attested to an interior regression of the subject to a primitive state (Blackman 25). Blackman adds that "[t]his view of madness as a form of degeneracy was repeated to explain and reinforce the social positioning of groups who were considered as other to a white, male, middle-class version of rationality" (25), which means that certain social groups, such as the insane population, foreign individuals, but also children and women, believed to be potentially dangerous for society, since they carried in them the seeds of degeneration, needed to be subjected to the control of white middle-class men.

### 1.3. Asylums and moral management

In the nineteenth century, insane individuals started to be perceived as people who had to be confined, for the sake of the community, *as well as for their own*, and they had to be reformed and rehabilitated, so that they could return to society (Scull, *Solitary Afflictions* 93). Therefore, madness was no longer understood as beastliness and total absence of reason, but as a flaw in the mechanisms of the body which could and had to be repaired (Scull, *Solitary Afflictions* 40), in order for the mad individual to be restored to its productive place in society (Scull, *Solitary Afflictions* 93). This new concept is once again linked to the capitalist mentality that dominated the Victorian era, according to which “there are no mysterious incalculable forces that come into play, but rather that one can, in principle, master all things by calculation” (Weber qtd. in Scull, *Solitary Afflictions* 40). This conviction is further reflected in the emergence of an occupational group deemed to possess all the knowledge regarding insanity and its treatment: the so-called mad-doctors.

Due to the changing perception of madness, a movement of protest was raising in the nineteenth century, denouncing the living conditions of asylums as unbearable and the violent treatment of mad people as cruel and inhumane (Scull, *Solitary Afflictions* 92). As a consequence, a new treatment of the insane was devised, no longer based on beatings and physical restraint (elements which had to be relegated to the eighteenth century), but on the moral reform of the mad subject. The insane individual, now understood as “a man lacking in self-restraint and order” (Scull, *Solitary Afflictions* 93), had to be restored to its original, accepted form, through the techniques of moral management. This nineteenth century innovation in the management of insanity was based on a program of surveillance and humane interactions with the population of the asylum, aimed at the development of self-control, industriousness, and respect of the self and of others (Showalter, “Victorian Women” 158).

The development of human sciences, and specifically of psychology and psychiatry, promoted the analysis and categorisation of subjects, and encouraged the emergence of specific ideas on what was to be considered ‘normal’ and, by opposition, what was ‘abnormal.’ In the Victorian era, everything and everyone had to conform to the standard definition of normal, while abnormal behaviours had to be eradicated (D. Taylor 7). For

this eradication to take place, the newly emerged figure of the psychiatrist was to be entrusted with the management of the deranged population, but, in order to attain the final objective of a complete control over deviance and a reform of the insane, these people had to be institutionalised. Indeed, it was only through a complete institutionalisation that proper supervision and administration of these problematic elements could be obtained (Scull, *Solitary Afflictions* 41). Moreover, by governing insane individuals through an institutional system, the potential threat that they posed to social order was held under control, and eventually extinguished (Scull, *Solitary Afflictions* 39).

Such ideas can be identified as the main reason for the enormous diffusion of asylums and structures for the care of the insane in the nineteenth century. Indeed, Scull points out that while only a minor percentage of problematic subjects were destined to enter the asylum in the eighteenth century, in the nineteenth century, by contrast, the confinement to, and residing in, a dedicated structure was considered the only acceptable and effective solution, as well as the common practice (*Solitary Afflictions* 46). To further attest to this Victorian tendency to imprison the majority of problematic elements in the population (Scull, *Solitary Afflictions* 80), the Lunatic Act of 1845 required that all counties in the state dispose of an asylum to accommodate pauper lunatics (Showalter, “Victorian Women” 160) (besides, this law is consistent with the previously discussed decision to cut down outdoor relief).

Despite the efforts made to rehabilitate the collective idea of the asylum, which was still associated, in popular imagination, to eighteenth-century horror madhouses, the majority of asylum patients were still poor people, who often had no family to sustain them. Indeed, there still remained a stigma of institutional help, whereby families would do all they could to keep their relatives out of public institutions (Scull, *Solitary Afflictions* 134). This constituted a major issue for the mad-business, since asylums, asylum keepers and the medical staff, needed to rely on the income that respectable upper-class families would bring in if they decided to intern a relative. Consequently, to support the flourishing of the asylum, it was crucial to promote a more favourable image of the institution, one linked with humanity, care, and patience, and to insist on the idea of the reversibility of madness, thus stressing the competence of asylum keepers and care staff (Scull, *Solitary Afflictions* 135, 136). On this account, the forces of the economically-interested keepers joined together with the reformers in the propaganda for moral management.

The concept of moral management was based on the idea of the curability of madness, and more specifically on a re-education of the insane subject who, through moral discipline, had to be taught self-restraint and was to be remodelled “into something approximating the bourgeois ideal of the rational individual” (Scull, *Solitary Afflictions* 99). As a matter of fact, the concept of madness had once again evolved, and insanity was now perceived as a “deviance from socially accepted behaviours” (Showalter, *Female Malady* 29), therefore its treatment should now aim at an internalisation of bourgeois moral standards. In 1835 Prichard, an affirmed English psychiatrist, defined moral insanity as:

a morbid perversion of the natural feelings, affections, inclinations, temper, habits, moral dispositions, and natural impulses, without any remarkable disorder or defect of the intellect, or knowing and reasoning faculties, and particularly without any insane illusion or hallucination. (qtd. in Showalter, *Female Malady* 29)

As it can be inferred from this definition, the spectrum of moral insanity was extremely broad, so that the most inconsequential social abnormality, that is, a behaviour which trespassed the narrow boundaries of acceptable conduct, was liable to fall under the label of moral insanity (Showalter, *Female Malady* 29). Hence, a new treatment was devised for asylum patients: moral management, aimed at the restoration of patients’ morality and their rehabilitation into social life, through a system of surveillance and development of a strong will (Showalter, *Female Malady* 30), able to oppose the derangement of the mind. Moreover, the patients had to be engaged in a number of occupations, in order to develop self-discipline and self-respect (Showalter, *Female Malady* 37). In her study of insanity, Elaine Showalter reported the opinion of an eminent Victorian doctor on the theme of moral insanity: “the causation of insanity [...] is an affair of three W’s – worry, want and wickedness. Its cure is a matter of three M’s – method, meat and morality” (*Female Malady* 30).

Samuel Tuke, considered the initiator of the reforming movement as far as English asylum managers are concerned, in 1813 published an account of the method of moral treatment, as it was applied in the York Retreat (Scull, *Solitary Afflictions* 97), thus consecrating moral management as the most applied form of treatment in nineteenth-century English asylums. The treatment he proposed, which was later applied and



elaborated by other psychiatrists, consisted in a humane approach to insane patients, who did not need to be physically punished for their abnormalities. On the contrary, the medical staff of the asylum had to comply with the peculiarities of madmen, and the patient who would show signs of improvement had to be rewarded (Scull, *Solitary Afflictions* 171). The new system for managing insane individuals worked in reverse as opposed to the eighteenth-century method: patients were no longer chained and beaten for their immorality, on the contrary, they were praised when showing signs of renewed morality (Scull, *Solitary Afflictions* 97). The treatment was based on the establishment of a close relationship between insane subjects and care staff, whereby patients should develop a desire to please. Moral management relied heavily on the humanity of asylum patients, and on their capacity to feel gratitude: in sum, the eagerness of insane individuals to gain the esteem of the asylum staff was exploited in order to get patients to behave (Scull, *Solitary Afflictions* 170). Andrew Scull cites the words of Samuel Tuke himself to clearly explain the Victorian point of view:

'When properly cultivated', the desire to look well in others' eyes 'leads many to struggle to conceal and overcome their morbid propensities; and, at least, materially assists them in confining their deviations within such bounds, as do not make them obnoxious to the family'. (*Solitary Afflictions* 101)

Aside from the system of humane treatment, recompense, and desire to please, moral management strongly advocated also the importance of labour in the process of recovery of the patient. As a matter of fact, a treatment based on “therapeutic labour” was introduced in the institutions in the 1830s (Showalter, *Female Malady* 40), and Dr W. A. F. Browne, referring to the beneficial effects of this therapy on his patients noted that “all [patients] are anxious to be engaged, toil incessantly, and in general without any other recompense than being kept from disagreeable thoughts and the pains of illness” (qtd. in Showalter, *Female Malady* 41). Nevertheless, ultimately, although it prevented the use of chains, the system of moral management was merely a more sophisticated mode of coercion, where the patients were mentally controlled and forced to subdue their mad side through the desire to gratify and the desire for gratification (Scull, *Solitary Afflictions* 170). Indeed, not only did madmen restrain themselves in order to please, but, to cite Tuke once more, they “quickly perceive, or if not, they are informed on the first occasion, that their treatment depends, in great measure on their conduct” (qtd. in Scull, *Solitary*

*Afflictions* 170). Due to its appearance of humanity, as opposed to eighteenth-century brutality, moral management had an enormous success and, spread across all the country, it became a repressive apparatus capable of handling large portions of the insane population and enforcing conformity (Scull, *Solitary Afflictions* 172).

For a period, moral management seemed to function properly and to obtain the desired effect, indeed, Elaine Showalter collected a number of nineteenth-century testimonies of journalists attending public events at different asylums, where they described the situation of mad people in the institution during these celebrations. Notably, Charles Dickens published an article on *Household Words* after having participated to an event in St. Luke's Hospital for the Insane in 1851. In the article he stressed his admiration for the progress made in the care for the insane, he emphasised the humane approach to patients (Showalter, "Victorian Women" 158) and went on to describe some of the inmates, who would not be recognised as insane individuals, were it not for the adjectives Dickens employed, such as "weird" or "vacant" (qtd. in Showalter, "Victorian Women" 159). Similarly, another journalist reported: "with the exception of a slovenly method of moving their feet, you might have fancied they were so many country people dancing at a village wake or fair" (Showalter, "Victorian Women" 159).



Figure 1: *Lunatics' Ball*, Katharine Drake, 1850.

However, in spite of the efforts made by moral management, a conspicuous segment of asylum inmates turned out to be chronically ill. Showalter reports that in the second half of the nineteenth century asylums had become so overcrowded that they could only be considered custodial institutions (“Victorian Women” 160). Indeed, the increasing number of asylum inmates made it impossible to maintain that close relationship between patients and care staff, which was at the basis of the system of moral management (Scull, *Solitary Afflictions* 172). The reasons behind the accumulation of chronic cases in the asylums, and the motives which prevented the establishment of a different institution to care for chronic patients, were business-related. Indeed, the creation of alms-houses for those subjects deemed incurable had been suggested by the Lunacy Commissioners (Scull, *Solitary Afflictions* 269), but it was never realised since it would constitute a further considerable expense for the State coffers, which had already invested substantial sums in the building of asylums, and would be disadvantageous for asylum keepers (Scull, *Solitary Afflictions* 270). Apparently then, the only plausible solution left for asylums and their keepers was to continue to provide for chronic patients and redefine the goals of the institution in terms of safety, cleanliness, order and humanity of treatment (Scull, *Solitary Afflictions* 171).

Faced with the problem of an increasing trend in the rates of insanity, Victorian commissioners, doctors, and statisticians started to look for a justification for the thorny question, which was beginning to provoke some concern among the population. Initially, the blame was laid on the figures: commissioners claimed that the origin of the alarming statistics was the updated and more efficient method to collect data on insanity, which thoroughly registered all the cases, as opposed to the previous failing records collected by local authorities (Scull, *Solitary Afflictions* 339). Moreover, it was pointed out that, with the new system of inspection established in the 1840s, many cases were recognised as insanity, and thus entrusted to appropriate care, that in the previous years would not have had the same diagnosis (Scull, *Solitary afflictions* 340). Notwithstanding the plausibility of these hypothesis, differences in the classification and reporting of cases are insufficient to justify such a remarkable increase in the number of insane patients (Scull, *Solitary Afflictions* 341). Another thesis was later developed, according to which England had seen a severe increase in the insane population due to the extremely civilised nature of the country, indeed, madness was considered to be a disease affecting industrialised

and advanced countries (Showalter, *Female Malady* 24). Scull cites the words of Bucknill and Tuke, two affirmed nineteenth-century psychiatrists, who held that: “[...] in consequence of the greatly increased degree in which the emotions are developed, the result is, that an advanced civilisation tends to increase the number of the insane” (*Solitary Afflictions* 341).

The rate of insane subjects was rising even before the Lunatics Act of 1845, and a solution to the problem had already been identified: in 1828 the Madhouse Act was issued. The law established that in order to commit private citizens to an asylum, a certificate signed by two medical men was required (Showalter, *Female Malady* 26). This measure did not have the unique purpose of limiting the admissions to the madhouse, but it served primarily to prevent the sectioning of sane patients for economic reasons or for revenge (Showalter, *Female Malady* 26). Nevertheless, the Act proved to be unable to contain the problem. Indeed, it would seem that the obtainment of the required signatures was not overly challenging, as can be evinced by various cases of unjustified internment of sane patients. A first-hand testimony of this phenomenon can be found in *A Blighted Life* by Rosina Bulwer Lytton, where the novelist gives a detailed account of her experience in a madhouse, after having been incarcerated at the hands of her vengeful husband:

The most saddening thought that arises after the perusal of this Volume, is, that no change has yet been made in the infamous Lunacy Laws [...]. Never was a more criminal or despotic Law passed than that which now enables a Husband to lock up his Wife in a Madhouse on the certificate of two medical men, who often in haste, frequently for a bribe, certify to madness where none exists. We believe that under these Statutes thousands of persons, perfectly sane, are now imprisoned in private asylums throughout the Kingdom; while strangers are in possession of their property; and the miserable prisoner is finally brought to a state of actual lunacy or imbecility—however rational he may have been when first immured.

(ii)

Similarly, the novel *The Woman in White* by Wilkie Collins, object of study of this thesis, deals with a story of unjust institutionalisation of a woman, as a consequence of the cunning plan of her bankrupt husband. Furthermore, the first-hand account of Walter Marshall, a man who testified in front of the Parliament’s Select Committee on Lunacy

Laws in 1877 in the matter of his unjustified internment in an asylum, demonstrates how the doctors who were responsible for the signature of the certificate were often highly influenced by the accounts of the families (Berkencotter 11). This authentic document is also critical to understand the extent to which, once institutionalised, the alleged mad subjects were deprived of their right to self-definition, and, from the moment of the signature of the certificate, they were defined by the words on the document (Berkencotter 11).

Arguably it was this same reason, the fact that doctors had a substantial freedom in the determination of sanity and insanity, which contributed to the increase in the rate of insane individuals in Victorian England (Scull, *Solitary Afflictions* 350). Indeed, the term insanity had by then come to comprise a vast range of behaviours, peculiarities and anomalies, and its boundaries were so blurred, that potentially anyone who slightly deviated from the more and more strict conception of normality, could be labelled as such.

#### 1.4. In the wake of moral management

In the last decades of the nineteenth century the conception of insanity was undergoing further modifications, and its treatment changed accordingly. Due to the accumulation of chronic cases in the asylums, psychiatrists were losing their faith in the miracles of moral management and a general distrust was spreading with regards to the curability of insanity (Scull, *Solitary Afflictions* 324). As a matter of fact, a wave of pessimism had overcome Victorian society since 1859, after the publication of Darwin's work. As previously mentioned, Darwin's theories had disrupted all Victorian religious beliefs and had caused panic and anxiety about the survival of the species. Accordingly, insanity came to be understood once more as an extremely negative phenomenon and a danger to the safety of society (Scull, *Solitary Afflictions* 327). Indeed, the second generation of nineteenth-century mad-doctors, who have retrospectively been defined Darwinian psychiatrists (Showalter, *Female Malady* 104), understood madness to be an irreversible evolutionary regression to a more primitive state (Showalter, *Female Malady* 106). These doctors no longer relied on the humane approach of moral management, but instead decided to apply a scientific method to the treatment of insanity (Showalter, *Female Malady* 104); science seemed unable to find a solution to the problem, therefore they agreed that "Science, until it discovers a way of correcting bad stock [...] must say: "Do not propagate it"" (qtd. in

Scull, *Solitary Afflictions* 327). This quote from the superintendent at Ticehurst, denotes how madness was perceived to be a condition which was infecting society and which had to be stopped at all costs, and the use of the term “bad stock” is telling about the status that mad people held in the second half of the nineteenth century. Namely, they were abhorred, considered to be inferior, unfit, and lacking in willpower and self-control (Showalter, *Female Malady* 104; Scull, *Solitary Afflictions* 326). Indeed, the new conception of madness was a mixture of hereditary causes and immoral tendencies (Showalter, *Female Malady* 104). Charles Mercier, an English psychiatrist, pointed out that:

Insanity does not occur in people who are of sound mental constitution. It does not, like smallpox and malaria, attack indifferently the weak and the strong. It occurs chiefly in those whose mental constitution is originally defective, and whose defect is manifested in a lack of the power of self-control and of forgoing immediate indulgence. (qtd. in Showalter, *Female Malady* 108)

As a consequence of the updated idea of insanity and of the overpopulation of asylums, the treatment of insane subjects in the institutions changed, to be once more based on restriction; patients were poorly nourished, so as to keep them feeble and unable to revolt, they were sometimes drugged with opiates, they had to stick to a strict daily schedule, and order was maintained through a system of reward and punishment (Showalter, *Female Malady* 102).

In conclusion, the Victorians of the second half of the nineteenth century had accepted the idea that if poor people went mad it was not due to issues of poverty, starvation, anxiety, and destitution, but to their moral weakness and inadequacy (Showalter, *Female Malady* 108). They had (deliberately) forgotten the first two W’s – worry and want – and they had decided to blame wickedness and hereditariness. Therefore, instead of enquiring into the possible causes of insanity, and especially pauper insanity, Victorians had decided to rely on a policy of isolation, condemnation and mass segregation (Scull, *Solitary Afflictions* 328).

Nonetheless, towards the end of the nineteenth century, an inversion of trend vis-à-vis the eagerness to intern all kinds of patients can be noticed. More specifically, the Lunacy Act of 1890 required a more mindful approach in the examination and classification of

patients, in other words, it required doctors and officers to be more conscientious and scrupulous in their decision to intern subjects in the madhouse (Adair et al. 24) (arguably, one of the factors spurring the emanation of that act was the unsustainability of the asylum situation in the country). Moreover, in this period, the presence of family members or relatives claiming the potential lunatic would often lead to the release of the latter, even in cases of particularly troublesome individuals (Adair et al. 25), thus revealing a tendency to recur to the asylum as a last resort.

### 1.5. The status of Victorian women

She was intensely sympathetic. She was immensely charming. She was utterly unselfish. She excelled in the difficult arts of family life. She sacrificed herself daily. If there was chicken she took the leg; if there was a draft she sat in it – in short, she was so constituted that she never had a mind or a wish of her own, but preferred to sympathize always with the minds and wishes of others. Above all [...] she was pure. Her purity was supposed to be her chief beauty – her blushes, her great grace. In those days – the last of Queen Victoria – every house had its Angel. (Woolf qtd. in Gilbert and Gubar, *Literature by Women* 1385)

This quote, taken from Virginia Woolf's essay *Professions for Women*, concisely summarises the social position of women in the Victorian era; namely, they were believed to be, and needed to be, a compound of qualities resulting in perfection. The ideal Victorian woman has also been portrayed in her utmost excellence by the Victorian poet Coventry Patmore, who, in his narrative poem *The Angel in the House*, meditated on the notion of ideal femininity, tracing its features, and considering its capacity to comply with men's needs. As a matter of fact, the Victorian woman, who lived in a male-oriented society, was evaluated in binary opposition to man (Hoffman 265), and according to male-imposed parameters of appropriateness and usefulness. Patmore wrote: "Man must be pleased; but him to please // Is woman's pleasure; down the gulf // Of his condoled necessities // She casts her best, she flings herself" (Patmore 105). In addition, the selfless nature of women, and their propensity to submission and service, was justified in biological and evolutionary terms too. Indeed, not only had Darwin affirmed that in the course of history, due to the process of natural selection, men had developed superior mental and physical power as opposed to women, but he also claimed that female

inferiority and obedience were necessary for the preservation and development of the species (Showalter, *Female Malady* 122).

The original and fundamental dichotomy between the two sexes concerned male dominance and female submission (Hoffman 265), indeed the ideal Victorian woman was submissive to her father or husband, she should not have her own opinion, but had to sustain, and rely on, the words of her male relatives. Furthermore, Victorian society conceived a strong separation of the spheres of influence of male and female, specifically, men operated in the public sphere, while women belonged to the private and domestic sphere, hence, they were relegated to the realm of the house and of the family (Hoffman 265). The ideal wife had to stand as a moral support for her husband, she had to be a sort of spiritual beacon, showing her man the right way to follow. The dimension of spirituality of the woman was intensely emphasised, indeed, women, in their angel-like nature, had to be pure, selfless, and humble, but also quiet, fragile, and helpless. Women were judged according to their conformity or nonconformity to an idealisation of the female figure that “preceded and purified any individual woman's actual experience” (Voskuil 621). This idealisation was developing hand in hand with an objectification of the female figure, which was ultimately dehumanised (Hoffman 265). In their work *The Madwoman in the Attic*, Sandra Gilbert and Susan Gubar outlined the “eternal feminine virtues” (23) which this idealised and dehumanised woman possessed according to the male imagination, namely “modesty, gracefulness, purity, delicacy, civility, compliancy, reticence, chastity, affability, politeness” (23).

However, while on one hand women were deemed to be the repository of bourgeois social values, and they were idealised in poems, novels, and paintings, on the other hand they were considered inferior to man, they were the weaker sex (Hoffman 265). The Victorian ideal of women was a continuum of contradictions, and women had to carefully stand within the boundaries of their social role, slaloming among the numerous conflicting notions. The Victorian woman for example, in her spiritual nature, was considered to be an asexual being, she was a virtuous entity who could have no sexual desires, but at the same time her primary duty was to bear children (Hoffman 265). Reflecting on the living paradox which the figure of the Victorian angel constituted, Virginia Woolf, in *A Room of One's Own*, declared: “A very queer, composite being thus emerges. Imaginatively she is of the highest importance; practically she is completely insignificant” (41). And she



went on: “Some of the most inspired words, some of the most inspired thoughts in literature fall from her lips; in real life she could hardly read, could scarcely spell, and was the property of her husband” (42).

In the nineteenth century the white, middle-class man was the model-individual, and all other entities (such as women, children, foreigners, poor people, criminals) were considered to be inferior beings, and other to man (Cosby 2). The author Lois Tyson, in summarising Simone de Beauvoir’s work *The Second Sex*, and specifically her view on the essence of patriarchy wrote:

Men can act upon the world, change it, give it meaning, while women have meaning only in relation to men. Thus, women are defined not just in terms of their difference from men, but in terms of their inadequacy in comparison to men. The word woman, therefore, has the same implications as the word other. A woman is not a person in her own right. She is man’s Other: she is less than a man; she is a kind of alien in a man’s world; she is not a fully developed human being the way a man is. (qtd. in Shaghayegh 49)

Nevertheless, women lived in close contact with white middle-class men, and their otherness was a source of profound interest and inquisitiveness on the part of Victorian men. This morbid attraction gave rise to what Christina Cosby defined “the woman question” (2), namely, men’s obsession with the nature of women, their theorising on the female body, their analysing the inherent differences between men and women, their questioning on feminine needs and desires and their attempts to manage women (Cosby 2,3).

Ultimately, patriarchal Victorian society discovered the perfect way to dominate women, and that was through institutions, and most notably through marriage, which has been defined the system that sustains the architecture of bourgeois society (Hoffman 264). Through such man-made institutions as the law, marriage, and even asylums, women were controlled and condemned to a life of inactivity, domesticity and submissiveness, a life which had strict behavioural boundaries, and either way, inside the boundaries or outside of them, women were submitted to the regulation of such man-made institutions. What this thesis will try to demonstrate is that women who kept inside of the boundaries, that is, women who behaved according to the role society had assigned them, were

confining themselves inside of the patriarchal institution of marriage and inside of the idealised figure of the angel in the house; instead, women who ventured outside of the boundaries, that is, women who dared to express their opinion, to enter the public sphere, or merely to display a temperament who contravened the ideal of the Victorian angel, were confined, by men (and by other women likewise), through other institutions, as for instance the asylum, or the boarding school. This restraining world of man-made institutions was what caused Mary Wollstonecraft's heroine Maria, in *The Wrongs of Woman* to burst out: "Was not the world a vast prison, and women born slaves?" (qtd. in Showalter, *Female Malady* 1)

## 1.6. Female insanity in Victorian England

"There are quite as many who have lost their lives *out of* as *in* a lunatic asylum" (Nightingale qtd. in Showalter, *Female Malady* 62). Florence Nightingale's words epitomise what is one of the principal assertions of this thesis, namely, that Victorian women lived (and perished) in a tension of multiple theories, expectations and conventions, which constituted a sort of thread, on whose sides were the consumption of the self, caused by the denial and suppression of natural instincts and passions, and the label of madness, provoked by the indulgence in those same instincts. Victorian women needed to stand in perfect balance on the thread, or else they would be lost.

### 1.6.1. Madness outside of the boundaries

For it needs little skill in psychology to be sure that a highly gifted girl who had tried to use her gift for poetry would have been so thwarted and hindered by other people, so tortured and pulled asunder by her own contrary instincts, that she must have lost her health and sanity to a certainty. (Woolf 47)

This citation, taken once again from Woolf's *A Room of One's Own*, is a clear exemplification of the destiny which awaited Victorian women who dared to trespass the boundaries of their socially-established position. Indeed, in the Victorian period, many women who were labelled mad were not actually insane, they were mentally sane individuals interned in the asylum due to their defiance of the prescribed role and behavioural scheme that patriarchal society imposed on them. These women were punished for "*being* 'female' as well as for desiring or daring *not* to be" (Showalter,

*Female Malady* 4). Showalter noticed that many cases of female insanity reported and analysed by Victorian medical men characterised the allegedly insane woman as insubordinate, unruly and challenging the female position (“Victorian Women” 172). She went on to quote a Victorian doctor lecturing on the theme of hysteria, who claimed that the hysteric woman was not feeble-minded, but on the contrary she was “a female member of a family exhibiting more than usual force and decision of character, of strong resolution, fearless of danger, bold riders, having plenty of what is termed *nerve*” (“Victorian Women” 172). In other words, a woman who openly defied the female role, and showed that she had what Virginia Woolf defined “a mind of her own” (qtd. in Gilbert and Gubar, *Literature by Women* 1385), was vulnerable to the label of hysteria, and would consequently endure a harsh judgement and treatment on the part of doctors (Showalter, “Victorian Women” 172).

John Conolly, considered the father of English moral management, and the most tenacious advocate of the abolition of physical restraint in the asylum, having once professed the wrongness of instituting indiscriminately all immoral individuals, later shifted to a more extreme position. He stressed the necessity to intern in asylums all those women who disregarded the authority of the family, those women who needed to be tamed in order to be taught that “restraint over the passions without which the female character is lost” (qtd. in Showalter, *Female Malady* 48). From the words of the two Victorian doctors it is clear that this particular kind of female insanity, diagnosed as moral insanity, was a culturally shaped concept, which depended uniquely on the perception of the role that women should cover in patriarchal society, that is, on the behaviour expected from the Victorian angel.

The classification of insanity had become the scapegoat Victorians blamed on all occasions when women behaved in opposition to the prevailing ideology. Indeed, the plea of insanity had become rather common also in the law courts (Pegg 208), where insanity was appealed to by both trialled women, who thus sought to spare themselves the worst punishment, and by judges and juries, who were ready to welcome the motives of insanity when nothing else seemed to justify the criminal actions of those women (once again refusing to acknowledge the possibility of depraved, violent, self-interested female individuals) (Pegg 220). Samantha Pegg reported the case of Constance Kent, a 16-year-old girl who, in 1861 was suspected of the murder of her younger brother. Although some

elements pointed to her as the culprit of the murder, Constance was discharged and remained free from accusations, until in 1865 she confessed to the murder (209). Although she never recurred to the plea of insanity, both lawmen and the public opinion were convinced of her derangement. Evidence of this is the article appeared on *The Times* which reported:

It has been ascertained that the grandmother of Constance Kent was decidedly of unsound mind, and as has been already stated, her mother was for many years considered to be of weak intellect. An uncle of the accused has been twice confined to a lunatic asylum, so that should the evidence produced be sufficient to warrant the committal of the prisoner there is no doubt that the question of hereditary insanity will be raised as having prompted the perpetration of such a fearful crime. (qtd. in Pegg 210)

Moreover, it was noticed that Constance was menstruating at the time of the murder, a condition believed to exacerbate her mental instability. However, since there was no evidence of Constance's insanity, the girl was never sent to the lunatic asylum (Pegg 211), but neither was she executed for the murder (as she should have in those times, since she produced no explanation for her crime). Instead, she was sentenced to life imprisonment (Pegg 210). Analysing the case of Constance Kent, it is possible to observe the way in which the label of insanity was appealed to in order to preserve women's role of moral guardians of society (Pegg 223). Constance plead guilty, but the idea of a sane woman killing a child was unacceptable for Victorian society, it constituted a threat to the image of the angel-woman; far more acceptable was the idea of a mad woman committing the murder. Therefore, Constance Kent was labelled insane not from a medical or a legal perspective, but due to the social understanding of insanity (Pegg 222): her allegedly unstable condition allowed Constance's behaviour to be interpreted in the light of madness, and thus separated from the conduct of an ordinary, virtuous Victorian angel (Pegg 222).

Besides violence, assertiveness, and self-interest, sexuality was another taboo aspect in the ideal of the angel in the house. As mentioned above, the Victorian angel was an asexual being, therefore the displaying of sexual instincts was understood to be a symptom of madness, medically labelled as nymphomania (Showalter, "Victorian

Women” 173). The manifestation of overt sexuality, which comprised the use of obscene language, seductive manners, and sexual intercourse before marriage, could lead to committal to the asylum, even when the patient showed no other symptoms of insanity; in these cases, the justification on medical documents was “sexual immorality” (Showalter, “Victorian Women” 173). A compelling example of madness linked to sexuality is the fictional figure of Bertha Mason, the madwoman of Brontë’s *Jane Eyre*, whose madness and consequent segregation is explained by Rochester, her husband, in terms of viciousness and unchastity.

Female moral insanity was thus equated with the displaying of unfeminine behaviour, that is, when women revealed assertiveness, disobedience, and numerous other ‘flaws’ which alienated them from the ideal of the angel in the house. According to Victorian doctors, the traces of moral insanity on women could be detected during puberty, when girls started to be “irreligious, selfish, slanderous, false, malicious, devoid of affection [...] self-willed and quarrelsome” (qtd. in Showalter, *Female Malady* 56). Such symptoms had necessarily to be cured, and so families, and in particular male relatives, reached for doctors, who would readily sign the medical certificate allowing allegedly insane women to enter the asylum (Showalter, “Victorian Women” 174).

### 1.6.2. Moral management applied to women

Since moral insanity was “a morbid perversion of natural feelings” (Showalter, *Female Malady* 29), which in the woman corresponded to the manifestation of unladylike manners, the treatment of moral management in the asylum had to counter this defective disposition, precisely through the inculcation of feminine modes and feminine values. As a matter of fact, the life of women in Victorian asylums unfolded according to the strictest sex stereotypes of the period. Women were forced into immobility, they had scarce opportunity for movement and outside activity, as opposed to male lunatics, who instead had the possibility to go outside; indeed, physical exercise was considered a fundamental element in the treatment of male insanity (Showalter, “Victorian Women” 168). Moreover, while male lunatics had a wide range of manual jobs to choose from, both inside and outside of the asylum walls, female patients were confined inside of the asylum, and they were reserved inherently feminine jobs, such as doing the laundry, cleaning and sewing: all extremely static jobs related to housework (Showalter,

“Victorian Women” 167). Furthermore, female patients were given less food than men, they were kept under more strict surveillance and their mail was censored, too (Showalter, “Victorian Women” 166).

Due to the numerous restrictions to which they were subjected, female lunatics naturally grew restless, and rebellion was not infrequent. Showalter argues that this rebelliousness, and female patients’ urge to make themselves heard, was possibly the reason why they were committed to the asylum in the first place (Showalter, *Female Malady* 81). Both medical staff and male patients declared to be appalled at insane women’s display of unruliness, agitation and indecency, and a male patient even affirmed that “[f]emale lunatics are less susceptible to control than males. They are more troublesome, more noisy, and more abusive in their language [...]” (Showalter, “Victorian Women” 166, 167). However, such impressions on the part of men were the mere reflection of male expectations about feminine behaviour: they were shocked because women in the madhouse did not stick to the ideal of the perfect angel, silent, respectable, and static (Showalter, “Victorian Women” 167).

In the asylum women were constantly evaluated according to Victorian, feminine moral standards, and even their appearance was subjected to moral management. Indeed, women had to take care of their demeanour, and were expected to do so moderately, since an excess in the cure of the exterior appearance was considered a form of insanity, as well as an unkempt appearance. Moreover, insane women had to conform to the Victorian conception of decency in their attire and to the accepted criteria of middle-class fashion (Showalter, *Female Malady* 84). Hence, in the asylum gender stereotypes were imposed on female patients in all the spheres of their existence, from their occupations to their appearance. In this way moral managers were hoping to eradicate women’s freedom and their defiance of the typical feminine role, and replace their defective behaviour with a full adherence to the stereotyped notion of the angel in the house.

Despite Samuel Tuke’s contention that mad individuals did not have to be treated in a “childish or [...] domineering manner” (qtd. in Scull, *Solitary Afflictions* 98), this is exactly what happened in the treatment of insane women. Indeed, those women who were subjected to the treatment of moral management were considered as children, and they were handled accordingly. The structure of the asylum was itself designed to recall a

homelike environment or to remind patients of feminine institutions like boarding schools. Rosina Bulwer Lytton, in her memoir *A Blighted Life*, reported the instants of her first arrival in the madhouse: she wrote that she saw a group of women from the window, who, the keeper informed her, were the ladies residing at the asylum, busy collecting strawberries (36). Lytton later talked to the asylum manager, cautioning him that she would never be part of that group of ladies, joining in the activities of the madhouse, and the answer she received from the asylum manager was: “Mad-house, mad-house, nonsense! Lady [Lytton], this is no mad-house, and those are my children” (36, 37). As argued by Michel Foucault, the childlike, paternalistic treatment that insane women received in the asylum was non-other than a reinforcement of the patriarchal system, where the doctor played the role of the all-knowing father, whom the “children” (Lytton 37) obey and serve (Showalter, “Victorian Women” 169). Hence, female moral management applied the same strategies of the moral management theorised by Tuke: extreme emphasis was accorded to the relationship between patients and medical staff, but in the case of female lunatics this relationship was re-read in a patriarchal key. Indeed, women’s rebelliousness and disobedience in the asylum was no longer a fault in itself, but came to be considered an offense towards the father figure (Foucault 218). In Foucault’s words: “The entire existence of madness, in the world now being prepared for it, was enveloped in what we may call, in anticipation, a “parental complex.” The prestige of patriarchy is revived around madness in the bourgeois family” (217, 218).

In conclusion, moral management in female institutions consisted in a veritable reformation and re-education, whereby new ideas had to be instilled in the patients (Foucault 216). Women had to be subjugated and returned to the place in society where they belonged. They had to be returned to their original morality, that is, to the ideal of the Victorian angel in the house: the feminine values of obedience, service, silence, decency, submission, gratitude, and respectability were imposed on female asylum patients (Showalter, *Female Malady* 79). Showalter asserts that “what confined women in the Victorian asylum was precisely the ladies’ chain of feminine propriety and the straitjacket of a weird but mandatory feminine gentility” (*Female Malady* 98). Women in the asylum were thus obliged to live by the strictest stereotypes of their gender, and, because of this, life in the madhouse was not exceedingly dissimilar from the life outside of it. Indeed, insane women could find life in the institution a tolerable existence, since

aspects of the asylum stay like obedience, close surveillance, limited movements, scarce occupation, and sexual restraint were already part of their reality outside of the walls (Showalter, "Victorian Women" 169). In some cases women might find life in the asylum even more tolerable and more stimulating than what they could experience outside, so much so that Victorian doctors warned asylum staff not to retain women too long after their recovery, since they might get too attached to the animation of life in the asylum, and they might be reluctant to go back to their ordinary, uneventful life (Showalter, "Victorian Women" 169). A consideration that is quite telling of the dullness of life women might expect outside of the asylum fence.

### 1.6.3. Madness inside of the boundaries

"Why have women passion, intellect, moral activity – these three – and a place in society where no one of the three can be exercised?" (Nightingale 205). This quotation, taken from Florence Nightingale's *Cassandra*, clearly expresses the author's frustration with the constrictions Victorian women had to endure. As previously mentioned, female insanity was as present inside the Victorian asylum as it was outside of it. What this means is that the daily life of restrictions to which Victorian women were subjected was very likely to damage their mental health and eventually drive them mad. Indeed, as previously argued, female individuals in Victorian society had to show obedience to their male relatives, they had to repress their passions and demonstrate a meek disposition, they had scarce social interactions, they had to live in passivity, they did not receive an education and were condemn to a life of dependence (Showalter, *Female Malady* 57). The constant submission to such a suffocating discipline, and the realisation of the deprivations they had to undergo, was often calamitous for women's mental health.

In Victorian England there existed doctors who recognised the role of women's social situation in the progressive increase of insanity and mental instability among female individuals, and some of them explicitly denounced the mental and physical limitations to which women were subjected by society as possibly maddening (Showalter, "Victorian Women" 174). However, mentally afflicted women were still ignored when giving voice to the causes of their suffering, and medical men believed that the best cure for these women was distracting them from their problems by occupying them in feminine activities and sociality (Showalter *Female Malady* 61).



Florence Nightingale's *Cassandra* is a timely first-hand testimony of the sufferings of a white middle-class woman in what could be called the Victorian moral cage. The title of her work is already extremely revealing, since it is a reference to the figure of the Greek mythology, Cassandra, a Trojan priestess who received from Apollo the gift of premonition but, after refusing him, was punished with a curse. Apollo destined her to formulate true prophecies which nobody would ever believe. Nightingale's motives for choosing this title can be at best understood in the light of the quotation at the beginning of this subchapter, exposing women's curse of possessing intellect, morality, and passion, but being denied to ever put them to use. Cassandra and Victorian women have in common a potentiality which is destined to never be expressed and never be acknowledged.

What Florence Nightingale denounces in her work is precisely that the normality to which Victorian women were forced, their homologation to the ideal of the perfect Victorian angel, was physically and mentally dangerous for the targets of this culture. She points out that Victorian women never had time for themselves, time to invest in intellectual activities, or even time to reflect, because, being considered inferior to men, their time was worthless. She denounces the fact that women had grown accustomed to this condition, and had accepted that their time had to be at the disposal of others (Nightingale 211). Similarly, women had grown accustomed to inactivity, because the man-made ideal of the angel in the house portrayed them as quiet and passive. Women had learnt to subdue their passions, and they even disavowed them. In order to comply with the patriarchal ideal of the Victorian angel, women had become hypocrite, mothers were telling their daughters that women had no passions, while they themselves were burning on the inside (Nightingale 206). Most of all, Nightingale wrote against women's impossibility to use their brain, claiming that it was physically impossible for them to cultivate their intellect, because they lacked the stimulus, the time, and they were not educated (Nightingale 209). This unbearable condition, the mental atrophy, and the moral starvation to which they were condemned, could lead them to madness (Showalter, *Female Malady* 62). Indeed, in *Cassandra*, Nightingale holds that the endless small frustrations to which Victorian women were subjected daily, their scarce social life and their essential inactivity would bring them to exhaustion. She writes:

My people were like children playing on the shores of the eighteenth century. I was their hobby-horse, their plaything; and they drove me to and fro, dear souls! never weary of the play themselves, till I, who had grown to woman's estate and to the ideas of the nineteenth century, lay down exhausted, my mind closed to hope, my heart to strength. (232)

However, the depression and illness that women experience need to be fought off, since they are forms of resistance, but far less effectual than insurgency (Showalter, *Female Malady* 65). What Nightingale does, is not merely denouncing the restraints to which women were forced, she also calls for a revolution, she encourages women to feel the pain, to stop the hypocrisy, to stop pretending that the angel ideal is real, or even veritable, to stop acting in accordance to conventions that men have made for women, and instead acknowledge the sufferance and the frustration of their condition (208). "Passion, intellect, moral activity - these three have never been satisfied in woman. In this cold and oppressive conventional atmosphere, they cannot be satisfied" (Nightingale 208).

*Cassandra* is an essay based on Nightingale's own experience as an upper-class woman in Victorian England. It reflects the tension she felt between her role as a dutiful daughter and her hidden interior monstrosity, which sought stimulus and self-expression; a tension which exasperated her and caused her to suffer from mental instability (Showalter, *Female Malady* 63). This same interior monstrosity has been reinterpreted by Sandra Gilbert and Susan Gubar in their work *The Madwoman in the Attic*: the two authors argue that this creative monstrous self to which Nightingale refers, acquired in nineteenth century novels the shape of the fictional character of the madwoman. Indeed, they maintain that mad female characters in Victorian fiction are the representation of the writer's double, who can give voice to the writer's anger and exhaustion towards the strict patriarchal conventions (Showalter, *Female Malady* 4). This belief echoes the voices of other feminist scholars that advanced that those women who attempted to put to use their creative potential in a patriarchal society were often bestowed the label of madness. This recalls once again Virginia Woolf's words in *A Room of One's Own*:

When, however, one reads of a witch being ducked, of a woman possessed by devils, of a wise woman selling herbs, or even of a very remarkable man who had

a mother, then I think we are in the track of a lost novelist, a suppressed poet [...] crazed with the torture that her gift had put her to. (47)

### 1.7. Victorian medical understandings of women

“La donna è mobile // Qual piuma al vento, // Muta d’accento - e di pensier” (Verdi 23). This quotation, drawn from Verdi’s *Rigoletto*, composed in 1851, is a striking example of how Victorian society understood women to be. What the opera librettist Francesco Maria Piave tried to express in these words is woman’s fickleness, and the mutability of her words and thoughts. Indeed, in the nineteenth century, women were believed to be irrational beings, governed by their emotions and biologically unstable. They were assumed to be physically and mentally inferior to men, an assertion which had its scientific representative in Charles Darwin (Hachaichi 94). In the Victorian popular imagination women were linked with irrationality, as opposed to men, understood to be the embodiment of rationality (Showalter, *Female Malady* 2). Grounded in this binary opposition was also the conviction that men were strong and stable, while women were the weaker sex, as evidenced by the words of a Victorian physician, addressed to his colleagues: “We are in fact, the stronger, and they [, women,] the weaker. They are obliged to believe all that we tell them. They are not in a position to dispute anything we say to them, and we therefore, may be said to have them at our mercy” (qtd. in Showalter, “Victorian Women” 179). Such domineering affirmations were the natural consequences of a culture which understood femininity itself to be some sort of pathology, whose symptoms were vulnerability, volatility, and insanity as well (Showalter, “Victorian Women” 180).

In the nineteenth century, theories on women and insanity had gone so far as to claim that the female sex was biologically predisposed to madness, and even that madness was the true reality of woman’s essence, when it was not hidden and leashed. Women’s nature was a mystery that male rationality was able to unveil (Showalter, *Female Malady* 3), and that women themselves could not resist: “[Women] cannot choose but to be women; cannot rebel successfully against the tyranny of their organization [...]” (Maudsley qtd. in Hachaichi 94). Once again, this contraposition of male and female natures had a scientific validation: Henry Maudsley, the father of Darwinian psychiatry, held that “there is sex in mind as distinctly as there is sex in body” (qtd. in Hachaichi 94), an affirmation

through which he not only justified women's subservience to men on biological basis, but he also supported his thesis on feminine mental instability. Indeed, he held that, being women prone to mental derangement, if they should attempt to equate themselves with men, and employ themselves in mentally demanding activities, thus trying to defy their nature, they would be sure to suffer a mental breakdown (Showalter, *Female Malady* 123). Maudsley claimed that women who spent their time studying and training their intellect would become mentally ill due to their unstable nervous dispositions and to the limited energy in their body, which was not intended for mentally draining activities (Showalter, *Female Malady* 125). The result would be sexually ambiguous individuals, "something which having ceased to be woman is yet not man" (Maudsley qtd. in Showalter, *Female Malady* 125), and the idea of these monstrosities was so alarming to Victorian families that many decided to prevent their daughters from studying. This is the fate that Virginia Woolf had to face when, at fifteen years of age, she was forbidden to proceed in her studies (Showalter, *Female Malady* 128).

What needs to be pointed out is that the majority of medical claims on female insanity in the nineteenth century were allegations with little to none scientific basis, so much so that Elaine Showalter compared the language of nineteenth-century psychiatry to that of fiction, since it was a language of culturally determined suppositions, which never found any confirmation in scientific analysis (*Female Malady* 5). As a matter of fact, many of the conjectures which Victorian physicians maintained with regard to female insanity actually stemmed from misogyny.

Out of these baseless suppositions, the "English malady" (Showalter, *Female Malady* 7) produced by industrialisation and high civilisation, found its female counterpart in the "female malady" (Showalter, *Female Malady* 7), a pathology specifically linked to the conjectured irrationality and instability of female nature (Showalter, *Female Malady* 7). A further element of what Showalter claims to be a feminisation of madness in the nineteenth century is the progressive masculinisation of the role of asylum managers. Indeed, according to the feminist scholar, a polarisation took place in Victorian England whereby women were gradually relegated to the role of patients, whereas men occupied the place of the doctor, thus reinforcing the patriarchal system ("Victorian Women" 165). While this could be considered a mere speculation on the part of Showalter, as argued by Busfield (259), what is actually verifiable is that in the second half of the nineteenth

century, approximately starting from the massive implementation of asylum structures as a consequence of the Lunatics Act of 1845, the number of women managing institutions for the insane diminished drastically, and in 1859 the Commissioners in Lunacy revealed their intention to allow only (male) doctors in the role of asylum managers, since insane individuals needed medical care; they consequently discouraged the application of women to that position (Showalter, "Victorian Women" 164). As a consequence of this polarisation, female voices are hardly ever present in official documents regarding insanity; to have a glimpse of the female perspective on the topic it is necessary to look for it in literature, which is what this thesis proposes to do.

### 1.7.1. Victorian pseudo-sciences: physiognomy and phrenology

As theories on insanity began to flourish, attempting to determine the symptoms, the causes, and the possible treatments for mental disease, along with a certain panic among the population as regards the growing numbers of insane individuals, a need to clearly identify the disease also developed. In response to this need, a number of hypotheses were elaborated, concerning the outward appearance of insanity. Medical men were convinced that signs of mental degeneration could be detectable on the bodies of insane patients, either on their facial expressions, on their body, their posture or even the conformation of their head. Among the number of pseudo-sciences that developed during the course of the century, two were particularly successful, namely physiognomy and phrenology.

Physiognomy was based on the conviction that it was possible to discern the inner character of individuals from their outer appearance. In the first half of the nineteenth century a number of studies developed, that scrutinised the correlation between insanity and the physical aspect of the alleged lunatics. A chief supporter of the methods of physiognomy was John Conolly, the previously mentioned advocate of moral manager. Conolly was firmly convinced that the faces of insane patients could plainly illustrate the history of their lives and their moral corruption. In his study *The Physiognomy of Insanity*, published in the *Medical Times and Gazette* in 1858, he analysed some of the photographs of insane women, taken by Dr Diamond, the asylum physician who had popularised psychiatric photography in English madhouses (Showalter, *Female Malady* 86). In his work, Conolly argued that all human faces bear the testimony of the passing of time and of the different emotions and experiences human beings go through (C. L. R. 208), but in

the case of a deranged mind the lines that are imprinted on the countenance assume peculiar shapes, and the facial muscles, as well as the muscles of the rest of the body, escape the individual's control, thus generating an oddity of manners and gestures (C. L. R. 210).

Conolly's observations were extremely subjective and romanticised; they were made on the basis of previous knowledge on the portrayed patients, so that his deductions were inevitably biased. An example of his examinations is here reported, so as to give an idea of the working of physiognomy as applied by Conolly. Comparing two photographs of alcoholic patients, one of middle-class origins, the other of lower station, Conolly claimed that he could retrace their social origin and their higher or lower moral elevation, by the observation of their features. Both patients seemed to present a bloated face, but the upper-class woman had her eyes slightly raised to the ceiling, and her forehead was corrugated, thus suggesting a sense of despair, caused by the remembrance of a past uprightness which has been exhausted by the vile sin of alcohol consumption (C. L. R. 224). The lowly-born patient, on the other hand, presents sagging cheeks, large lips, and scrutinising eyes, which show unawareness. Her countenance, together with her untidy, poorly cut hair, her odd posture, and her overlooked apparel, suggest a low nature, which has never been touched by morality, and has been dissipated by vice (C. L. R. 225). These examples demonstrate that Conolly's observations were extremely biased, and his deductions dictated by the background knowledge on the patients. Arguably, if the information on the patients had been inverted, attributing to one photograph the social origins of the other subject, he would have come to the same conclusions, attributing to the supposedly higher-class woman signs of repentance and despair, but would have interpreted each feature in a different light.

However, by the mid-nineteenth century, the system of physiognomy started to be a debated one: in *All the Year Round* some articles appeared pointing out the arbitrariness of a diagnosis based on physiognomy, and questioning the practice of physicians to visit asylums as a means of training in the outward recognition of insanity (Currie 22). Furthermore, with the progressive affirmation of phrenology, physiognomy's validity seemed to lose credit, since the new pseudo-science was accorded a superior scientific basis (Hachaichi 88). The concept of phrenology was based on the idea that the brain is the organ of the intellect, and that each function and feature of the mind has a specific

place in the brain. Thus, it was possible to analyse the conformation of the cranium in order to understand which parts of the brain were more developed and which were underdeveloped. Based on these measures, according to phrenology, it was possible to outline the character of an individual (Hachaichi 89). The renowned writer George Eliot had herself a phrenologist study the conformation of her skull, and, among other considerations, it was observed that she had a big head, which suggested the greatness of her intellect.

Be it phrenology or physiognomy, Victorian society started to analyse all individuals in order to isolate cases of mental degeneration; Maudsley himself invited husbands-to-be to analyse their future wives and look out for “physical signs ... which betray degeneracy of stock [...]. Outwards defects and deformities are the visible signs of inward and invisible faults which will have their influence in breeding” (qtd. in Showalter, *Female Malady* 107). This hunt for physical signs of derangement is once again linked to Darwinian theories on the evolution of the species, indeed, in Maudsley’s words the intent to prevent the reproduction of “bad stock” (Scull, *Solitary Afflictions* 327), and the consequent degradation of the race, is clearly discernible. Moreover, Maudsley’s affirmation demonstrates his misogynistic approach to madness, he invites men to scrutinise women in search for signs of hereditary insanity, since, according to Maudsley and his contemporaries, it is through women that insanity propagates in society.

### 1.7.2. Hereditariness of madness

Another important aspect of the Victorian understanding of insanity is its hereditariness. Indeed, Victorians were convinced that mental deficiencies, like physical traits, were handed down among generations. Darwinians, in particular, sustained that insanity among paupers was not caused by deprivation and by their dismal life conditions, but rather by a biological inferiority: “that the poor went mad proved that they were inadequate persons, who demonstrated their inferiority by being poor and crazy in the first place” (Showalter, *Female Malady* 108). As previously hinted, Darwin’s publication, along with the economic depression of those years, fostered social anxieties about the decay of the race, which degenerated in theories on eugenics whereby the “tainted hereditary pool” (Showalter, *Female Malady* 109) had to be limited through selective breeding (Showalter,

*Female Malady* 110). Among the most fervent supporters of the theories on hereditariness was Henry Maudsley, who declared that:

There is a destiny made for each one by his inheritance; he is the necessary organic consequent of certain organic antecedents; and it is impossible he should escape the tyranny of his organization. [...] [There exists] an instinctive perception of the law by which the sins of the father are visited upon the children onto the third and fourth generations. (qtd. in Showalter, *Female Malady* 114)

The hereditariness of insanity was commonly accepted as a fact by the majority of Victorians; there is testimony of Dickens having refused to publish on *Household Words* a number of literary works dealing with the issue of hereditary insanity since, according to him, the problem was too close and personal for many of the readers (Wynne 52). Equally commonly accepted was the notion that women were the greatest vehicles of the transmission of insanity within a family, so much so that “the greatest tendency of mothers to transmit insanity to their female children” (Showalter, *Female Malady* 123) was generally acknowledged by psychiatrists as the major cause for the prevalence of insanity among women (Showalter, *Female Malady* 123).

### 1.7.3. The reproductive and nervous systems

What Showalter has termed the “female malady” (Showalter, *Female Malady* 7) was a diagnosis of insanity associated to complications in the reproductive system, understood to be particularly connected to the nervous system (Showalter, “Victorian Women” 169). The female lifecycle was accorded great importance, indeed, from puberty to menopause, women’s constant changes were believed to be extremely trying and destabilising. Victorian physicians held that: “the functions of the brain are so intimately connected with the uterine system, that the interruption of any one process which the latter has to perform in the human economy may implicate the former” (qtd. in Showalter, *Female Malady* 56). To which Showalter ironically added that “given so shaky a constitution, it seemed a wonder that any woman could hope for a lifetime of sanity [...]” (*Female Malady* 56). Women’s reproductive system was believed to predispose them to insanity, because it rendered them emotional and irrational, and its interferences with the normal functioning of the female organism were particularly intense during menstruation and during those period in which the reproductive system was evolving, namely, puberty,



pregnancy, childbirth and menopause (Showalter, *Female Malady* 55). A timely example of this conviction is provided by the case of Constance Kent: to support the hypothesis of insanity as a reason for Constance's actions it was noted that the girl was menstruating at the time of the murder, a condition understood to exacerbate her mental unbalance (Pegg 210. 211).

Besides the centrality of the reproductive system, another important aspect of Victorian notions on female insanity was the belief that madness was a disease of the blood. The importance of blood involves the concern for menstrual discharge, whose interruption was deemed problematic. Therefore, doctors attempted to control the menstrual flow through a number of remedies, including diet, the application of leeches, and even the recurrence to hipbaths (Showalter, "Victorian Women" 170). Moreover, women were prevented to study and apply themselves in mentally demanding activities on the basis that the energy required for such a mental effort would be an impediment to the correct flowing of the menstrual cycle (Showalter, *Female Malady* 125). By the last decades of the nineteenth century, physicians had come to identify the uterine apparatus as the source of all female diseases, for which the most disparate countermeasures were devised (Showalter, "Victorian Women" 176). However, according to Elaine Showalter, the apparent doctors' need to control the female reproductive system would stem from fear of female sexuality, rather than from all the diverse theories on insanity (Showalter, *Female Malady* 74), especially if women's sexuality would lead to rebelliousness on their part. Indeed, male doctors felt the urgency to "menage women's minds by regulating their bodies" (Showalter, *Female Malady* 75), a necessity that degenerated progressively, and reached its peak in the second half of the nineteenth century, with Isaac Baker Brown, a doctor specialised in clitoridectomy, that is the surgical asportation of the clitoris, as a treatment for female insanity (Showalter, *Female malady* 75). The majority of the issues he promised to cure through the practice of clitoridectomy had in reality nothing to do with the reproductive or nervous system, which his practices wished to target. A girl in her twenties was operated because she would not obey to her mother and she would engage in "serious reading" (Showalter, "Victorian Women" 177), another was guilty of being too accommodating with men and showing lack of politeness, but he even performed surgery on epileptics, paralytics, and on women who wanted to divorce their

husbands (Showalter, "Victorian Women" 177). The performance on women of this cruel, unmotivated, and humiliating practice leads to Showalter's conclusion that:

Clitoridectomy is the surgical enforcement of an ideology that restricts female sexuality to reproduction. The removal of the clitoris eliminates the woman's sexual pleasure, and it is indeed this autonomous sexual pleasure that Brown defined as the symptom, perhaps the essence, of female insanity. (*Female Malady* 77)

The circle is thus closed, since the autonomy that is stressed in this last consideration recalls once again Florence Nightingale's call for employment, intellectual work, autonomy, freedom. All around the perimeter of this circle, it appears evident that the discourse of female insanity has been exploited by Victorian men to restrict women, physically and mentally, and confine them into the figure of the angel in the house. Outside of that scheme were madness and humiliation. Insanity was employed as a threat, as a sword hanging over women's heads and ready to fall at the first misstep.

In conclusion, the theme of insanity was central in Victorian England, where a growing preoccupation with people's sanity reflected economic worries of the newly industrialised society. Indeed, in the industrial society citizens were evaluated according to criteria of productivity, and insane individuals started to be perceived as burdens weighting on social wealth, and as a problem that needed to be managed. A number of hypotheses speculating on the causes of insanity originated, along with theories on how the insane population had to be treated. The Victorian misogynistic assumption that women were the chief propagators of insanity in society caused women, and their bodies, to be under the microscope. Therefore, medical men began to produce theories on female insanity: on one hand they believed insanity to be hereditary, and transmissible especially among generations of women; on the other hand, they started to distinguish female insanity from a universal conception of mental illness, indeed, insanity in women was perceived to stem from their biological predisposition to derangement. According to Victorian theories, women's reproductive system was connected with their nervous system, and caused women to be emotional and irrational. Starting from such suppositions a further idea of female insanity as linked with the menstrual cycle developed, giving birth to a set of

prescription for women, instructing them on how to behave in order to avoid the risk of mental illness.

Thus, Victorian women lived among a number of contrasting theories on insanity, and a series of directions dictated by medical authorities and common wisdom, that ultimately limited their freedom. Women's bodies were thus controlled and regulated by men, who started to police the boundaries between sanity and insanity, according to a set of theories that had no scientific evidence. Men were also invited to analyse the external appearance of their wives, looking for signs of mental disease. A process was thus taking place, whereby men occupied the position of doctors, whereas women, in consequence, were cast in the position of patients. According to contemporary theories, signs of insanity were not only detectable in women's appearance, through phrenology and physiognomy, but also in their behaviour: women's transgression of the narrow boundaries of feminine propriety was believed to be a symptom of mental illness.

Women were supposed to be biologically inferior to men, and they were expected to be obedient, passive, quiet, and dedicated to the duties of the home. Women who transgressed this angelic model were diagnosed with moral insanity, which was cured, in the asylum, through a doctrine of adhesion to middle class values of propriety. Indeed, the treatment of moral management was based on a series of gender stereotypes that were imposed on women and had to be internalised, in order for patients to be proclaimed sane once again. The label of insanity was thus used by Victorian society as a tool to limit women's freedom: when women manifested rebellious energies, transgressing the passivity expected from them, they were immediately labelled insane and enclosed in the asylum.

However, while the label of insanity lay outside the boundaries of feminine propriety, actual mental illness could lay inside those boundaries. Indeed, the immobility to which women were condemned frustrated their potential and could lead them to insanity, as argued by Florence Nightingale. Hence, Victorian women existed among several definitions of insanity, and the risk for them of being labelled insane and being locked up in the asylum was always looming around the corner.

## 2. Madness in Brontë's *Jane Eyre* and Collins's *The Woman in White*

Given the context on the treatment of insanity in the eighteenth and nineteenth century, this thesis analyses the representations of mad women in Charlotte Brontë's *Jane Eyre* and Wilkie Collins's *The Woman in White*, and it aims to confront the ways in which the label of deviancy, or the threat whereof, is employed by male characters in the two novels to curb women's freedom and to confine and silence them. The two novels, which were published in 1847 and 1860, respectively, have been examined, especially in the last decades, in their representations of mad characters. The figure of Bertha Mason, *Jane Eyre*'s madwoman, has been discussed by feminist scholars and critical race theory, and it has been interpreted as the personification of the rebellion of minorities (notably in S. Gilbert and S. Gubar's feminist study *The Madwoman in the Attic*). Collins's work too has been read from a feminist perspective as a novel that denounces the helplessness of Victorian women against their all-powerful male relatives, and particularly a denunciation of the Victorian male practice of having troublesome women locked up in asylums, if they disturbed their plans; such practice was rather common in mid-nineteenth-century England, as such famous cases as Rosina Bulwer-Lytton's and Charles Dickens's wife's demonstrate. The two novels are deeply concerned with the theme of female madness, which, as said in the previous chapter, was a topic widely discussed in the decades of publication of the books. This chapter will show that the representations of madness in the two works were deeply influenced by the beliefs and theories on madness which circulated in the nineteenth century; it will compare the different figures of female madness, tracing out the differences and the similarities in their characterisation as insane individuals. Finally, it will argue that the novels portray Victorian women's struggle to escape different labels of insanity.

Both Brontë and Collins were deeply involved in the conversation on psychology and insanity taking place in their time due to the social circles they frequented. Indeed, for what concerns Brontë, Shuttleworth asserts that the reverend Brontë, the writer's father, as well as Charlotte herself and the rest of the family, were informed on the scientific and religious discourse of the time and held close relationships with scholars and medical men

(24).<sup>1</sup> In those years, the attention focused on the concept of self-control, which was central not only to the regulation of individuals, but also to the regulation of society (Shuttleworth 23). The idea of self-control had wide currency in mid-nineteenth-century England, and became a dominant element in Brontë's novels, which are interspersed with the language of psychology and science (Shuttleworth 11). Shuttleworth reports that the Brontë family used to frequent the library of the Keighley Mechanics' Institute, where the books available to them consisted primarily in manuals for self-improvement and treatises on medical theories such as phrenology; Esquirol's work on insanity was reportedly also present (26). The information about Charlotte Brontë's early readings attest to her knowledge of such contemporary themes, which later would enter the pages of her novels. In particular, Brontë's works address the subject of insanity and its threatening potential invisibility, two issues which were often debated in the context of nineteenth-century psychology (Shuttleworth 43). Indeed, the revelation of madness is a focal point in *Jane Eyre*, where knowledge becomes power and where control is acquired by appropriating someone else's secrets (Shuttleworth 41), and it is a central element of Victorian psychiatry too. The new conception of invisible insanity, a potential threat that might lurk in the body for years before manifesting itself, elevated the physician to the role of medical detective, who had to investigate and interpret the signs of a hidden disease (Shuttleworth 42). As a consequence, ideas of control and self-control became fundamental requisites in the management of the psyche, and thus emerged as pivotal elements in Brontë's fiction as well. Finally, Charlotte Brontë included in her novels elements from phrenology and physiognomy, two prominent pseudo-sciences which were based on the idea of observing external signs in order to decipher information on the internal workings of the mind (Shuttleworth 59). The discourse about phrenology permeates *Jane Eyre*, and it is the battlefield where the power struggle between Jane and Rochester is fought.

In Collins and Brontë's time the question of insanity, its invisibility, and the methods to detect it were so widely discussed that the boundary between sanity and insanity was no longer evident; an article published on *The Times* in 1853 asserted that:

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<sup>1</sup> Brontë kept up to date on the socio-economic and political debate through the reading of newspapers (specifically the *Leeds Intelligencer* and the *Leeds Mercury*) and her father's political activity (Shuttleworth 19).

Nothing can be more slightly defined than the line of demarcation between sanity and insanity [...]. Make the definition too narrow, it becomes meaningless; make it too wide, and the whole human race becomes involved in the dragnet. In strictness we are all mad when we give way to passion, to prejudice, to vice, to vanity; but if all the passionate, prejudiced and vain people were to be locked up as lunatics, who is to keep the key to the asylum? (J. Taylor, *Secret Theatre* 27)

The fine line between sanity and insanity constitutes the fundamental subject of Collins's novel *The Woman in White*. Narrating the history of a sane woman committed to an asylum under a false identity by her scheming husband, the novel stages one of the favourite literary tropes of sensation fiction (Small 184). Wilkie Collins's work, published in 1859, was timely, since in those years the English society was facing a lunacy panic due to the uncovering of several incidents where sane individuals had been unjustifiably pronounced insane and had been committed to medical care (Small 184). The circle of Collins's close friends and acquaintances, which comprised influential men of law, authors such as Charles Dickens and Edward Bulwer-Lytton, and philosophers such as Herbert Spencer (J. Taylor, *Secret Theatre* 29), was itself involved in the contemporary debate on insanity, and intimately affected by the lunacy panic, due to the wrongful commitment of Rosina Bulwer-Lytton, wife of Edward, to an asylum. In the framework of a failing marriage, Rosina Bulwer-Lytton, despising her husband, started to seek revenge by sending vindictive letters to the press, whereby she humiliated her husband and accused him of a series of vicious behaviours (Small 187). Edward Bulwer-Lytton's answer was perfectly in keeping with the times: he convinced his friends John Conolly and L. Forbes Winslow, two influential figures in the psychiatric sphere, to sign a certificate which recommended the committal of Rosina to an asylum (Small 189). However, the wife's friends, with the help of Bulwer-Lytton's political opponents, managed to make Rosina's protestations and denunciations heard, and the impact of the ensuing scandal was such that the two medical men had to retract their diagnosis (Small 189). Although the source of inspiration for Collins's work has been identified in the real case of the Marquise de Douhault, which consisted in a story of mistaken identity where the identity of a dead person was imposed on a living individual (J. Taylor, "Narrative of Moral Management" 54), the general plot of unjust commitment was extraordinarily close to Collins. Aside from the Bulwer-Lytton case, there was another analogous circumstance

taking place inside of Collins's social circle, one that involved his close friend and renowned author Charles Dickens. Like Bulwer-Lytton, Dickens was going through a crisis in his marriage and his wife, Catherine Dickens, was acquainted with the husband's affair with a young actress. Apparently, Catherine and her mother attempted to put an end to the relationship in order to save the marriage, but Dickens opposed their efforts, allegedly by threatening his wife to commit her to an asylum (Small 190). Small reads Dickens's declarations about his wife's inadequacy for her role of wife and mother, as the author's veiled threat to his wife:

Sutherland draws attention to a phrase which most biographers have found inexplicable: 'her always increasing estrangement' from her children is, Dickens claims, making worse 'a mental disorder under which she sometimes labours'. [However] there is no other evidence that Catherine Dickens was psychologically unstable. (190)

According to Small, by making these claims Dickens did not want to actually arrange his wife's committal to an asylum, but rather show her what would happen if she kept on interfering with his affair (190). This further instance of the label of insane used to threaten a woman's freedom demonstrates Collins's proximity to such events, which he later incorporated in *The Woman in White*. In the novel Collins also displays a profound knowledge of the debate on insanity, its treatment, and the laws regulating mental health. Indeed, among his friends were also Charles Reade, involved in the lunacy reform (J. Taylor, *Secret Theatre* 29) and author of *Hard Cash*, a novel where he attacked the alienists' profession and exposed the abuses taking place in private asylums (Small 185), and Bryan Procter, to whom *The Woman in White* is dedicated. Procter was Lunacy Commissioner at the moment in which Collins was writing his novel, and was probably the author's source for much information concerning lunacy laws and asylum conditions (Small 186). *The Woman in White* was serialised between 1859 and 1860, a period during which a Parliamentary Select Committee was investigating the state of the legislation regulating insanity and asylums, and its suitability to protect mentally ill individuals and the allegedly insane (Leavy 92). Therefore, Collins's novel was a response to contemporary anxieties and a not-so-veiled denunciation of the mechanisms governing the admission to the asylum.

## 2.1. Representations of insanity

In *Jane Eyre* and *The Woman in White*, Charlotte Brontë and Wilkie Collins deal extensively with the theme of madness, and they focus specifically on forms of female insanity. The two novels display a range of different representations of insanity, and the influence of nineteenth-century studies on madness is evident in the characteristics of insane, or allegedly insane, individuals in the novels. While the portrayal of mad subjects and their symptoms varies profoundly from novel to novel, as well as within the same novel, one point that is shared by all mentally ill characters is the uncertainty of their insanity. Indeed, the boundaries between sanity and insanity are blurred in the two works, and many of the female characters appearing in the novels, including those who are deemed to be sane, could be at a certain point defined insane. Not only does this attest to the indeterminacy of the concept of madness, but also to the growing narrowness of the boundaries delineating sanity, understood to be the adhesion to conventions and to propriety. A glaring example of the indefiniteness of the line distinguishing sanity from madness is the characterisation of Anne Catherick's insanity, which will remain unclear throughout all the narrative. Anne is not entirely sane, but neither does her mental impairment require committal to the asylum (J. Taylor, "Narrative of Moral Management 52"); she hovers on the border of sanity, and her career as an asylum patient will be determined uniquely by the interests and schemes of other people. In *Jane Eyre*, too, the nature of Bertha Mason's mental disorder is not clear: Rochester, the only source of knowledge concerning Bertha's psychological degeneration, is oddly vague in his narration of the causes leading to his wife's imprisonment (Shuttleworth 167). In his account the "notion of the 'unbecoming' [...] shades directly into insanity" (Shuttleworth 50), proving once again the vagueness of the concept of insanity (Shuttleworth 12). This ambiguity, which characterised nineteenth-century debates on madness, along with the preoccupation for cases of wrongful confinement, can be summarised in a proposition featured in an article published on *All the Year Round*: "let us account no man a lunatic whom it requires a mad-doctor to prove insane" (qtd. in J. Taylor, *Secret Theatre* 103). Such sentence simultaneously expresses the uncertainty as to what should be considered insane, and the distrust towards the medical profession.

Bertha Mason in *Jane Eyre* and Anne Catherick in *The Woman in White* represent the different approaches to insanity adopted in the nineteenth century. Charlotte Brontë



portrayed Bertha Mason, the mad woman living in the attic at Thornfield Hall, as a demonic and beastly figure with a “savage face,” “bloodshot eyes,” “lips [...] swelled and dark” and “thick and dark hair” (Brontë 340, 341). The majority of terms used to describe Bertha and her actions emphasise her animality: she is referred to as “some strange animal”, a “clothed hyena” with “grizzled hair, wild as a mane” (Brontë 352); the noises she emits are compared to snarls and growls (Small 158). In her beastly qualities, masculine appearance and impressive physical strength, Bertha corresponds to a conception of madness typical of the eighteenth century, one in which insane individuals were perceived as beasts who had to be locked up. Indeed, the character of *Jane Eyre*'s mad woman seems to belong to a different timeline as opposed to the rest of the novel: her ghostly apparitions in the night and her “mirthless” (Brontë 125) laugh remind one of the monsters from Gothic literature. Other elements in *Jane Eyre* recall this eighteenth-century literary genre, such as the abandoned third storey of Thornfield Hall, which reminds the labyrinthine castles typical of gothic novels, the presence of a secret to uncover, and a veiled parallelism between Bluebeard and Rochester, whose numerous partners recall the wives of the gothic villain.

Despite the amount of feminist literature interpreting Brontë's mad woman as a symbol of rebellion towards Victorian standards of femininity, requiring the repression of female sexuality, Shuttleworth claims that Brontë's representation of Bertha does not actually deviate from the Victorian mindset (164). In fact, her characterisation of the mad woman embodies numerous stereotypes about madness, especially linked with the female body (Strovas, “No Rest” 391). According to nineteenth-century gynaecology and psychiatry, two fields extremely prejudiced by misogyny (Strovas, “No Rest” 388), “women were more vulnerable to insanity than men because the instability of their reproductive systems interfered with their sexual, emotional and rational control” (Showalter 55). The menstrual cycle was accorded an extraordinary power, since during the menstrual period women were believed to be particularly susceptible to insanity (Strovas, “No Rest” 389), as attested by this assertion by a respected Victorian physician: “The first appearance of this secretion is almost always accompanied with symptoms of hysteria, more or less severe; recurring also occasionally at each monthly period” (Shuttleworth 78). Charlotte Brontë's narration of Bertha's feats deliberately alludes to these theories by including several references to redness and blood and by connecting her character to the moon

(Strovas, “No Rest, 389). Indeed, Bertha’s crimes all take place at night, and Brontë points out that, in those occasions, the moon is “full and bright” (Brontë 245), or “broad and red, like a hot cannon-ball” (Brontë 371), or again “silver-white and crystal-clear” (Brontë 245).

Deeply linked to the discourse of menstruation is the theme of sexuality, a fundamental element in Bertha’s characterisation as a mad woman. Indeed, in Rochester’s account of the emergence of Bertha’s insanity, her “intemperate and unchaste” nature (Brontë 369) constitutes the main reason that led to her incarceration. This is in line with nineteenth-century theories on madness, according to which the manifestation of excessive sexuality was one of the main symptoms of female insanity (Strovas, “No Rest” 388). In her representation of madness, Brontë subscribed to Prichard’s concept of moral insanity: Bertha’s madness is expressed in terms of a vicious nature and a propensity for sin (Strovas, “No Rest” 385). Prichard defined moral insanity as:

a morbid perversion of the natural feelings, affections, inclinations, temper, habits, moral dispositions, and natural impulses, without any remarkable disorder or defect of the intellect or knowing and reasoning faculties, and particularly without any insane illusion or hallucination. (qtd. in Showalter, *Female Malady* 29)

As Showalter pointed out, this definition could potentially include all forms of behaviour which diverged from the strict social conventions imposed on Victorian women (*Female Malady* 29). Bertha Mason’s derangement seems attested, at the end of the novel, by her insane behaviour, her criminal intentions and her animality, but the initial reasons for her incarceration, her original madness, is explained uniquely in terms of a deviation from the angel in the house ideal.

Bertha is characterised by excess and by her inability to subdue and control her passions, to which she gives free expression. John Reid, English physician and psychologist, held that insanity consisted in a “deficiency in the faculty of self-control” (Shuttleworth 165): her lack of self-restraint is the reason Bertha is defined insane, and it is that which distinguishes Bertha from Jane. Thanks to self-discipline, instilled in her through moral management in Lowood, Jane has learnt to subdue her passions and has thus avoided the label of madness. Bertha, instead, is incapable of concealing her inner-self and her desires, a quality which Esquirol considered an essential requisite for sanity (Shuttleworth 165),

and thus stands in the novel as a model of negative womanhood (Shuttleworth 167). Her madness, despite being hereditary (Rochester narrates that Bertha's mother had a history of insanity as well, in accordance to Victorian beliefs on hereditary madness), is presented as being ultimately avertible (Strovas, "No Rest" 386). While Jane expresses pity towards Bertha on one occasion, pointing out that her mental illness is not her fault (Brontë 362), Rochester plainly blames his wife for her condition, since he is convinced that it was her vicious nature and her deliberate immoral choices that led to the eruption and degeneration of her malady (Shuttleworth 166). Therefore, the representation of Bertha shows the consequences of applying an out-dated system of management of insanity, based on physical restraint: her moral insanity, according to nineteenth-century theories, would require the treatment of moral management, based on a feeling of pity for the insane individual and on an attempt to cure them and save them. However, Bertha has no possibility to recover from her mental condition, in fact, her illness is aggravated since she is locked up in the attic at Thornfield and no pity is shown towards her. (Shuttleworth 160).

While in *Jane Eyre* Charlotte Brontë depicted Bertha Mason as a demonic and beastly mad woman, Wilkie Collins, on the other hand, through his representation of Anne Catherick and, later, of Laura Fairlie, subscribes to a more modern conception of insanity, presenting mentally ill individuals as victims of society (Leavy 114). Indeed, one of Collins's aims was precisely to dispel old beliefs concerning insanity (J. Taylor, "Narrative of Moral Management" 53), and uncover contemporary mechanisms regulating this social phenomenon. Collins's representation of insanity in *The Woman in White* revolves around the principles of moral management: the mad individual is perceived as an object of sympathy, which needs care in order to return to normality. This sympathy, along with the treatment of insane subjects as children, contributed to strengthen the connection between femininity and insanity (J. Taylor, "Narrative of Moral Management" 54). Anne Catherick's characterisation establishes her as the ideal subject for moral management (J. Taylor, *Secret Theatre* 105): her "partial insanity" (Shuttleworth 51) rendered her the perfect patient to be treated in order to meet the standards of behaviour expected from a Victorian woman. Indeed, as previously mentioned, the boundaries of sanity were defined according to Victorian ideals of middle-class domestic virtue (J. Taylor, "Narrative of Moral Management" 54). The symptoms

of Anne's insanity comply with the definition of monomania, which Prichard described as:

a form of Intellectual Insanity in which the understanding is partially disordered or under the influence of some particular illusion, referring to one subject, and involving one train of ideas, while the intellectual powers appear, when exercised on other subjects, to be in a great measure unimpaired. (qtd. in Shuttleworth 51)

Anne's monomania manifests itself in her fixation with wearing only white clothes, an obsession derived by another element which often recurs in her discourses: her love for Mrs Fairlie. As a child, Anne had spent some time with her cold and detached mother at Limmeridge House, where she had met Mrs Fairlie who, taking a fancy for the innocent child, had given her one of Laura's white dresses and had later remarked how nice the girl looked in white. From that moment on Anne Catherick had decided to wear only white garments, a strategy by which she could re-evoked the love and attention she received from Mrs Fairlie at Limmeridge, and which she lacked in her own family. In those days Mrs Fairlie had realised that Anne Catherick had a mild intellectual disability and had come to the conclusion that it was something treatable. She explained it to her husband, Mr Fairlie, in a letter:

I was left to discover (which I did on the first day when we tried her at lessons) that the poor little thing's intellect is not developed as it ought to be at her age. [...] [The doctor's] opinion is that she will grow out of it. But he says her careful bringing-up at school is a matter of great importance just now, because her unusual slowness in acquiring ideas implies an unusual tenacity in keeping them, when they are once received into her mind. Now, my love, you must not imagine, in your off-hand way, that I have been attaching myself to an idiot. (Collins 73, 74)

This condition from which Anne Catherick suffered, and could have recovered, did not require committal to a lunatic asylum, as Conolly's words suggest:

Another class of patients for whom a lunatic asylum is a most improper place, consists of those who [...] become affected with various degrees of weakness of intellect. [...] In this state there is a general imbecility of mind [...] but there is a little or no extravagance of action, still less is there any thing in the condition of

the patient which would make his liberty dangerous, or, if he were properly attended to and watched, even inconvenient to others or to himself. (qtd. in Leavy 111).

Nevertheless, Anne Catherick ends up in an asylum, due to a concatenation of reasons. On one hand, Mrs Catherick's coldness and lack of interest in her daughter led her to dismiss Anne's mental retardation as a form of insanity, without even considering the possibility of recovery. In her letter to Hartright she explains: "I do not profess to have been at all over-fond of my late daughter. She was a worry to me from first to last, with the additional disadvantage of being weak in the head." (Collins 691). Perceiving Anne as a burden and believing her to be insane, Mrs Catherick considered the asylum an appropriate solution. Moreover, in her confession letter the woman reports Anne's stubbornness in wearing white, a fixation which she had tried to oppose. Anne's disobedience, as well as her inability to manage her bursts of anger, were central elements in Mrs Catherick's compliance with Sir Percival's decision to commit her daughter to an asylum (Leavy 134). Once again sanity is defined according to the parameters of propriety, and Anne Catherick is committed to an asylum due to her acting outside of the boundaries of appropriate behaviour. On the other hand, another fundamental reason behind Anne's incarceration in the asylum was Sir Percival's scheme to silence her, since she had threatened to reveal his secret;<sup>2</sup> this corrupt motive met with the doctors' inability, or unwillingness, to understand that Anne's mental problem did not require commitment to the asylum (Leavy 112). Adult Anne has acquired in the novel the role of "deranged outcast" (Leavy 91), and her mental health, which did not get better since she did not receive the appropriate care, actually seems to have deteriorated, possibly due to the traumatic experience of the asylum (experience which, later on in the novel, will deeply traumatise Laura and cause mental damage). However, despite the gothic elements of her first appearance in the novel, where she is presented as a white ghostly apparition in the night, the characterisation of Anne's insanity is altogether realistic and based on contemporary theories on madness.

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<sup>2</sup> Sir Percival's secret is that he is an illegitimate child, and therefore is not entitled to his title and his property; however, Anne does not possess this knowledge, she merely threatens Percival with a sentence she had heard from her mother.

As Anne's unruliness as a child was interpreted as a symptom of her insanity and contributed to prompting her committal to the asylum, so did Jane's child rebelliousness. Indeed, Jane Eyre's bursts of anger against the Reed family, which culminated in an open confrontation with her aunt Reed, led the people around her to label her intemperance as insanity. After the episode of Jane's violent outburst against her cousin, John Reed, Jane reports that:

[...] Miss Abbot stood with folded arms, looking darkly and doubtfully on my face, as incredulous of my sanity. 'She never did so before,' at last said Bessie [...] 'But it was always in her,' was the reply. '[...] She's an underhand little thing: I never saw a girl of her age with so much cover.' (Brontë 8)

A few lines later Bessie, the maid, advises Jane: "you should try to be useful and pleasant, then, perhaps, you would have a home here; but if you become passionate and rude, Missis will send you away, I am sure" (Brontë 8). The excess of passions which Jane manifests in these occasions was not appropriate in a child, and especially in a girl, and therefore makes her fall within the category of madness as transgression from the principles of propriety. This assumed manifestation of mental derangement was considered a form of moral insanity; Prichard defined the potential characteristic of such morally insane individuals:

a female, modest and circumspect, [who] becomes violent and abrupt in her manners, loquacious, impetuous, talks loudly and abusively against her relations and guardians, before perfect strangers. Sometimes she uses indecent expressions, and betrays without reserve unbecoming feelings and trains of thought. (qtd. in Shuttleworth 50)

Such behaviour was unacceptable in women and children, whose sanity lay in emotional restraint (Shuttleworth 50). Hence, as Anne Catherick was committed to the asylum, so will Jane be sent to Lowood, where she undergoes a system of moral management aimed at the acquisition of self-control and at the submission of passions. In Lowood Jane did actually learn to control her emotions and her impulses, and this constitutes the main difference between her and Bertha: self-control determines the distinction between sanity and insanity.

In her adult life Jane dominates her passions through her firm will, but there is a second occasion in which she gets dangerously close to insanity, once again due to her passionate nature. If, as a child, her anger had been the cause of her ‘confinement’ to Lowood, as an adult it is her love for Rochester that threatens her mental stability. Indeed, the narration of her growing passion for her master is couched in terms of a progressive loss of self-control, which she understands as a gradual approach to insanity (Small 168). When seeing Rochester as she returns to Thornfield after her visit to the dying aunt Reed, Jane analyses the bodily sensations that the sight of him has provoked, and declares: “[...] for a moment I was beyond my own mastery” (Brontë 292). Her love for Rochester undermines her rationality and self-possession, and, according to Jane’s reading of the events, it takes her very close to actual insanity. This happens when the protagonist, after the discovery of Rochester’s previous marriage and of the existence of Bertha, is torn between her love for her master and the temptation to live with him outside of wedlock, and the love and respect for herself, which suggest that she should leave and preserve her moral values. Initially she feels too weak and incapable of leaving Rochester, her mind constantly shifts between the two alternatives: “I must leave him, it appears. I do not want to leave him – I cannot leave him.” (Brontë 360). However, at last her reason predominates over what she herself defines insanity:

I will respect myself. [...] I will hold to the principles received by me when I was sane, and not mad – as I am now. Laws and principles [...] are for such moments as this, when body and soul rise to mutiny against their rigour [...]. They have a worth – so I have always believed; and if I cannot believe it now, it is because I am insane – quite insane [...]. (Brontë 382)

This excess of passion, which is labelled, by Jane herself, as insanity, is finally checked by self-control, which is once again established as the dividing line between sanity and madness. Moreover, Jane’s decision to leave Rochester conforms with Victorian values of propriety and decency, since their being together out of wedlock would have been deemed improper and would have casted doubts over Jane’s sanity.

As previously mentioned, female sanity in nineteenth-century England was defined according to the standards of behaviour of the middle-class gentlewoman, the model to which the patients of moral management had to aspire (J. Taylor, “Narrative of Moral

Management” 54). In *The Woman in White* Laura maintains her sanity as long as her identity of upper-class lady is safe, but once she is deprived of that identity, she becomes liable to the label of insanity. The new identity imposed upon her, that of Anne Catherick, will cause her committal to the lunatic asylum. Once she is admitted to the institution, under Anne’s name and wearing Anne’s white clothes, her insistence in claiming that she is Laura Fairlie is interpreted as an ulterior sign of her monomania. However, the traumatic experience in the asylum does impair Laura’s mental health. Hartright reports that “she had been under restraint, her identity with Anne Catherick systematically asserted, and her sanity, from first to last, practically denied. [...] No man could have gone through it and come out of it unchanged” (Collins 551). Indeed, Laura’s face bears the signs of suffering, and she is unable to speak and to evoke memories from the nightmarish period of time she spent in the institution. The asylum has reduced Laura to a state of childlike passivity and obedience, those elements which characterised Anne, and she now resembles Anne Catherick even physically. As Hartright sees Laura for the first time he notices the resemblance between the two:

The outward changes wrought by the suffering and the terror of the past had fearfully, almost hopelessly, strengthened the fatal resemblance between Anne Catherick and [Laura]. [...] The sorrow and suffering which I had once blamed myself for associating [...] with the future of Laure Fairlie, *had* set their profaning marks on the youth and beauty of her face; and the fatal resemblance which I had once seen and shuddered at seeing, in idea only, was now a real and living resemblance which asserted itself before my own eyes. (Collins 558-559)

Laura’s condition after the asylum experience sheds further doubts on the nature of Anne’s insanity, and opens up the possibility that the commitment of Anne Catherick to the asylum did in fact exacerbate her mental instability, rather than cure it.

## 2.2. Impending label of madness

In nineteenth-century England preoccupations with the economical industrial asset of the country reflected themselves on society and turned into a concern with the physical and mental wellbeing of each citizen, necessary for the prosperity of national economy (Shuttleworth 36). Such concerns, joined with the increase of trust in science, led to an outburst of new sciences, theories, and hypothesis, focusing specifically on mental



disorders, their causes, their symptoms, and the possible cures. Most new theories were based on the importance of regulation and self-control; consequently, women, who were considered “helpless” in the face of their bodies’ “tyranny” (Shuttleworth 82), became the primary subject of medical investigation and surveillance (Shuttleworth 78).

According to Shuttleworth, the woman, the weak “vessel” (92) unable to control her own body and mind (80), came to be perceived as a threat for the economic and social wellbeing of the nation (75), and it was the task of men, the representatives of rationality and self-control (82), to police the boundaries of female sanity and insanity. Thus, women lived in a precarious balance between sanity and insanity (Shuttleworth 87), under the vigilant eye of men, and the only way to assert their sanity was the adhesion to conventions (Shuttleworth 93). However, the different theories which developed around the bodies and minds of women were sometimes contrasting, so as to render the line separating sanity from insanity progressively thinner and more fragile. Victorian women were subjected to norms according to which they had to control their behaviour and their appearance, resulting in a set of contradictions which profoundly limited their sphere of action. The notion of self-control was in itself contradictory: on the one hand, women were expected to constantly control their behaviour and their appearance; on the other hand, scientific disciplines depicted female individuals as constitutionally incapable of controlling their own minds and bodies (Shuttleworth 92). Similarly, women were taught to subjugate and conceal their passions, but they were also persuaded that such concealment was immoral (Shuttleworth 39).

In an age in which phrenology and physiognomy were gaining more and more credibility, and women’s bodies and actions were constantly observed, dissimulation was an essential strategy for women because it allowed them to avoid the label of madness. Marian Halcombe, in *The Woman in White*, repeatedly reminds herself and her half-sister Laura to keep in check their emotions and maintain an appearance of normalcy and tranquillity in the surface, so as to evade definitions of insanity. On one instance Marian, burning with the desire to go out on horseback to reunite with her sister, reflects: “[b]eing, however, nothing but a woman, condemned to patience, propriety, and petticoats for life, I must [...] try to compose myself in some feeble and feminine way” (Collins 251). Through these words Marian explains that, in order not to arouse suspicion, it is better for her to act according to Victorian schemes of feminine behaviour. Indeed, normalcy is the

only satisfactory sign of sanity, while deviations from accepted behaviour can lead to dangerous outcomes (Shuttleworth 93). However, the constant recourse to self-regulation and to the repression of feelings and passions is another point which attracted contrasting views: the self-discipline prescribed to all Victorians, and to women in particular, was also believed to have negative repercussions on the body, since the suppression of energies could lead to an internal excess, which could eventually cause insanity (Shuttleworth 92).

Insanity, therefore, was represented as the result of an excess of self-control and repression, and lack thereof simultaneously. Theories on the topic of female sexuality were equally contradictory: women had to be sexually responsive to men, they had to be fertile in order to sustain the social body by generating new individuals (Shuttleworth 90); however, they simultaneously had to repress their sexual instincts and keep them concealed (Shuttleworth 72). On one hand, women who exhibited their sexual desires were considered immoral, and consequently insane, but on the other hand, women were supposed to be physiologically incapable of controlling their impulses. Moreover, repression of sexual impulses was deemed to provoke mental disorder as well. The contradiction inherent to discourses on the female body and its policing extended to the female reproductive system: while the Victorian ideal of the angel in the house depicted women as fair and pure, their body was believed to harbour a dangerous potential for moral corruption and mental instability (Shuttleworth 76). Indeed, the menstrual flow was perceived by Victorian society as a form of pollution, threatening to contaminate and corrupt the whole nation. It was believed that such pollution had to be properly expurgated from the body in order to maintain a healthy organism, therefore the source of medical concern was not the menstrual flow as such, but rather its obstruction (Shuttleworth 87). Faced with this problem, doctors provided women with a range of contrasting instructions: on one hand, they condemned the idleness of upper-class women, since it could cause a blockage of the menstrual flow, which would lead to insanity or sterility (Shuttleworth 90); on the other hand, the excess of physical and mental activity was pointed out as a potential cause of obstruction as well (Shuttleworth 88). Consequently, while women were criticised for being idle, they were also advised against engaging themselves in activities requiring a mental effort, such as study, or a physical effort, since their weak dispositions would have suffered from it. By these set of contradictory norms,

every woman could potentially be considered insane, to the point that some nineteenth-century physicians considered insanity to be the defining condition of women (Shuttleworth 92).

The female protagonists of *Jane Eyre* and *The Woman in White* reflect these tensions among different definitions of insanity, which they try to escape during the course of the novel, or which have already been imposed on them. Jane for instance, labelled as insane in her childhood due to her excessively passionate temper, is caught, as an adult, in an internal struggle between the expression and repression of her passions. Both options are dangerous for her mental and physical health, and both the restraint and the display of her passionate inner self could trigger the dreaded label of insane individual (Shuttleworth 160). Bertha Mason, on the other hand, is completely skewed toward the insane end of the spectrum: once wavering between sanity and madness, readers only catch glimpses of an irretrievably insane Bertha, whose passions have been given free expression and who has been doomed, by her lack of self-control, to a restrained existence in the third storey of Thornfield Hall.

As previously mentioned, Marian Halcombe, the masculine heroine of Collins's novel, repeatedly keeps in check her emotions and their external expression: by controlling her superficial appearance she makes sure not to draw the attention of her enemies and she avoids the potential label of insanity. However, Marian too, like Jane, needs to find balance between the expression and the restraint of her passions, and she vents her emotions in her diary, a strategy that allows her to preserve her sanity. Marian's diary will work as a tool to present both sisters' sanity, preserving Marian's body from an overload of repressed passions on the one hand, and asserting Laura's sanity on the other by supplying written proof of Percival and Fosco's scheme. Laura's emotions, by contrast, never find an outlet: she fully represses her passions, embracing a state of utter passivity that is conducive to madness. Laura's mental health is still in a precarious balance after her rescue from the lunatic asylum, when she lives in a childish state of bewilderment. On one hand, it is important that Marian and Hartright bring back Laura's memory, so as to assert her true identity and eventually her sanity; on the other hand, Laura's recovery of those memories linked to her stay in the asylum could be so traumatic as to cause a severe mental breakdown. Echoing the contradictions inherent to discourses on female madness, insanity lies at both ends, and it is essential that Laura exist in that

cramped portion of safe space among different definitions and causes of madness (Huffels 50).

In this game of opposing forces, defending one's own identity becomes fundamental; significantly, Marian and Hartright's efforts to re-establish Laura's true identity are aimed at asserting the difference between Anne Catherick and Laura, and thus to protect the latter from the label of insanity. Anne Catherick's insanity, accepted as a fundamental truth by many of the characters in the novel, is instead questioned during the story in a number of ways. In particular, the fact that Laura is believed to be mad and is admitted to the lunatic asylum when her mental sanity is still intact projects a shadow of doubt over Anne's characterisation as a mad subject. Indeed, the label of insanity imposed on Anne Catherick is the result of an accumulation of wrong assumptions, biased medical interpretations and evil machinations aimed at silencing her. Collins's novel exposes the danger to which Victorian women were subjected, by navigating a world in which their actions and their bodies are constantly kept under control, and in which the label of insanity is always lurking around the corner. Indeed, interestingly, the woman in white of the novel's title can be identified not only with Anne Catherick, the quintessentially white woman, but also with other female characters of the novel who, sooner or later, will step into her same shoes (Gaylin 303).

### 2.2.1. Tension between resoluteness and passivity

The female characters of the two novels exist within a tension between resoluteness and passivity, the imposition of their own will and submission to other people's decisions and expectations. While the degree to which these characters are resolute or passive may vary, they are all equally threatened by the label of insanity. The character of Laura Fairlie, for instance, is almost entirely passive, except for the few occasions in which she opposes others' will, backed up by her half-sister Marian. However, her passivity will turn out to be very dangerous, since it will lead to the loss of her identity and to her committal to the lunatic asylum under the name of the (supposedly) insane Anne Catherick. By contrast, Bertha Mason in Brontë's novel defies conventions and openly challenges Rochester's desire for a perfect Victorian angel. This notwithstanding, it is difficult to define Bertha as either resolute or passive because we do not know the real conditions of her mental health at the beginning of her married life. Therefore, it is difficult to establish whether

she is sane, but she is rebelling against her husband out of a desire for freedom, or if her actions, deemed depraved by Rochester, were due to insanity. Either way, Bertha gained for herself the irrevocable label of insane individual.

Conversely, the characters of Jane Eyre and Marian Halcombe share a condition that is halfway between resoluteness and passivity. Marian, at the beginning of the novel, is strong-willed, determined to know the truth and protect her beloved sister Laura. However, she is fully aware that she must keep on a pretence of feminine passivity which will deter suspicion and ward off the dreaded classification of insanity. Along the course of the novel Marian, pushing her desire for knowledge too far, gives up this pretence, falling into a temporary state of mental derangement and will, from that moment on, be forced into a passive position. Like Marian, Jane constantly wavers between resoluteness and passivity. While, at the beginning of the novel, child Jane's strong-willed nature manifests through rebellion, the years of moral management spent in Lowood taught her to harness her willpower to keep in check her passions. However, her love for Rochester causes Jane to occasionally lose control over her emotions, and in more than one instance she is tempted to subdue to her passion, let herself sink into her love and be passively driven by Rochester's equally strong will. For Jane Eyre too, the label of madness is always around the corner: as a child, she is classified as mad due to her intemperance and disobedience; as an adult in Lowood and, later, at Thornfield Hall, her self-restraint and the repression of her desires for action take her to a state of restlessness which she is unable to relieve (perhaps, one may conjecture, a similar feeling might have led young Bertha to her miserable destiny); when she finally voices her passion, she still jeopardizes her mental health, since the violence of her love for her master hinders her self-control and threatens to compromise her integrity and her solid moral values.

The first chapter of *The Woman in White* opens with a declaration by Walter Hartright, asserting that “[t]his is the story of what a Woman's patience can endure, and what a Man's resolution can achieve” (Collins 7). However, this sharp demarcation of gender roles, attributing to women a passive endurance, and to men an active resolution, will be denied during the course of the novel, only to be reasserted in the end (Gaylin 306). Indeed, the most compelling character of *The Woman in White*, Marian Halcombe, is distinguished by dynamicity and resolution, and is capable of turning patience, the alleged feminine quality, into an active weapon (J. Taylor, *Secret Theatre* 125). After the news

of Mr Fairlie and Sir Percival's agreements over the date of the wedding, which eventually starts to be perceived as a concrete reality, Laura assumes her attitude of stoic passivity, while Marian advises her sister: "The question of time, is our question, and trust me, Laura, to take a woman's full advantage of it" (Collins 229). Through this concept, which she will express, in different words, multiple times during the novel, Marian demonstrates her lucidity, her reflective and sharp nature and her determination (all attributes which Victorian society did not associate with women). She proves that she knows what is expected from her as a Victorian woman, and is aware of how she can exploit those assumptions to her advantage.

Collins's novel focuses on the issue of women's assumed passivity, as testified by the suggestive opening line, and, by portraying a female character, Marian, who defies Victorian conventions on femininity, both through her appearance and her actions, the author was possibly challenging Victorian beliefs and expectations regarding gender. This notwithstanding, at the end of the novel the initial premise ascribing an active role to men and a passive one to women is re-established, since the resoluteness distinguishing Marian's character has entirely disappeared to be replaced by fear and obedience. Such fluctuating approach towards feminine resoluteness and passivity can be understood to reflect contemporary discussions on female mental and physical energies. The numerous contrasting theories of the time debated over whether and how female energy should be deployed, and they produced a number of contradictions on the topic of female insanity, believed to be strictly linked with either the repression or the expression of those energies (J. Taylor, *Secret Theatre* 69). The physician Robert Carter maintained that female hysteria was the result of the suppression of sexual instincts and of the lack of education (J. Taylor, *Secret Theatre* 69); on the other hand, his colleague F.C Skey argued that although hysteria manifested itself mainly among upper-class women, living in essential idleness, it would "often select as its victim a female member of a family exhibiting more than usual force and decision of character, of strong resolution, fearless of danger, bold riders, having plenty of what is termed *nerve*" (qtd. in J. Taylor, *Secret Theatre* 69). Two contemporary medical men were thus holding opposite perspectives: the first one believed that insanity would be provoked by a passive repression of mental and physical faculties, while the second claimed that an active and resolute disposition in a woman was a common cause of hysteria.

The male protagonist of the novel, Walter Hartright, seems to hold similarly contrasting opinions, which are expressed, metaphorically, at the moment of his encounter with Marian Halcombe. While initially admiring, from a distance, her harmonious shape, “undeformed by stays” (Collins 40) (the first hint the reader has of Marian’s freedom), once he can observe her masculine face and “prominent, piercing, resolute brown eyes” (Collins 40), an outer sign of Marian’s unyielding determination, Hartright is “repelled” and feels a “helpless discomfort” (Collins 41). Arguably, such repulsion, provoked by the perception of masculine resoluteness in the body of a supposedly passive woman, might be caused by a feeling of disempowerment and loss of control on the part of Walter Hartright (Gaylin 315), who, early in the novel, presents some feminine traits, such as the lack of resoluteness and the inability to suppress his passions. These conflicting feelings constitute the basis of the whole novel, indeed, they emerge in the event that sets the narrative in motion: after having helped the mysterious woman in white escape from her pursuers, Walter wonders whether he had just “cast loose [...] an unfortunate creature, whose actions it was [his] duty, and every man’s duty, mercifully to control” (Collins 36). Hartright is thus pondering whether women should be allowed freedom or whether they should be controlled by men (Gaylin 311).

The character of Laura Fairlie, portrayed from her first apparition as an elegant and delicate presence, in her feminine characterisation lacks almost completely that resoluteness which instead distinguishes her more masculine half-sister Marian. Initially vulnerable and acquiescent, Laura will revert to a state of utter passivity after her separation from the man she loves, Walter Hartright, and after she decides to submit to the marriage her father had arranged for her with Sir Percival Glyde. Laura’s effort at self-control, which resulted in self-annihilation, contributed to making her the perfect victim for Glyde and Fosco’s plans to make her pass as insane. In rare occasions Laura is still capable of opposing men’s will, for instance when, backed up by Marian, she refuses to sign Sir Percival’s documents without having read them. Moreover, in one particular episode Laura refutes her passivity and, for the sake of Marian’s health, imposes her own will. Indeed, during the period of Marian’s illness, Laura is determined to pay her daily visits and, to do so, she even goes against the doctor’s advice. However, the event of Marian’s disease will not serve to strengthen Laura’s firmness: on the contrary, after receiving the news of her half-sister’s improved condition Laura is so overwhelmed that

she falls ill, in what Mrs Michelson, the housekeeper of Blackwater, defines “a state of debility and depression which obliged her to keep her room” (Collins 478). This state of impaired physical and mental health will be the fundamental element enabling the execution of Glyde and Fosco’s plan since the wearied Laura, bearing the physical signs of her trouble, eventually starts to look like the supposedly mad Anne Catherick.

In the end, neither passivity nor resoluteness spare Laura the definition of insanity: her psychological suffering is interpreted by the medical authorities of the asylum as mental damage (Small 206), and, most of all, since her husband and Count Fosco impose on her the identity of Anne Catherick and the label of insane, it is impossible for the woman to shake them off. In contrast with Laura’s passivity, Marian Halcombe adopts a firm stance in favour of female resoluteness, refusing passivity and proclaiming that “our [female] endurance must end, and our resistance must begin” (Collins 382). Accordingly, Marian recognises Laura’s passivity as pathological (J. Taylor, *Secret Theatre* 118). She believes that the passivity society expects from female subjects, and to which Laura has resigned, is not and should not be the normal condition of women. However, she is equally conscious of the expectations and norms of society. As Milbank pointed out, Marian “has freedom indeed, but within the limits of male approval and decision of where her ‘natural place’ should be” (73).

It is exactly when she oversteps these limits that she loses her freedom. In the night of the eavesdropping scene, when Marian climbs out of the window in order to overhear the conversation between Count Fosco and Sir Percival, she gets rid of her cumbersome clothes, both in an actual and figurative way, breaking the surface appearance of passive femininity she had so prudently preserved until that moment (Gaylin 315). In so doing, the unveiled Marian becomes susceptible to the definitions that other individuals, specifically men, want to impose on her: the illness she suffers after her exposure to bad weather already marks her as non-sane, and in this weakened condition Count Fosco prevails over Marian, he reads her diary, thus uncovering her thoughts, and he writes upon it, imposing his mastery and her passivity (Gaylin 320). After the fever, and after Fosco’s act of prevarication, the now faint Marian is relegated to a role of passivity, which Hartright himself will ensure she keeps, allegedly to protect her and Laura (Gaylin 320). Moreover, after Marian casts off the superficial mask of passivity, she can no longer act outside of the boundaries of her feminine role undisturbed, since her exposure as a liminal



individual (with both masculine and feminine connotations) would probably define her as insane. As a consequence, at the end of the novel the prologue is confirmed, since women are once more relegated to the passive sphere of the home, while resolute men act in the external world; indeed, Laura is characterised by a childlike submission and obedience, while Marian is redefined by Hartright as a “good angel” (Collins 814), essentially living in what Fosco provocatively defined a “new asylum” (Collins 577).

While in *The Woman in White* the question of feminine resoluteness and passivity finds its theoretical basis on a medical discussion over the repression or release of women’s energies and impulses, in *Jane Eyre* the same question has a psychological ground. Indeed, the psychological debate in Charlotte Brontë’s times considered the individual to be involved in an internal struggle between powers of self-control and other uncontrollable forces affecting the organism (Shuttleworth 28). The mind was no longer conceived as a unity, but as a fragmented site where different agents could be at war with one another (Shuttleworth 52). Shuttleworth pointed out that “in Brontë’s fiction [...] fierce assertions of self-determination are followed by statements of powerlessness, where the self is projected as a mere product of uncontrollable energies” (54). Such dynamics are at play in Jane’s mind, where a feeling of power emerges, only to be followed by a sense of helplessness (Shuttleworth 62); this shift is particularly evident, for instance, in Jane’s quarrel with Mrs Reed, where, after voicing her contempt for her aunt, she feels utter desolation and remorse. Going back to this episode as an adult, the narrating voice of adult Jane analyses child Jane’s feelings in detail:

That eye of hers, that voice, stirred every antipathy I had. Shaking from head to foot, thrilled with ungovernable excitement, I continued [...]. Ere I had finished this reply, my soul began to expand, to exult, with the strangest sense of freedom, of triumph, I ever felt. It seemed as if an invisible bond had burst, and that I had struggled out into unhoped-for liberty. (Brontë 37)

In this episode Jane gives space, for the first time, to the passion and rage inside her, however, after a first sense of satisfaction and freedom, she experiences helplessness:

I was left there alone – winner of the field. It was the hardest battle I had fought and the first victory I had gained. [...] First, I smiled to myself and felt elated; but this fierce pleasure subsided in me as fast as did the accelerated throb of my pulses.

[...] A ridge of lighted heath, alive, glancing, devouring, would have been a meet emblem of my mind when I accused and menaced Mrs Reed; the same ridge, black and blasted after the flames are dead, would have represented as meetly my subsequent condition [...]. (Brontë 38)

At first glance, it would be reasonable to link Jane's bursts of anger and the expression of her feelings with an idea of resoluteness, while the following sense of helplessness might be associated with passivity. However, I would argue that child Jane's passionate outbursts may be interpreted as a passive submission to irrationality; indeed, her angry outbursts are never (fully) intentional. Narrating the episode of a fight with Mrs Reed, Jane underlines the involuntary nature of her assertions:

‘What would Uncle Reed say to you, if he were alive?’ was my scarcely voluntary demand. I say scarcely voluntary, for it seemed as if my tongue pronounced words without my will consenting to their utterance: something spoke out of me over which I had no control.” (Brontë 26)

Hence, in *Jane Eyre* passivity consists not only in the submission to other people's will (as was the case for Laura Fairlie in *The Woman in White*), but also in the submission to one's own passions, that is, in lack of self-control. As a child Jane is subjected to her passions, which often prevail over her rationality and lead to the angry outbursts. Her untamed temper places her in the domain of insanity, since, according to Victorian science and mores, such violent outbursts are unnatural in a child, as they are in a woman (Shuttleworth 153): stepping out of the boundaries of the socially acceptable behaviour Jane confronts for the first time the looming label of insanity, which will threaten her in different occasions in her adult life.

To subdue Jane's passionate temper Mrs Reed decides to send her to Lowood, the strict boarding school where she will receive an education based on the principles of moral management. Despite the unjust and unbearable living conditions of the students in Lowood, such a strict education will actually be helpful to Jane, who eventually manages to control her passions. The impressive self-control acquired in her years at Lowood will be a distinguishing mark of adult Jane Eyre. This resoluteness allows her to completely change the course of her life at least three times in the novel: first, when she decides to leave Lowood in order to experience a new reality at Thornfield Hall; then, when she

finds the strength to leave Rochester and Thornfield; and finally, when she rejects St John's offer and returns to Rochester. In these occasions, and especially in the second and third one, Jane's mind is torn between resoluteness and passivity, between her self-control and rationality, and the desire to let herself be guided by her passions, or by other people's will. However, Jane's resolution is not the only agent affecting her decisions: in all three occasions there are forces, either inside or outside of her, which contribute to the final choice.

In the first instance, when Jane, after eight years, decides to leave Lowood, her decision is dictated by a feeling of restlessness and a rising need of freedom and independence which she cannot really explain:

[...] such was what I knew of existence. And now I felt that it was not enough. I tired of the routine of eight years in one afternoon. I desired liberty; for liberty I gasped; for liberty I uttered a prayer; it seemed scattered on the wind then faintly blowing. I abandoned it and framed a humbler supplication. For change, stimulus. That petition, too, seemed swept off into vague space. 'Then,' I cried, half desperate, 'grant me at least a new servitude!' (Brontë 99)

In this occasion it is this inexplicable and sudden force to push Jane towards new horizons, but it is only her determination which allows her to obtain what she wants for herself. Once she has figured out her desire for change and stimulus, she only needs "a brain active enough to ferret out the means of attaining it" (Brontë 100). She immediately starts planning and devising a way to get a new situation, and from then on, she applies herself in order to fulfil her desire.

The episode of Jane's internal struggle after the discovery of Rochester's previous marriage to Bertha is, arguably, the most arduous fight Jane needs to sustain between resoluteness and passivity. Indeed, Jane's relationship with Rochester is characterized by a conflict between passion and self-control. As Jane's love for Rochester grows, Jane gradually surrenders to passion, to the point that it almost annihilates her. According to Shuttleworth, it is precisely in those occasions when Jane is losing her self-determination, caught up in her love for Rochester, that Bertha Mason breaks into the scene, as if she were trying to warn Jane (174). When Jane realises that her passion is prevailing over her

reason, she starts to ward off Rochester's flirtatious advances, in an attempt to gain back control over herself and over the relationship (Lerner 285).

Jane identifies her growing passion for Rochester as a threat to her self-assertion (Small 169). The first step she takes to protect her individuality is writing a letter to her uncle, in an attempt to find financial independence; this same letter will turn out to be the major instrument hindering the illegitimate wedding (Shuttleworth 175). After the discovery of Rochester's previous marriage, not only does Jane experience the disillusionment of a shattered dream, but she also feels sickened at the thought of her previous condition of vulnerability, caused by her unawareness of the secret her lover was keeping from her (Small 169); in her desperation she reproaches herself: "oh, how blind had been my eyes! How weak my conduct!" (Brontë 356). In this moment of desperation Jane lies passively in her room, too weak to do anything else: "to ride I had no will, to flee I had no strength. I lay faint, longing to be dead." (Brontë 356). Once again, there is an external force enabling her to recover her resoluteness, indeed, Small suggests that the idea of God Jane evokes before sinking in dismay is what spurs the heroine's willpower in this moment of despair, and confers her the strength to get up and the conviction that she will manage to survive this terrible moment (171). Jane finally wakes up and reports that "a voice within me averred that I could do it, and foretold that I should do it" (Brontë 358). What she is experiencing internally is a conflict between reason and passion, which she describes in terms of an actual fight:

I wrestled with my own resolution; I wanted to be weak that I might avoid the awful passage of further suffering I saw laid out for me; and Conscience, turned tyrant, held Passion by the throat told her tauntingly, she had yet but dipped her dainty foot in the slough, and swore that with that arm of iron he would thrust her down to unsounded depths of agony. (Brontë 358)

This first battle between Jane's rationality, personified in masculine Conscience, advocating the necessity of leaving Rochester and Thornfield, and her passivity, intended as subjection to feminine Passion, pushing her to caress the idea of staying, in order to avoid further suffering, is won by Jane's resoluteness: Passion is made passive by Conscience. However, when facing Rochester's sufferings and his persuasive words, Jane's mind is again at war with itself:

While he spoke my very conscience and reason turned traitors against me, and charged me with crime in resisting him. They spoke almost as loud as Feeling: and that clamoured wildly. ‘Oh, comply!’ it said. ‘Think of his misery; think of his danger; [...] soothe him; save him; love him; tell him you love him and will be his. Who in the world cares for *you*? or who will be injured by what you do?’ – Still indomitable was the reply: ‘I care for myself. [...] I will respect myself. (Brontë 381, 382)

Passivity for Jane means accepting Rochester’s tempting proposal of a life lived outside human law, but it also means rejecting reason and sanity, and embracing insanity in the subjection to passion. In the end her resoluteness wins over passivity, she imposes her will and determines to leave, holding “to the principles received by me when I was sane, and not mad – as I am now” (Brontë 382).

The third episode where Jane’s resoluteness, after an internal conflict, prevails over the temptation to passively follow someone else’s will consists in her choice to reject St John’s proposal of marriage. The relationship between Jane and St John is based on control, exercised through the “power of the gaze” (Shuttleworth 177): they both try to decipher the other, so as to exercise their power. However, while St John remains essentially undecipherable, Jane feels her firmness shaking under the “freezing spell” (Brontë 481) of his presence. When St John proposes that she follow him to India, Jane, who had become dependent upon her cousin’s approval, feels that she cannot resist his will: “my iron shroud contracted round me; persuasion advanced with slow, sure step. [...] My work, which had appeared so vague [...] assumed a definite form under his shaping hand” (Brontë 488). St John’s masculine persuasion tries to bend Jane’s resoluteness, in an attempt to determine her life. Jane lives this imposition as a violence: the definition St John wants to impose on her is an “iron shroud” (Brontë 488), suffocating her while still alive. However, St John does not want her to go to India as a sister, but as his wife, and this Jane cannot accept. It is in this moment that Jane is able to catch a glimpse of St John’s mind, and when she does, she gains back control over their relationship and over her life:

I had silently feared St John till now, because I had not understood him. He had held me in awe, because he had held me in doubt. [...] I saw his fallibilities: I

comprehended them. [...] The veil fell from his hardness and despotism. [...] I was with an equal – [...] one whom, if I saw good, I might resist. (Brontë 491)

Jane is thus able to re-impose her resolute nature and fight back her own desire for submission to St John's will. Nevertheless, St John will try again to have her comply with his plans, and the second time he manages to be even more convincing. He lays his hand on Jane's head, in an extreme attempt to force her into submission, and at this point Jane's desire for passivity is as strong as ever: "I was tempted to cease struggling with him – to rush down the torrent of his will into the gulf of his existence, and there lose my own" (Brontë 505). It is at this moment, when Jane is closest to submission, when her "wrestlings [are] paralysed" (Brontë 506), that another external force interposes and saves her: she hears Rochester's voice in the wind, calling her name "wildly" and "urgently" (Brontë 507). This intercession frees Jane from St John's control and from his grasp, and she feels that: "it was *my* time to assume ascendancy. *My* powers were in play and in force." (Brontë 507).

Finally free from the control of others, Jane asserts her resoluteness. In the internal struggle between resoluteness and passivity which goes on throughout the whole novel, the protagonist finds herself various times on the border between sanity and insanity. Generally, when she embraces passivity, she is drawn towards insanity, and it is the duty of resoluteness to drag her out of that dark spiral and send her once again on the right track towards sanity. As a child, Jane incurs for the first time in the label of insanity due to her violent outbursts of rage; in this instance she is passive in the face of her passions, which she is unable to control, and she will therefore be sent to Lowood in order to acquire self-control. In the boarding school the protagonist learns to manage her passionate nature, which, however, is not altogether eradicated: she feels restless and craves new stimuli, but she is aware of the boundaries which her social position imposes on her. In her pursuit of new experiences she never trespasses the limits of acceptable behaviour: she has learned to "maintain energy at the highest level of excitation without bursting through into pathology" (Shuttleworth 152). This same energy, to which Jane refers in terms of a fire burning inside of her, would drive her mad if she were to passively submit to St John's decision and marry him in order to fulfil his missionary call: "but as a wife [...] forced to keep the fire of my nature continually low, to compel it to bur inwardly and never utter a cry, though the imprisoned flame consumed vital after vital – *this* would be

unendurable” (Brontë 492). Insanity here is not explicitly mentioned, but, arguably, it is looming in the background because, as mentioned above, the motif of self-consuming unexpressed energy was central to nineteenth-century discussions on female insanity. In this occasion too, Jane’s resoluteness allows her to regain control over herself, reject St John’s offer and thus main her sanity.

The link between sanity and self-control is particularly evident in the chapters narrating the evolution of Jane’s feelings for Rochester, those chapters leading to the fulcrum of the novel, that is, the scene describing the internal fight between resoluteness and passivity, between sanity and insanity, taking place in Jane’s mind. As previously mentioned, since Jane’s love for Rochester is a violent passion, it stands on the opposite side of self-control; indeed, Jane mentions that her growing emotion takes her “beyond [her] own mastery” (Brontë 292). The final mental battle between resoluteness and passivity, in its extreme violence, takes her very close to insanity, but resoluteness eventually prevails since Jane’s conscience is fully aware the alternative is insanity, since she would have to renounce completely to her self-control and live in a state of “moral dependency” (Small 169). Jane will go back to Rochester only once her passion has been tamed and when she has acquired control over herself and over their relationship; indeed, in their renewed union the protagonist stands in a position of power, she is now “[her] own mistress” (Brontë 527). Jane returns as an independent woman, with financial autonomy, she possesses all the knowledge, which she initially keeps from Mr Rochester, and she even serves as his eyes and his right hand. The novel thus stresses the importance of self-discipline and asserts that, in order to hold on to sanity, it is essential to command the will (Small 178).

Jane’s resoluteness and her self-control are the fundamental elements distinguishing her from Bertha (Small 167). Indeed, while Jane’s sanity corresponds to her ability to command the will, Bertha Mason’s insanity is described in terms of a lack of self-control and a complete submission to the passions. Blame is laid on Bertha for her mental instability, caused not only by genetic inheritance and by her insanity-prone female body, but also from her passive surrender to bodily desires (Strovas, “No Rest” 386). Rochester plainly states that “her excesses had prematurely developed the germs of insanity” (Brontë 369), therefore his discourse unequivocally associates passivity with insanity, implying that if Bertha had been able to control her instincts she would have probably

delayed, if not altogether avoided, the eruption of her mental illness. According to Helen Small, modern feminist readings of *Jane Eyre* tend to romanticise Bertha's madness, attributing to it a hidden meaning of rebellion to patriarchy (160); in the scholar's view, such interpretations would overturn Brontë's desire not to romanticise insanity (161) and would thus misinterpret the actual meaning of Bertha's lunacy. Indeed, Small holds that Bertha's laugh, dramatically closing Jane's restless reflections, should not be interpreted as an enforcement of the heroine's expression of discontent, but rather as a warning of the peril of indulging such restlessness (160). Young Bertha had nourished her desires for new sensations and greater pleasures, and this led her to be branded as insane by society; consequently, her laugh could plausibly be interpreted as a sort of warning to Jane to continue to ward off her restlessness and to keep inside the boundaries of "an accepted social framework" (Shuttleworth 152). While on one hand the character of Bertha Mason could be interpreted as the embodiment of Jane's potential for corruption and insanity (some parallelisms exist between the two figures, for instance, when Jane starts crawling during her escape from Thornfield, she echoes Bertha's animality), on the other hand the novel stresses the ultimate divergence between the two characters (Small 167). Indeed, the heroine of the novel is finally identified with resoluteness and self-control, while Bertha is defined by her passive submission to the passions. Bertha Mason becomes the personification of insanity, characterised by a lack of self-control which eventually led to her imprisonment in the third storey of Thornfield; by contrast, Jane stands, at the end of the novel, as the epitome of sanity, a definition which she conquered through self-determination. Hence, while Bertha's passivity determined her downfall, Jane's resoluteness allowed her to improve her life conditions.

Jane's ability to save herself constitutes one of the main differences between Brontë's novel and *The Woman in White*, where women are not allowed to be independent. Indeed, *Jane Eyre* is influenced by the positivist current which marked the first half of the nineteenth century: the heroine of the novel is capable, through her resoluteness, to save herself, escape the impending label of insanity and change her life (Shuttleworth 37). By contrast, Collins's novel offers a more negative perspective, where neither passivity nor resoluteness are enough for women to escape the label of insanity (Small 205); indeed, passive women stand, in *The Woman in White*, as the perfect prey for schemes of



imprisonment, and resolute women, who instead try to determine their destiny, are similarly silenced and submitted into passivity.

### 2.2.2. Balance of passions in *Jane Eyre*

The discourse of passions and self-control constitutes a central preoccupation of *Jane Eyre*, and it is closely related to the theme of insanity. Indeed, the female characters are gripped in a relentless tension between their need to free internal energies and society's imposition of repressing them. Brontë's novel focuses on the dangers surrounding both positions, which, if embraced too radically, lead women to insanity or to the socially applied label of insane subject. The novel, in its portrayal of female characters, illustrates different attitudes to passion, from complete submission to utter repression; both embracing and rejection of passion figure in *Jane Eyre* as wrong and dangerous approaches, in fact, the novel suggests that the only way to survive and to escape the label of insanity is finding an emotional balance through self-control.

In the representation of these two opposite approaches to passion, both leading to insanity, Brontë was influenced by contemporary debates concerning the regulation of women's internal energies. The unrestrained and uncontrolled exploration of feminine instincts could cause the total annihilation of self-containment, and, consequently, it could lead to insanity (Shuttleworth 108); at the same time, however, a complete repression of all passions would be unbearable, since "when one dominates the faculties 'en tyran' the faculties revolt [and] the entire process leads [...] to the appearance of derangement or minor insanity" (Tressler 6). Trapped in this double bind, Victorian psychiatry applied an economic model in the regulation of women's mental energies: the industrial society had to maximise the exploitation of workforce while simultaneously preventing the working-class from gaining too much power. This could lead to the accumulation of an uncontrollable potential which could open the way to rebellion (Shuttleworth 158); similarly, the potential of feminine mental and reproductive energies could be fully exploited, provided that the process would be closely monitored – women's energies had to be channelled and submitted to rigid self-control, so as to avoid the eruption of monomania and insanity (Shuttleworth 151).

Such preoccupation with the regulation of feminine energies was intimately related to Victorians' anxieties concerning women's sexuality. Nineteenth-century society feared

that feminine sexual instincts, if unrestrained, could release “promiscuous libidinal energy” (Shuttleworth 92), which was perceived as a threat to patriarchal control (Shuttleworth 92). This notwithstanding, the complete repression of sexual energy was not desirable either. Women were, once again, caught in a double bind between definitions of insanity: if, on one hand, the suppression of sexual energy would lead to an internal accumulation prompting the outbreak of insanity, the expression of such energy, on the other hand, would have been labelled as ‘indecent’ conduct, thus eliciting the detection of a mental disorder (Shuttleworth 92). The discourse on women’s sexuality was in turn connected to contrasting opinions about menstrual discharges. Although Victorian physicians generally agreed on the importance of the regularity of the menstrual cycle, viewed as a necessary bodily event cleansing women from their internal pollution (Shuttleworth 88), they held discording theories as to what measures women should take in order to facilitate the flow of secretions. Some doctors suggested that women should lead a quiet life, in particular during menstruation, so as not to obstruct the discharges (Shuttleworth 90); contrarily, other medical men condemned women’s idleness and believed that physical and mental stimuli were necessary to promote the flow (Shuttleworth 90). The blockage of the menstrual flow was yet another possible cause of insanity for female individuals, and an additional excuse for men to regulate women’s bodies.

In such a cultural climate, where the threat of insanity precluded women from a number of activities, *Jane Eyre* denounces the disparity between women and men in Victorian society regarding the management of bodily, intellectual, and emotional life. In the course of her reflections Jane asserts that:

It is in vain to say human beings ought to be satisfied with tranquillity: they must have action [...]. Women are supposed to be very calm generally: but women feel just as men feel; they need exercise for their faculties [...]; they suffer from too rigid a restraint, too absolute a stagnation, precisely as men would suffer [...].  
(Brontë 128, 129)

The novel’s heroine is here voicing Brontë’s own sufferings; indeed, the author herself had had to deal with intense passions which she had tried to suppress, only to understand

that substituting the “tyranny of desire with the tyranny of reason” (Tressler 6) would be equally oppressive and unproductive (Tressler 6).

The ineffective outcome of either approach is exemplified in Brontë’s novel, specifically in the figures of Bertha Mason and Helen Burns. These two characters represent opposite female models: the former is a woman subjected to passions and bodily impulses, while the latter is a girl who has rejected the needs of her material body and only cultivates her spiritual side. Both models are ultimately negative and undesirable, since they lead to mental or physical disorders. Bertha Mason represents a reminder of the dangers that lie in a complete submission to the passions. Bertha’s “intemperate and unchaste” (Brontë 369) nature, as described by Rochester, was a deviation from Victorian schemes of propriety, and it was therefore classified as insanity (Strovas, “No Rest” 386). Helen Burns, Jane’s first friend in Lowood, has a philosophy of life that is diametrically opposed to that of Bertha; indeed, while the novel’s madwoman openly embraces her passions, the stoic Helen completely represses them, and advises Jane to do the same: [w]hat a singularly deep impression her injustice seems to have made on your heart! No ill-usage so brands its record on my feelings. Would you not be happier if you tried to forget her severity, together with the passionate emotions it excited?” (Brontë 64).

Helen perceives her “corruptible” (Brontë 64) body as a burden, she refuses to let herself be influenced by negative emotions such as revenge and injustice, and she only cultivates her soul in view of the life waiting for her after death. Despite the good motives behind Helen’s attitude to life (as opposed to the negative connotation Rochester gives to Bertha Mason’s story), Brontë illustrates how complete repression of all passions is as devastating as complete subjection to them (Tressler 1). The rejection of her human, physical component consumes Helen from the inside. Like her name suggests, Helen burns inwardly, she represses her bodily instincts, so that her flame of passion consumes itself, and ultimately extinguishes, thus leading to Helen’s death. The girl is introduced in the novel by the sound of her cough, which will mark the progressive weakening of her body throughout the story. Readers witness Helen Burns’s slow decline, culminating in her death for consumption, whereby “her internal productive forces, turned inward upon themselves, become self-consuming” (Shuttleworth 160). Child Jane is much more down-to-earth than her spiritual friend, so much so that, when Helen tells her that they will say good-bye, Jane asks: “[a]re you going somewhere, Helen? Are you going home?” (Brontë

93). This exchange illustrates the profound difference between the two girls: Jane's passionate nature could never adjust to such passivity, since her desire for activity and for rebellion burns ardently inside of her (Lerner 293). In a world where women "[e]ither [...] release their energies, and are branded immodest and insane, or they contain them internally and are subject to a form of self-consuming insanity" (Shuttleworth 108), Jane's self-controlled moderation is the only way to safely go on in life, avoiding the dreaded label of insanity.

Nevertheless, Jane herself has to struggle in order to find the right balance between passion and reason: throughout the whole story she strives to regulate her energy flow, trying to nourish and satisfy her desire for freedom while always maintaining inside the boundaries of propriety (Shuttleworth 152, 153). At the beginning of the novel Jane is unable to control her feelings and the reactions that those feelings provoke in her; for this reason, the Reed family brands her as insane (Shuttleworth 50). She herself, having internalised the norms of acceptable childlike and ladylike behaviour, recognises that, although her bursts of anger are justifiable, they are inappropriate for a girl. At Lowood, Jane benefits from the spiritual teachings of Helen Burns, who helps her to consider all things in a wider perspective (Milbank 147); the heroine is, in a way, elevated by this friendship, and is able to detach herself from her "fiendish feeling[s]" (Brontë 39).

The impressive self-control acquired at Lowood allows Jane to position herself midway between Bertha and Helen, in a condition of balance between opposing definitions of insanity. Adult Jane is finally able to master her passions to avoid insanity: when Jane develops feelings for Rochester, she constantly monitors her internal impulses and she is able to detect when her passion is prevailing and, once the emotions have been processed by reason, she can regain control over herself. When Jane is faced with the choice of whether she should stay with Rochester, and live against her own moral rules, or leave Thornfield Hall, enduring an immeasurable suffering (a choice she describes in terms of a duel between sanity and insanity), the mental conflict between passion and reason is eventually won by self-control. In her final decision to leave, Jane seems to embrace Helen Burns's philosophy to get rid of earthly passions, indeed, after she crosses the gate of Thornfield Hall, Jane determines never to look back, both to the mansion and to the days spent there, in an attempt to repress her feelings. During her stay at Moor House

Jane never mentions Rochester's name, and she never allows her thoughts to wander back to the dreamy existence she had known at Thornfield.

Her love for Edward Rochester seems to have been fully suppressed, but it is in her dreams and in her subconscious states that those feelings resurface, asserting the true passionate nature of Jane's character (Small 174). On one occasion Jane surprises herself crying and, upon examining her own emotions, she concludes that she is mourning her lost love. However, the most evident proof that Jane's passion for Rochester is still alive lies in her dreams, where she pictures herself in the comforting arms of her lover:

I used to rush into strange dreams at night: [...] charged with adventure [...] and romantic chance, I still again and again met Mr Rochester [...]; and then the sense of being in his arms, hearing his voice, meeting his eye, touching his hand and cheek, loving him, being loved by him – the hope of passing a lifetime at his side, would be renewed, with all its force and fire. Then I awoke. [...] and then the still, dark night witnessed the convulsion of despair, and heard the burst of passion.  
(Brontë 443)

Jane's passion is still burning as strong as ever. However, during the period spent at Moor House, Jane learns how to control that passion, since she works extensively on restoring her will (Small 173). Such a work allows her to eventually break free from the St John's freezing spell. Jane knows that as St John's missionary wife her passionate temper would be obliged to "burn inwardly" (Brontë 492), and she is aware that, unlike Helen Burns, she wouldn't be able to sustain a similar self-annihilation. In the end, Jane goes back to Rochester, she follows her passions but only once she has gained mastery over them. Hence, the character of Jane eventually avoids the label of insanity, since she is able to tread the fine line standing between Bertha and Helen. Jane does not submit to her passions, but neither does she repress them: she distances herself from the object of her love until she is able to control her feelings, and she returns only once she has found her balance.

### 2.2.3. Tension between masculine and feminine, public and private in *The Woman in White*

As mentioned above, Collin's novel starts by defining precise gender boundaries and different spheres of influence pertaining to men and women, indeed, the previously

quoted opening lines state: “[t]his is the story of what a Woman’s patience can endure, and what a Man’s resolution can achieve” (Collins 7). Hartright thus ascribes to women the passive domain of the home, while men are attributed the activity of the public sphere. With this statement, the novel foregrounds the tensions between masculine and feminine realms and between the public and the private domains. Notwithstanding the gender roles established by Hartright at the beginning of the novel, some characters, both male and female, transgress the boundaries of this apparently clear division. Nevertheless, a distinction can be noticed between male and female transgressions, indeed, if female characters trespass the boundaries of their position, either by disobeying masculine authority, acting outside the domain of the house, or displaying masculine resoluteness, they are punished with imprisonment, they are branded deviant and ultimately reinscribed into their passive feminine role; by contrast, men are free to act and move in space, never incurring in the label of insanity, even when they transgress their masculine role and assume feminine traits.

Throughout the novel, male characters move around the world, from city to city, they travel and change their social position. Walter Hartright, for instance, at the beginning of the novel moves from London to Cumberland due to his new position of drawing-master at Limmeridge House. From there, heartbroken, he travels to Central America, in an attempt to forget the woman he loves, who got engaged with another man. He then goes back to Limmeridge House and finally settles in London. Even in the extended period he spends in London, Hartright is never in the house for a long time: he goes out to work, he visits his lawyer, and travels to Welmingham, Anne Catherick’s hometown, to disclose Sir Percival’s secret. Similarly, both Fosco and Percival are seen moving from London to Limmeridge House, to Blackwater Park. These characters’ geographical horizon also extends to Italy, the country where they first met. By contrast, female characters are mostly confined within the walls of the house. For instance, although Laura as well moves from Limmeridge, to Blackwater and then to London, she is removed from a domestic space to another and, unlike Hartright, she does not leave that space; her confinement culminates with the supreme experience of imprisonment, her unjust confinement in the lunatic asylum. The only deviation from this domestic pattern lies in her wedding journey, but such an exception is determined only by her husband’s will. Indeed, each time Laura

moves from one place to the other she does not do it freely, according to her own inclination, but she moves following men's decisions.

While Laura fits in with the feminine role Hartright assigned her, there are some characters that challenge the gender divide established in the opening lines (Gaylin 306). Indeed, as mentioned above, some of the characters populating the scene resist gender dichotomies and are, instead, characterised as liminal beings, with both feminine and masculine features (Gaylin 312). Mr Fairlie, Laura's uncle, who is never seen crossing the boundaries of his own room, is portrayed as having "white delicate hands," "effeminately small" feet and "little womanish bronze-leather slippers" (Collins 50); Hartright points out that:

[u]pon the whole, he had a frail, languidly-fretful, over-refined look – something singularly and unpleasantly delicate in its association with a man, and, at the same time, something which could by no possibility have looked natural and appropriate if it had been transferred to the personal appearance of a woman. (Collins 50)

Notwithstanding the discomfort Walter Hartright experiences when confronted with this liminal individual, his own characterisation in the first half of the novel is itself not entirely masculine: indeed, Hartright lacks some of those features that were inherently linked to manhood. He is cast in a socially marginal position which does not grant him financial independence and he is constantly vacillating in his decision, lacking the quintessentially masculine quality of resoluteness (Gaylin 312, 313); hence, in his temperament and social status he is comparable to a typical Victorian woman (Gaylin 313). The fact that Hartright feels discomfort in the presence of feminine Mr Fairlie and masculine Marian, and that he is the one establishing gender roles at the beginning of the novel, becomes significant when readers are confronted with Hartright's own feminine traits. Arguably, Hartright has internalised the Victorian discourse concerning gender roles, so that he feels discomfort when confronted with the transgression of such roles, the more so since he is himself an example of such transgression. The discomfort experienced by the male narrator might be due to a psychological mechanism by which witnessing gender transgression in other people makes Hartright confront his own feminine traits, which Victorian society has established as improper. The male protagonist feels belittled in front of masculine Marian, who spurs him to act like a man:

“[d]on’t shrink under it like a woman. Tear it out; trample it under foot like a man!” (Collins 90). Once back from his adventure in Central America, Hartright has completely effaced his feminine side; he asserts his manhood through the submission of Laura and Marian, whom he casts in the position of passive and obedient angels in the house, thus re-establishing the gender roles he had asserted in the opening lines.

Count Fosco is another liminal character populating the scene of *The Woman in White*. Indeed, while he possesses some features that should mark him as an example of manliness, according to Victorian standards (he acts in the public sphere, he is resolute and always in control), the novel constantly reminds the reader that he also possesses feminine qualities. For instance, he is depicted as having extravagantly “effeminate tastes” (Collins 283), such as his love for fine clothes and flowers, and his adoration and attentive care for his pet animals: two canary birds, a cockatoo, and a family of white mice. Marian points out the feminine attributes of the count in her diary:

[f]at as he is and old as he is, his movements are astonishingly light and easy. He is as noiseless in a room as any of us women, and more than that, with all his look of unmistakable mental firmness and power, he is as nervously sensitive as the weakest of us. [...] I felt ashamed of my own want of tenderness and sensibility by comparison with the Count. (Collins 279)

Through this description, Marian places Fosco in the same domain of liminality which she herself occupies. Indeed, the novel’s relentless heroine is characterised, both in her physical appearance and in her attitude, as a liminal being, standing halfway between the definitions of masculinity and femininity (Gaylin 315). Marian Halcombe is clearly framed as a character that challenges gender dichotomies since her first encounter with Hartright, in which occasion he first observes her feminine shape and her lightness of movement and is then surprised by the masculine features of her face:

The instant my eyes rested on her, I was struck by the rare beauty of her form, and by the unaffected grace of her attitude. Her figure was tall, [...] her waist, perfection in the eyes of a man, for it occupied its natural place, it filled out its natural circle, it was visibly and delightfully undeformed by stays. [...] The easy elegance of every movement of her limbs and body as soon as she began to advance from the far end of the room, set me in a flutter of expectation to see her



face clearly. [...] She approached nearer—and I said to myself (with a sense of surprise which words fail me to express), The lady is ugly! [...] The lady's complexion was almost swarthy, and the dark down on her upper lip was almost a moustache. She had a large, firm, masculine mouth and jaw; prominent, piercing, resolute brown eyes; and thick, coal-black hair, growing unusually low down on her forehead. Her expression—bright, frank, and intelligent—appeared, while she was silent, to be altogether wanting in those feminine attractions of gentleness and pliability, without which the beauty of the handsomest woman alive is beauty incomplete. (Collins 39, 40)

Marian's appearance is simultaneously feminine and masculine: she displays an elegance of movement that Hartright finds ideally feminine according to Victorian gender norms, but her eyes possess a frankness that contrasts with these norms. The novel, and Marian herself, describe Laura as the polar opposite of her half-sister: Laura is depicted as the Victorian angel in the house, characterised by meekness and passivity, she is fair, delicate and beautiful. On the contrary, Marian does not fit into the standards of the ideal Victorian woman, she is dark and ugly, and, with her dynamic nature, she cannot conform to the model of submission and inaction which is expected from her (Losseff 549). Introducing Miss Fairlie to Hartright Marian calls attention to the differences between them:

[e]xcept that we are both orphans, we are in every respect as unlike each other as possible. [...] I am dark and ugly, and she is fair and pretty. Everybody thinks me crabbed and odd (with perfect justice); and everybody thinks her sweet-tempered and charming (with more justice still). In short, she is an angel; and I am— Try some of that marmalade, Mr. Hartright, and finish the sentence, in the name of female propriety, for yourself. (Collins 43)

Having portrayed her sister as diametrically opposed to herself, Marian's refusal to define herself a devil, as opposed to the angelic Laura, suggests that she ultimately rejects such absolute binaries (Gaylin 314), allowing herself to occupy a liminal position. Marian Halcombe's masculine side grants her an awareness of the social conventions limiting her freedom of action, so that she can act outside of the schemes of accepted behaviour, while still maintaining an appearance of propriety (J. Taylor, *Secret Theatre* 118). In other words, Marian is aware of the boundaries that her condition of woman sets for her, but

such awareness allows her to influence the events from within, while never openly overstepping the perimeter of her social role, so as to avert the risk of being labelled insane. There is only one occasion in the novel when Marian too evidently crosses the line of accepted behaviour, and this occurs when, compelled by the necessity to know about Sir Percival and Fosco's plots, she climbs out of the window and eavesdrops on their conversation.

The act of eavesdropping places the person perpetrating the transgression in the domain of liminality, since the eavesdropper stands in a position between the public and private spheres; indeed, a conversation which should remain private loses its confidentiality in the moment someone else, beside the interlocutors, is secretly involved into it: Marian intends to share the content of the private conversation, taking it into the public sphere and, eventually, to court (Gaylin 312). In this pivotal scene, Marian Halcombe crosses the boundaries of femininity which relegated her to the private sphere and enters the domain of the public sphere. Her act of eavesdropping is too serious a transgression to go unpunished, indeed, entering the masculine domain of the public Miss Halcombe uncovers her position of woman contravening Victorian expectations of propriety (Gaylin 317), thus exposing herself to the danger of being labelled as deviant. Moreover, Milbank points out that:

[o]nce a woman enters the world of plot and counter-plot that constitutes society in Collins [...] she necessarily lays herself open to the operation of the rules of the game: cheating and plotting against her. And it is a game in which men alone [...] hold all the best cards; no woman can finally succeed against them. (33, 34)

Marian is punished for her transgression with a severe fever and a temporary loss of lucidity (Milbank 34), symbolising women's unfitness to sustain exposition to the public sphere. In addition, her state of physical and mental infirmity grants Count Fosco the possibility of reading her journal, so that Marian's unfeminine endeavours are fully disclosed (Gaylin 317). The heroine's masculine resoluteness, which had caused discomfort in Walter Hartright on the occasion of their first meeting, once revealed in all its power is perceived as a threat to patriarchal authority (Milbank 74) and must therefore be subjugated. Marian undergoes a fate much similar to that of Bertha Mason: like *Jane Eyre's* madwoman had been confined to the third storey of Thornfield Hall in an attempt

to repress her rebellious energies, the strong-minded heroine of Collins's novel is detained in an abandoned wing of Blackwater, soon after her discovery (Gaylin 319). Relegated to the boundaries of the house and pushed back in her passive feminine role, Marian no longer constitutes an obstacle to Sir Percival and Fosco's schemes (Gaylin 319).

The exposition of Marian Halcombe's transgressive, masculine component deprives her of the possibility of acting outside of the boundaries of appropriate behaviour, so that in the second half of the novel the rigid dichotomy between masculine and feminine, announced by Hartright's opening sentence, is fully re-established (Gaylin 312). After Laura's rescue, Marian is thrust in a passive position: she has lost her independence and resoluteness and now merely obeys Walter Hartright's instructions (Milbank 76). Hartright, on the other hand, has come back from central America, ready to uphold his newly found manliness and to establish his mastery over the two sisters (Gaylin 313). Indeed, Hartright further limits Marian Halcombe's liberty, preventing her from acting outside of the domestic walls (Gaylin 320). As previously mentioned, in so doing, he re-establishes "absolute gendered identities" (Gaylin 312), claiming for himself the role of active man, moving in the public sphere, and imposing onto both Laura and Marian the role of "good angel" (Collins 814), confined to the private realm of the house (Gaylin 321).

In *The Woman in White*, Marian Halcombe is a representative case of men's efforts to repress women's transgressive energies; nevertheless, scattered throughout the plot are other examples of female repression (Gaylin 309). Madame Fosco, for instance, in her maiden days as Eleanor Fairlie, used to live a life outside of conventions, "vain and foolish" (Collins 275); she used to display ridiculous looks, manifesting her unrestrained femininity (J. Taylor, *Secret Theatre* 122). Meeting her again in the role of Countess Fosco, Laura and Marian cannot believe the changes she underwent: "tamed" (Collins 276) by Count Fosco, she now wears dark, high-necked gowns and a matronly cap, and her nonsensical talkativeness has given way to a stillness which is broken only by her husband's prompting. She is presented as the perfect patient of moral management who, once intemperate, is now obedient and composed (J. Taylor, *Secret Theatre* 121). A different example is that of Anne Catherick, diagnosed as insane and committed to an asylum because of her peculiar obsession with wearing white, and due to her child

disobedience and difficulty in controlling her anger (Leavy 134). With her, too, the treatment of moral management has been effective: her rebellious energy has been dulled, turning her into a fragile and submissive creature. Lastly, Anne's mother, Miss Catherick, once acting outside of the schemes of propriety, has been forced, by an unbearable feeling of popular deprecation, to return to more traditional positions. Only after years of publicly displaying a decent behaviour was she able to gain back the respect of her neighbours. In conclusion, in a novel (and an era) in which sanity corresponds to the compliance with socially accepted norms of proper behaviour, trespassing such boundaries and entering the masculine domain, thus threatening the patriarchal order, means "being perceived as anomalous, deviant, or insane" (J. Taylor, *Secret Theatre* 16), and facing men's endeavours to repress transgressive energies, writing women back into their accepted roles (Gaylin 309).

In summary, the topic of insanity and its treatment was widely discussed in Victorian England, and both Brontë and Collins were up to date on the subject. Indeed, their representations of mad characters in *Jane Eyre* and *The Woman in White*, respectively, reflect contemporary theories on insanity. Brontë's characterisation of Bertha Mason emboldens many nineteenth-century stereotypes on madness, such as its hereditary nature, and a correlation with menstruations, the feminine reproductive system, and sexuality. Bertha's disease corresponds to the Victorian definition of moral insanity, spurred by a vicious nature and a lack of self-control. Moreover, the characterisation of Bertha's insanity reflects a conception of beastly madness typical of the eighteenth century; as a consequence, an outdated system, based on physical restraint, is applied to Bertha in order to 'manage' her mental disease. By contrast, Anne's insanity in *The Woman in White* presents the features of monomania, a condition that consisted in the individual's fixation with one particular idea. Anne is thus committed to the asylum for her mental retardation and for her intemperate nature, manifested in her child disobedience. Jane Eyre will be labelled insane for the same reason: her rebellion to the Reeds and her bursts of anger cause her admission to Lowood. In the asylum and in the boarding school, the two female characters are treated through a system of moral management, aimed at the annihilation of their passionate temper and at the internalisation of Victorian values of propriety.

The novel, and, by extension, Victorian society, establishes female sanity and insanity based on the respect or the transgression of the accepted boundaries of appropriate feminine behaviour. Indeed, Bertha's viciousness places her outside the boundaries of propriety and gains her the label of insanity; the same applies to Jane's and Anne's disobedience and intemperance. Laura Fairlie is shut up in the asylum once she loses her identity of middle-class gentle woman, while Marian Halcombe is branded deviant once her masculine side is exposed. The confines of insanity are thus blurred, since the "notion of the 'unbecoming' [...] shades directly into insanity" (Shuttleworth 50).

Women in the novels exist among different, often contrasting, definitions of insanity: on one hand they have to restrain their passions, since a too open expression of emotions and desires could lead to the label of insanity, as in the case of Bertha; on the other hand, the complete suppression of passions could cause an internal excess that, in turn, may provoke madness, or it could give rise to a physical degeneration leading to self-consumption, as is the case with Helen Burns. Jane's self-controlled moderation is portrayed as the only way to escape mental and physical disorders: the protagonist is not subjected to her passions, but neither does she repress them completely, she is able to find a balance, thus walking on the thin thread of sanity.

The female characters are also involved in a tension between resoluteness and passivity, that is, between the imposition of their own will and the submission to other people's decisions. In *Jane Eyre*, passivity is also read in terms of a subjection to the passions, which stands in a continuum with insanity. Indeed, in Brontë's novel, when Jane is tempted to embrace a passive subjection to others' will or to her passions, she casts herself in the light of insanity. By contrast, Jane's resoluteness, prevailing in all such instances, leads her back to sanity. The same rule does not apply to *The Woman in White*, where neither passivity nor resoluteness are enough to escape the label of insanity and the consequent seclusion. Indeed, Laura Fairlie's display of a passive and obedient temperament predisposes her to the plots of Count Fosco and Sir Percival, who impose on her the identity of insane Anne Catherick and commit her to a lunatic asylum. Similarly, Marian Halcombe's masculine resoluteness exposes her as a deviant woman, who is thus pushed back into her accepted feminine role.

Marian's masculine features cause the woman to be branded deviant because they expose her transgression of the boundaries of appropriate feminine behaviour. Indeed, *The Woman in White* establishes absolute gender boundaries according to which women are destined to passivity, obedience, and domesticity, while men can freely act and move in the world. However, while the transgression of such boundaries on the part of a man goes almost unnoticed, the same transgression on the part of a woman gains her the label of deviant individual, and causes her enclosure inside the boundaries of feminine propriety, as is the case with Marian, but also with Anne Catherick, Eleanor Fairlie (later Madame Fosco), and Mrs Catherick. Hence, in both novels, female characters can attain freedom, and escape the looming label of insanity, only by keeping inside the boundaries of Victorian expectations on femininity, and maintaining a balance, through self-control, among the numerous definitions of insanity.

### 3. Narrative Agency and Self-definition in the Novels

In both *The Woman in White* and *Jane Eyre* the main plot narrating the events is juxtaposed to a subplot delineating the power relations between the characters. Male and female characters are involved in a struggle for power that is played out on a relational level, as well as on a narrative level. In *Jane Eyre*, for instance, the relationship between Jane and Rochester is cast in the light of a struggle for control, where both members of the couple try to decipher and to define each other (Shuttleworth 170). Indeed, the novel focuses particularly on the power of the gaze, since the person who can penetrate the interiority of the other will be allowed to impose their own definition, thus taking full control of the narrative. Hence, the novel establishes that those who possess the knowledge will detain the power (Shuttleworth 172). The same rule applies to *The Woman in White*, but, while in Brontë's novel the interpretative battle takes place in the visual field, in Collins's work it is played out on an auditory level. The characters in *The Woman in White* are constantly trying to listen without being seen, and they attempt to steal private information without other people knowing. The aim is to gain a position of power determined by the possession of confidential information, unbeknownst to the opponents (Gaylin 308). In both novels the power struggle ultimately takes the form of a competition for authorial control (Gaylin 305), where the contestants fight to impose their own version of the story.

Authorial control is relevant to the theme of insanity, since male characters, who traditionally ascribe to themselves the power of defining other characters, can impose the label of insanity onto women and use it as a threat to force them into passivity. Women in the two novels strive to define themselves, using writing as their primary weapon against men's interpretations. Both Jane and Marian feel compelled to write, and their accounts not only serve as evidence of their sanity, protecting them from the label of insanity, but they also convey the stories of other women who do not, or cannot, have a voice of their own, and therefore have no possibility of defining themselves. This chapter analyses how women in the novels are forced into silence and passivity by various institutions, such as schools, asylums, marriage and, more in general, certain values and traditions of nineteenth-century society. Moreover, it argues that the narrative efforts of the two female storytellers in *Jane Eyre* and *The Woman in White* can be interpreted as

both a denunciation of, and a rebellion against, the Victorian patriarchal system based on male dominance.

### 3.1. Self-definition through Writing

In the two novels the act of narrating and the act of writing assume critical importance, especially for women, since the oral or written accounts of their stories allow the female narrators, Jane and Marian, to assert their own identity, thus fighting back other people's attempts to define them. The narrative effort of the protagonists is thus a central element in both novels, where writing becomes a fundamental means to keep an objective record of the events and to ultimately assert one's own sanity, defying the labels imposed by other people. *Jane Eyre* is the story of the eponymous heroine, narrated entirely by Jane herself; the protagonist gives an account of the major events taking place in her life, from childhood to adulthood, and, looking back, she gives her own interpretation of those episodes, commenting upon them. *The Woman in White*, instead, is presented as a collection of different narratives, the most extensive being Marian's and Hartright's. The fact that Jane is the only author of her story, while Marian's account is incorporated into a collection of narratives, edited by Walter Hartright, determines the different outcomes of the two novels: Jane is ultimately able to affirm her right to self-determination, prevailing on other people's desire to define her; Marian, on the contrary, loses authorial control and, in the end, is defined by Walter Hartright, who frustrates her transgressive nature, redefining her, according to Victorian conventions, as the "good angel" (Collins 814) in the house.

The act of narrating is essential for both Marian and Jane, since, as mentioned above, it allows them to define others and to define themselves, but the production of their own stories has slightly different meanings for the two women. On one hand, Jane writes for a hypothetical reader, whom she addresses in several instances, for example when saying: "[r]eader, I forgave him at the moment and on the spot" (Brontë 359), or again stimulating the reader's imagination: "[l]et the reader add, to complete the picture, refined features" (Brontë 50). Jane writes to tell her story to an audience, so that she can publicly refute, once and for all, other people's definitions of her, thus asserting her independence and self-determination. Marian's account, on the other hand, is like a journal: it is not meant for the public, but for herself. Marian writes to record and analyse the events, and to leave



an indelible trace of Laura's identity and a proof of her own mental sanity. Indeed, her journal will be fundamental in the reconstruction of the events leading to Laura's incarceration and it will serve as a proof in the dismantling of Glyde and Fosco's plot.

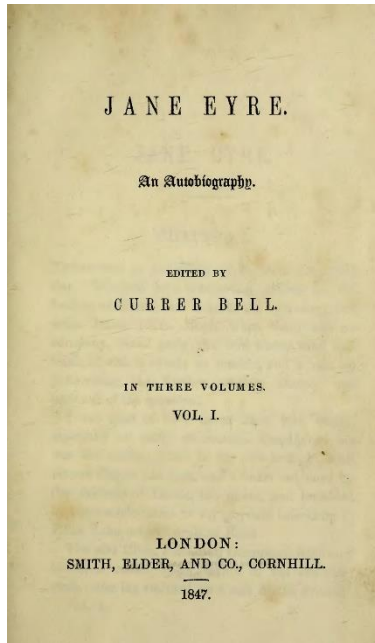


Figure 2: *Jane Eyre*, title page

The title page of *Jane Eyre* shows the novel's subtitle: "An Autobiography." Such subtitle is extremely suggestive, since it establishes, even before the beginning of the first chapter, the privileged position of Jane, that of narrator. The beginning of the novel is itself emblematic: after an opening sentence with no subject: "[t]here was no possibility of taking a walk that day" (Brontë 1), followed by a first person plural: "[w]e had been wandering [...]" (Brontë 1), the narrating I abruptly enters the scene (Sdegno): "I was glad of it; I never liked long walks [...]" (Brontë 1). Jane introduces herself through a negative sentence and immediately singles herself out from the rest of the company. Such introduction asserts Jane's point of

view, placing it in opposition to the rest of the characters populating the scene. It is Jane who will narrate the story, her voice will delineate characters and events, granting her complete authorial control. Occasionally, however, Jane's voices multiply, distinguishing between the narrating I and the experiencing I (Sdegno); this happens especially in the chapters relating Jane's childhood, where child Jane voices her feelings and emotions, while adult Jane interprets the child's internal states and comments upon them (Sdegno). Through the narration of her story, adult Jane wants to legitimise child Jane's feelings, which had been neglected by the Reed family. As a child, Jane had been branded deviant due to her bursts of anger; in writing about those days, exposing the reality of the situation and child Jane's mental processes, adult Jane Eyre asserts her sanity and removes from herself the label of marginalised individual.

Shuttleworth has defined Jane's history a "social fight to wrest control of the power of social definition" (153), indeed, Jane writes out of a desire to rewrite the past, according to her own interpretation of the events. In the course of the novel a number of characters will force their definition of Jane onto her, and it will be Jane's aim, in writing, to refute those definitions (Shuttleworth 180); the Reeds family are the first to define Jane,

branding her as deviant due to her bursts of anger in childhood. Even as a child, Jane could not bear to be defined by other people, especially if those definitions casted doubts on her character. When Mrs Reed denounces her to Mr Brocklehurst, saying she has “a tendency to deceit” (Brontë 33), Jane reports that “the accusation cut me to the heart” (Brontë 34); Jane cannot stand being called a liar, since it is not true, thus, she expressly rejects her aunt’s definition and threatens her to tell her version of events to anybody who will ask her:

I am not deceitful: if I were, I should say I loved *you*; but I declare I do not love you [...]; and if anyone asks me how I liked you, and how you treated me, I will say the very thought of you makes me sick, and that you treated me with miserable cruelty. [...] I will tell anybody who asks me questions this exact tale. People think you a good woman, but you are bad, hardhearted. *You* are deceitful! (Brontë 36,37)

Having declared the truth in front of Mrs Reed, Jane exults and experiences “the strangest sense of freedom” (Brontë 37), but still, she feels the compelling need to tell her truth to other people. Indeed, in her first days at Lowood she meets Helen Burns and, still suffering the after-effects of her last confrontation with Mrs Reed, she narrates her story for the first time: “[...] I proceeded forthwith to pour out, *in my own way*, the tale of my sufferings and resentments. Bitter and truculent when excited, I spoke as I felt, without reserve or softening” (Brontë 64; emphasis added). Having established her sanity in her account to Helen, Jane strives to assert her true good nature in the school, determined to distance herself from the definition of marginalised, deviant, inferior other the Reed family had forced on her. This notwithstanding, Mr Brocklehurst divests her once again of the power of social definition, pointing her out as a “castaway,” “an alien” and, ultimately, “a liar” (Brontë 74). After this public condemnation, not only is Jane upset because of the punishment she received, but also because, as she tells Miss Temple: “I have been wrongly accused; and you, ma’am, and everybody else will now think me wicked” (Brontë 80). What worries her the most is that these definitions might affect the way other people – including people whose opinion she values – may perceive her, and she refuses to be again labelled as wicked based on false accusations. However, Miss Temple gives Jane the opportunity to defend herself against the accusations.

The urgency child Jane felt to tell her version of the story, asserting her sanity, is temporarily satisfied through oral narration; however, adult Jane Eyre further satisfies her need of self-assertion by writing down her whole history, making it official and indelible, and allowing it to reach a much wider audience than just Helen Burns and Miss Temple. Since Helen rebuked Jane because her account was imbued with resentment and passion, when she relates her experience to Miss Temple, Jane determines to restrain her emotions:

[...] I told her all the story of my sad childhood [...] and mindful of Helen's warnings against the indulgence of resentment, I infused into the narrative far less of gall and wormwood than ordinary. Thus restrained and simplified, it sounded more credible: I felt as I went on that Miss Temple fully believed me. (Brontë 80, 81)

Miss Temple hears a restrained version of Jane's tale, since the presence of violent emotions would have compromised the credibility of her account. Conversely, in writing her story, Jane can detail the events with no reservation, since the juxtaposition of child Jane's bursts of anger with adult Jane's more rational reflections allows the story to still sound credible. Jane's ultimate aim, in writing her story, is "to tell a 'credible' tale and thus win from readers a conviction of her probity and sanity" (Shuttleworth 152). If her tale will prove credible, the reader, to whom the story is addressed, will trust her; in this way not only is she able to define herself, but she can also define the entire world she included in her story – she owns her own narrative.

In *Jane Eyre*, the act of remembering and narrating is essential to the shaping of Jane's identity (Huffels 43); similarly, the narrative process of *The Woman in White* aims at the restoration of Laura's identity (Huffels 43). However, there is a fundamental difference between the two novels: Jane is the only narrator of her story, while she has to struggle in life in order to impose her own definition, on a narrative level she has complete authority over the interpretation of characters and events; by contrast, in *The Woman in White* the narrative focus shifts from one character to the other, thus generating "a continual struggle over how to see, over the control of time and memory, over the control of writing, a struggle bound up with the battle for self management and self definition" (J. Taylor, "Narrative of Moral Management" 52). Arguably, Marian Halcombe has to struggle the most to assert her own perspective, since, being a woman, her narrative

efforts are repeatedly hindered by male narrators. Indeed, Laura is not the only woman whose identity is in danger: the unconventional Marian is constantly surveilled by male characters who feel threatened by her liminality and independence of action and consequently try to force her back into a more conventional, passive, feminine role (Gaylin 309).

Marian's only weapon of defence are her words: through writing she asserts her position of active, narrating woman, in a world that presupposes her passivity (J. Taylor, *Secret Theatre* 117) and identifies her as a "narratable object" (Gaylin 318). The first concrete steps Marian takes against Fosco and Glyde's plot take the form of letters (Gaylin 316): Marian writes to Laura's lawyer twice, in an attempt to protect her half-sister. In so doing, she *acts* in the public sphere, claiming for herself a role that was conventionally masculine. Nevertheless, Marian's most powerful resource is her journal, where she records the events and her impressions. The journal serves as surrogate for Marian's memory, a place where she can look back on the past and analyse the facts (J. Taylor, *Secret Theatre* 118); through her journal Marian "fix[es] and explain[s] meanings" (J. Taylor, *Secret Theatre* 119). While Jane Eyre narrates her story retrospectively, to an audience, Marian writes for herself and she documents the events right away (Strovas, "Narratives of Sleep" 27); Marian feels the urgency to entrust the account of the events and her impressions to the permanence of the written word, since she senses danger and realises that Fosco and Percival are plotting to impose their will and their definitions on the two sisters. In the world of *The Woman in White*, where written words are much more powerful than oral accounts, and those words that are written down are usually considered to be true and difficult to deny<sup>3</sup>, Marian's only countermeasure is writing to leave a trace of hers and Laura's true identities. In writing, Marian defines herself as a narrating, active subject; for this reason, the bond between the heroine and her writing is progressively stronger: as long as she writes, Marian exists on her own terms and according to her own definitions, she can exist as liminal being, halfway between feminine passivity and masculine resoluteness. As long as she writes she can assert herself as a free and sane

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<sup>3</sup> In order to deny the compromising content of the mysterious letter received by Laura, Percival Glyde produces a written testimony signed by Mrs Catherick; such written account is taken to be the ultimate proof of his innocence. Furthermore, in admitting Laura to the asylum (under the name of Anne Catherick), the fundamental evidence attesting that she is in fact Anne is the name of the latter written on the label of her clothes.

individual, and attest to Laura's identity and sanity. Marian writes "with a heavy hand and a quill pen" (Collins 393), as if she wanted to make her testimony indelible, and she "scrap[es] and scratch[es] noisily over the paper" (Collins 394), as if through her act of writing she was voicing a rebellion to others' definitions and a vindication of freedom and self-assertion.

The line of demarcation between Marian and her writing is gradually blurred: the two are bound together to the point where Marian's health is reflected in the shape of her narrative (Strovas, "Narratives of Sleep" 28). The peak of the process of embodiment between Marian and her writing occurs in the hours following the eavesdropping scene. After hearing the conversation between Fosco and Glyde, Marian goes back to her room and starts writing everything down; she believes that her report of that exchange will be fundamental for her and Laura to escape the evil machinations of the two men:

I remember the persuasion settling itself in my mind that the words those two men had said to each other would furnish us, not only with our justification for leaving the house, but with our weapons of defence against them as well. I recall the impulse that awakened in me to preserve those words in writing, exactly as they were spoken, while the time was my own, and while my memory vividly retained them. (Collins 429)

After having transcribed the conversation word for word she guides the reader through her mental processes and asserts her sanity, as if to prove the accuracy of her report: "All this I remember plainly: there is no confusion in my head yet" (Collins 492). However, weakened by the exposure to bad weather and by the wakeful hours spent writing, Marian's health starts deteriorating, along with her narrative. Marian writes of herself writing, and she asks "Why do I sit here still? Why do I weary my hot eyes and my burning head by writing more? Why not lie down and rest myself, and try to quench the fever that consumes me, in sleep? I dare not attempt it" (Collins 429). Arguably, she goes on writing because she knows that her words are the only weapon she has, and her only means of assertion. If she stops, she will be defenceless, she will stop defining herself and will be written by someone else. Marian's writing stops in the exact moment when she loses consciousness (Strovas, "Narratives of Sleep" 29):

Oh, my God! Am I going to be ill? Ill, at such a time as this! My head—I am sadly afraid of my head. I can write, but the lines all run together. I see the words. Laura—I can write Laura, and see I write it. Eight or nine—which was it? So cold, so cold—oh, that rain last night!—And the strokes of the clock, the strokes I can't count, keep striking in my head— (Collins 430)

The line between Marian's writing and her mental and physical health is completely blurred: Marian has become one with the text, and when it stops, the version of Marian narrated in the journal ceases to exist. Fosco's inscription in Marian's journal wrests narrative agency from her: the heroine can no longer define herself and is thus removed from the liminal position she occupied, in order to be pushed back to the sphere of femininity (Gaylin 318).

Fosco removes Marian from her role of narrator, since her resoluteness posed a threat to the plotters (Strovas, "Narratives of Sleep" 28); through her journal Marian defined herself and attested to Laura's identity and sanity, so that it was necessary to get the writing, and Marian herself, out of the way, in order for the two schemers to succeed in their plans. No longer a narrator, Marian becomes "nothing but a woman, condemned to patience, propriety, and petticoats for life" (Collins 251); she has no power against male narratives (Gaylin 319). Consequently, when trying to re-establish Laura's identity and sanity, Marian fails because it is her word of woman against the word of men. By writing, Marian transgresses the boundaries of her feminine role, but in transcribing the private conversation she overheard she overtly "arrogates to herself the male privileges of mobility, writing, and agency" (Gaylin 317). Reading her journal, Fosco exposes Marian's masculine side, so that she is branded deviant for trespassing the social boundaries of feminine propriety; made unable to define herself, Marian endures the label of deviant individual and cannot shake it off.

As previously mentioned, through her writing Marian defined not only herself, but Laura too. Indeed, her fundamental aim is that of attesting to Laura's existence and her identity. In the span of time when Marian stops writing, we lose track of Laura almost completely and, no longer delineated by Marian's pen, Laura's identity falls into pieces. First, Fosco and Glyde devise an identity exchange by which Laura becomes Anne and vice versa; then, Laura's new identity as 'insane Anne' is made official through her admission to the

asylum, under the name of Anne, and wearing her labelled clothes; finally, after real Anne's death, Laura is pronounced dead. When Marian stops narrating and defining her, Laura ceases to exist, she is legally dead until Marian rescues her from the asylum and unofficially restores her identity. Laura, who has never had a voice to define herself throughout the whole novel, is unable to remove from herself the label of insane, but Marian, too, has been deprived of the narrative agency and is thus unable to re-establish Laura's identity in the public sphere. Arguably, Marian does not resume her writing because she has learned her lesson: the price to pay for transgressing the boundaries of accepted feminine behaviour, imposing herself as active, narrating individual, is the label of deviant and the consequent confinement in the abandoned wing of Blackwater mansion. Weakened by the punishment she received, Marian is unable, or unwilling, to get her narrative agency back, and seeks male help in her mission to reassert Laura's identity and sanity.

It will be Walter Hartright, in the shape of a new, virile man, to narrate both women: once he gains narrative authority, Hartright takes control of Laura's and Marian's identities (Gaylin 308). He enforces his dominance over Marian and reiterates her seclusion in the domestic space by preventing her from acting outside, thus relegating her to the feminine sphere. Moreover, he keeps Laura in a state of passivity, encouraging her childlike attitude and obedience. Once his narrating competitor, Marian, has been removed from the role of narrator, Hartright seizes control over the story and exploits it to consolidate his new social identity (Taylor, *Secret Theatre* 110). He pushes Marian in the position of "good angel" (Collins 814) in the house, places Laura in the role of obedient wife and thus establishes himself as the patriarch (Gaylin 321), father to "*The Heir of Limmeridge*" (Collins 814).

### 3.2. The Matter of Voice

In the two novels, Jane and Marian are the only two female characters allowed to narrate their own tales. *Jane Eyre* opens and closes with Jane's voice, guiding the reader through the history of her life and giving her own interpretation of the events; by contrast, in *The Woman in White* Marian's voice is heard only for a portion of the novel: she narrates as long as she can, but she is eventually deprived of her narrative agency and succumbs to men's endeavours to silence her. The other women populating the two novels do not have

a voice of their own: their stories are told by other characters, who convey their experiences through the filter of their own interpretation. Hence, it is impossible to know what these voiceless women think or feel, the reader only has access to a biased account of their stories. Such female characters have been pushed into the conventional role of passive Victorian women, either by the internalisation of Victorian conventions of appropriate behaviour, or by men's imposition of those behavioural codes upon them. In both *The Woman in White* and *Jane Eyre*, those characters who do not have a voice, or are deprived of their voice, are unable of defining themselves, and are thus subjected to the labels that society imposes on them; at one point in the narration all of them are either branded insane, or they risk being labelled so.

*The Woman in White's* quintessentially voiceless characters are Laura Fairlie and Anne Catherick. The two half-sisters are not allowed a voice of their own (Strovas, "Narratives of Sleep" 34), they cannot define themselves and their words can only be heard through the accounts of other people. It is no coincidence that these two voiceless female characters are the ones who will face the label of insane and be enclosed in the asylum. Laura Fairlie's lack of voice is evident since her very introduction in the novel: while Marian Halcombe is the first person Walter encounters at Limmeridge House and introduces herself "in a clear, ringing, pleasant voice" (Collins 41), Laura is introduced by Marian, and her voice will be heard for the first time only many pages later. In the occasion when Hartright actually does meet Laura, the span between his first glance of the woman and the first interaction they have is of four pages, during which Hartright gives a detailed description of Laura and tries to interpret her and to unpack the sensations that her appearance provokes in him. Arguably, such long, detailed portrayal is suggestive of Laura's role in the novel: her character is described and interpreted by many narrators, but never by herself. Even when Laura's voice is finally heard, she pronounces "*few* kind words of welcome" (Collins 64, emphasis added), since Marian immediately "t[akes] the business of talking, as easily and readily as usual, into her own hands" (Collins 64).

Laura exists in the narratives of Marian and Hartright, but once she is separated from them, her voice is completely lost. Not having a voice to define herself, Laura's identity is extremely fragile, it is broken down and reconstructed throughout the story, but never by Laura herself (Taylor, *Secret Theatre* 99). As previously mentioned, the purpose of the whole novel is to restore Laura's identity through the testimonies of other individuals;



when there are no witnesses to Laura's existence, that is, when she is left alone in the asylum, there is no way of retracing the events, since Laura is unable to remember and to provide an account of what happened to her.

The novel conveys Laura's voicelessness by actually assigning her a minor speaking role, particularly after her rescue from the asylum (Strovas, "Narratives of Sleep" 34), when she is showed to silently obey Hartright's instructions. However, in the first part of the novel too, her voice is not often heard; indeed, initially Laura's major means of expression is her piano (Losseff 543). Laura, as was customary with upper class Victorian women, uses her music to give free expression to her feelings and to deal with subjects that could not, for propriety's sake, be mentioned (Losseff 534). Laura's only 'act of rebellion' against a society which imposes her to be quiet and passive, and to play the piano in order to delight guests with her music, is turning such convention to her advantage, making of her piano a communicative tool to express either happiness, love, frustration, or other unmentionable emotions. Laura communicates not only through her attitude in playing the piano, as for instance when she moves her fingers over the keyboard "with a strange feverish energy" (Collins 153), or "with a lingering fondness – a soft, plaintive, dying tenderness, unutterably beautiful and mournful to hear" (Collins 155); she also expresses her mental states through her choice of repertory (Losseff 534). While in the first musical scene, during the first night of Hartright's stay, Laura chooses to reproduce the "heavenly tenderness of the music of Mozart" (Collins 70), which she picks again, as an homage to Hartright, during their last night together, the first time she plays for Sir Percival she chooses "new music of the dexterous, tuneless, florid kind" (Collins 209). Such a choice suggests her frustration and resignation to the idea that she is going to marry a man she does not love, and that she has lost, supposedly forever, the one she loved. Indeed, Marian points out that: "[t]he lovely old melodies of Mozart, which poor Hartright was so fond of, [Laura] has never played since he left" (Collins 209).

Marian stands as the sole interpreter to Laura's musical expression: she is the only one who was present during each musical performance by Laura, and can thus notice the difference in repertory and style (Losseff 545); moreover, she is a woman, and this, according to the logic of the novel, makes her sensible to the shifting messages conveyed by Laura's music (Losseff 536). Indeed, the narrative establishes that words pertain to the domain of men, along with the power of definition, while women, passive and quiet, are

associated with music, where they find an outlet for their emotions (Losseff 548). Accordingly, Fosco speaks, writes, and he even sings the lyrics of songs, whereas Laura plays the piano and is heard humming “the melodies which she had been playing earlier” (Collins 72). Marian has established since the beginning of the novel that she “do[es]n’t know one note of music” (Collins 44), but she can recognise that “Miss Fairlie plays delightfully” (Collins 44); her liminal condition allows Marian to manage both the linguistic and the musical codes: she can interpret Laura’s musical messages and is skilled in using and manipulating language. For this reason, Marian will serve as an intermediary, deciphering Laura’s music and putting the emotions her sister is expressing into words in her journal (Losseff 549). Laura defines herself through her music, but music is aerial and is easily defied by the concreteness and indelibility of the written word. Indeed, Laura’s melodic voice will not be able to oppose the label of insanity that male voices will impose on her. Laura’s musical propensities are contrasted by her future husband’s complete hostility to music; speaking of his friend, Fosco points out that: “[i]f Percival is coming, [...] harmony and melody are both at an end” (Collins 402). The surface meaning of this sentence denotes that Sir Percival does not understand music; however, since music is Laura’s means of expression, Fosco’s assertion could be implying that once Laura will be married to Percival her harmonious voice will have “an end” (Collins 402), she will be silenced completely and will be defined by her husband.

The other central character whose voice goes unheard is Anne Catherick. Her first appearance on the scene, at the very beginning of the novel, reveals a lot about Anne’s relationship with words. Anne is introduced in the novel not through her voice, but through the touch of her hand; Walter writes he was “brought to a stop by the touch of a hand laid lightly and suddenly on [his] shoulder from behind [him]” (Collins 26). Initially struck by the chilling apparition of the woman in white, Walter later enters into conversation with her, and wonders on the motives of such peculiar introduction:

“I heard you coming,” [Anne] said, “and hid there to see what sort of man you were, before I risked speaking. I doubted and feared about it till you passed; and then I was obliged to steal after you, and touch you.” Steal after me and touch me? [Hartright wonders.] Why not call to me? Strange, to say the least of it. (Collins 28)

Hartright notices that Anne's voice "had something curiously still and mechanical in its tones" (Collins 27); Anne's is the voice of a woman who, recently escaped from an asylum, is not used to speak, in fact, she has been taught to keep silent. Anne's attitude suggests that she is used to being unheard, indeed, she asks Hartright: "[d]id you hear me?" (Collins 27) and repeats her question, and utters the words "[w]ill you promise?" (Collins 29) four times. Conceivably, such repetition also suggests her lack of confidence in male figures. A man is responsible for Anne's fear of words: talking to Hartright she says that she had to evaluate him before she "*risked* speaking" (Collins 28, emphasis added). Anne is afraid to speak because her voice, back in the days, had caused her committal to the lunatic asylum, at the hands of Sir Percival. As a child she had been offended by Sir Percival calling her an "idiot" (Collins 694) and, in a burst of anger, she had threatened to reveal his secret. Anne's passionate temper, which Victorian conventions deemed intolerable in a child, together with her reputation of "half-witted" individual (Collins 692), contributed to Percival's scheme to brand her as deviant and silence her through committal to an asylum. Sir Percival is able to confine Anne with the unquestioned authority of his male voice; with the complicity of medical men, either ignorant or corrupted, he imposes the irrevocable label of insane individual on Anne, thus delegitimising her voice permanently.

Later on in the novel, Anne tries to communicate through a letter, where the weakness of her voice is symbolised by the "feeble and faint" handwriting (Collins 100). Anne's powerless voice looks for legitimation in the authority of the Bible (Taylor, *Secret Theatre* 111): "Do you believe in dreams? I hope, for your own sake, that you do. See what Scripture says about dreams and their fulfilment (Genesis xl. 8, xli. 25; Daniel iv. 18-25), and take the warning I send you before it is too late" (Collins 98). However, Anne's message loses credibility to Marian and Hartright, since it is conveyed through an anonymous letter, it narrates the content of a dream (Taylor, *Secret Theatre* 111) and it comes from a woman whom they assume to be "deranged" (Collins 100). Anne's epistolary testimony is ultimately denied by a more authoritative written account, signed by her mother and produced by Sir Percival. Mrs Catherick's letter, in few lines, enforces the delegitimization of her daughter's voice by corroborating Sir Percival's account concerning the dynamics of Anne's committal, thus attesting to her insanity. The label of

insane has completely deprived Anne's voice of authority and reliability, and going forwards her words will be considered to be the words of a deranged woman.

The novel also includes the story of the silencing of a third woman: Madame Fosco. Talking about the transformation her aunt underwent, Marian writes:

As Eleanor Fairlie (aged seven-and-thirty), she was always talking pretentious nonsense, and always worrying the unfortunate men with every small exaction which a vain and foolish woman can impose on long-suffering male humanity. As Madame Fosco (aged three-and-forty), she sits for hours together without saying a word, frozen up in the strangest manner in herself. [...] On the few occasions when her cold blue eyes are off her work, they are generally turned on her husband, with the look of mute submissive inquiry which we are all familiar with in the eyes of a faithful dog. (Collins 275)

Madame Fosco, once incessantly talking nonsense, has been silenced by the moral management imposed by the "extraordinary power of [her husband's] eyes" (Collins 278). Marian notes that the count is such an assertive man that, were she his wife, she too would have been tamed by him: "[i]f he had married me [...] I should have held my tongue when he looked at me, as [his wife] holds hers" (Collins 276). The rebellious and noisy Eleanor Fairlie, characterised by her laughs, screams, and babble, has turned into the quiet and obedient Madame Fosco, distinguished by "the rustling of her gown" (Collins 393), and she is now "a willing instrument in her husband's hands" (Collins 393). The use of the word 'instrument' is particularly suggestive: on one hand, Madame Fosco serves as a tool in the realisation of Count Fosco's schemes, spying on Laura and Marian and diverting their attention from Fosco's machinations; on the other hand, she is depicted as a musical instrument, since she only speaks when she is played, that is, when she is given permission by her husband.

Lastly, the fourth woman who undergoes a process of silencing in the novel is the one whose voice was the most assertive, the narrator Marian Halcombe. Indeed, resolute Marian, who asserted her right to speak and to be heard with commanding sentences like "I want to speak to you" (Collins 71), or "I want you to listen [...]" (Collins 71), from a certain point in the novel is deprived of her voice. Marian's words, made indelible by her incessant journaling activity, are perceived as a threat to male authority: by consigning

her memories and reflections to the paper, making them definite, Marian takes ownership of the male power of determination and thus constitutes a threat to the patriarchal system, which instead expects women to be passive and subjected to men's definitions. It is Count Fosco, through his inscription in Marian's diary in his "large, bold, and firmly regular" handwriting (Collins 430), that literally writes her out of her narrating role, turning her, instead, into a "narratable object" (Gaylin 318). Deprived of the narrative agency and of the possibility of defining herself, Marian "inhabits the text vicariously, through the male narratives of Hartright and Fosco" (Milbank 76). Such narratives confine her to the sphere of femininity whose boundaries she had long trespassed, so that her voice, once symbolised by the "scraping and scratching" of her pen (Collins 393), is later identifiable with the sound of her feminine garments (Gaylin 318). In the third section of the novel, Hartright takes control over the narrative, further accentuating Marian's diminished position. He openly steals women's voices, reporting their narratives in his own words:

I shall relate both narratives, not in the words (often interrupted, often inevitably confused) of the speakers themselves, but in the words of the brief, plain, studiously simple abstract which I committed to writing for my own guidance, and for the guidance of my legal adviser. So the tangled web will be most speedily and most intelligibly unrolled. (Collins 533)

In the closing scene, he 'benignly' grants Marian the opportunity to close the story, but her voice is no longer her own, no longer written in her own words: she intervenes through the patriarchal authority of Walter Hartright, who needs to grant her permission to speak.

While Marian Halcombe is allowed a narrative role for only a section of *The Woman in White*, in *Jane Eyre* Jane's voice function as a filter to the narrative throughout the whole novel; readers can only see what Jane allows them to see, what her voice shows them. Jane's desire for self-determination is evident since the very beginning, when she refuses the label the Reed family forces on her. As previously mentioned, in various occasions the narrator directly addresses the reader, thus manifesting her desire of being listened to: throughout the novel Jane is not just speaking, she is talking to her audience. The novel provides a number of instances when Jane is temporarily deprived of her voice and of the possibility of defining herself; in such instances the protagonist cannot stand the distorted portrayal other people make of her, and strives to make her voice heard once again.

Initially, the label of deviance Mrs Reed had imposed on Jane due to her bursts of anger had delegitimised her voice: when screaming from the red-room, terrified by the idea of Mr Reed's ghost, neither the housemaids nor Mrs Reed believe Jane's dread. Miss Abbot, one of the maids, thinks that "she has screamed out on purpose" (Brontë 14), while Mrs Reed warns Jane:

Loose Bessie's hands, child: you cannot succeed in getting out by these means, be assured. I abhor artifice, particularly in children; it is my duty to show you that tricks will not answer: you will now stay here an hour longer, and it is only on condition of perfect submission and stillness that I shall liberate you then. (Brontë 14)

Mrs Reed, who despised Jane's passionate nature, decides to send her to a boarding school to eradicate those "bad propensities" (Brontë 17), and in the occasion of the interview with Mr Brocklehurst, Lowood's supervisor, she denounces Jane's "tendency to deceit" (Brontë 33). Outraged by the false label her aunt imposed on her, Jane feels the need to voice her truth: "Speak I must: I had been trodden on severely, and *must* turn [...]. 'I am not deceitful [...].'" (Brontë 36). After having established the falsity of Mrs Reed's claims, Jane feels satisfied, and she will experience a similar satisfaction when, after being branded a liar in front of the whole school by Mr Brocklehurst, she will have the chance to restore her reputation by narrating her version of the facts to Miss Temple. Mr Rochester too, tries to impose on Jane his own definition of her: he idealises his future bride, comparing her to that model of the perfect Victorian angel that has always been associated with the idea of subjection to the husband (Lerner 285). Nevertheless, Jane refuses Rochester's language and rebukes him: when he refers to her with the name of "angel" (Brontë 311), Jane laughs at him and replies: "I am not an angel, [...] and I will not be one till I die: I will be myself" (Brontë 311).<sup>4</sup> Jane has her own voice, and refuses to be labelled by other people, even if the label is a flattering word like 'angel;' such a label would be untrue and would deprive her of her identity. Rochester also tries to turn

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<sup>4</sup> This passage echoes what Marian says about herself when juxtaposing herself to Laura: "she is an angel; and I am – Try some of that marmalade, Mr Hartright, and finish the sentence, in the name of female propriety, for yourself" (Collins 43). Both Marian and Jane reject the label of "angel" and define themselves as something else.

her into a princess, and promises to cover her in jewels, but again, Jane resists his attempts because she does not want to be defined as something she is not:

“[...] Don’t address me as if I were a beauty; I am your plain, Quakerish governess.” – “You are a beauty in my eyes, and a beauty just after the desire of my heart, – delicate and aërial.” – “Puny and insignificant, you mean. [...]” – “I will make the world acknowledge you a beauty, too,” he went on, [...] “I will attire my Jane in satin and lace, and she shall have roses in her hair; and I will cover the head I love best with a priceless veil.” – “And then you won’t know me, sir; and I shall not be your Jane Eyre any longer [...]. (Brontë 310)

Jane immediately recognises that Rochester is trying to turn her into someone else, a different Jane Eyre, and stops him right away: she determines that she will not wear jewels or rich fabrics, and asserts that she will remain a “plain, Quakerish governess” (Brontë 310).

Jane’s retrospective narration vocalises the sufferings of another female character, whose voice has been stolen: Bertha Mason (Beattie 501). Confined in the attic of Thornfield Hall by her husband, Bertha’s voice is never heard throughout the whole novel; the story of her life is told by Rochester, in a self-interested account through which he had to convince Jane he was acting in good faith (Small 166). The version of Bertha he traces in such a narrative is potentially non-objective, since Rochester had all interest to portray a woman as depraved as possible, in order to make his immoral actions sound more justifiable. It is Rochester who determines Bertha’s insanity, by defining her: “low,” “gross,” “impure,” “depraved,” “violent and unreasonable,” “the daughter of an infamous mother,” “intemperate and unchaste” (Brontë 368, 369). Bertha’s label of insane is further endorsed by the authority of (male) doctors, who officially diagnose her madness. Rochester proceeds to narrate his journey towards depravity, which mirrors the story of Bertha’s mental and moral degeneration (Small 174); this notwithstanding, he insists on marking the differences between the two of them, pointing out:

I tried dissipation – never debauchery: that I hated, and hate. That was my Indian Messalina’s attribute: rooted disgust at it and her restrained me much, even in pleasure. Any enjoyment that bordered on riot seemed to approach me to her and her vices, and I eschewed it. (Brontë 375)

Rochester has the opportunity to explain his own version of the facts, and maintains that during his European adventures he was looking for moral sympathy, rather than sexual pleasure (Small 174); he exploits the story of Bertha's insanity to remove part of the blame from himself. His account is never questioned in the novel, since it comes from the lips of a white, upper-class man. By contrast Bertha, portrayed by Rochester under a negative light, has no possibility to tell her version of the story and to defend and define herself.

Rochester has effectively silenced his supposedly-mad wife: “[o]ne night I had been awakened by her yells – (since the medical men had pronounced her mad, she had, of course, been *shut up*) [...]” (Brontë 370, emphasis added). On one hand, Bertha is materially incapable of intervening in Rochester's narrative and give her own version, since she has been confined to the third storey; on the other hand, the label of madness her husband imposed on her has delegitimised her voice: much like Anne Catherick's, Bertha Mason's voice has been permanently branded as the unreliable voice of a mad woman. However, while Anne was still granted the possibility to tell her own story (which, being told by a deranged woman, was dismissed as not credible), Bertha Mason is a completely voiceless character. She is heard uttering actual words only in Rochester's account, where her language is described as that of an insane woman:

[...] my ears were filled with the curses the maniac still shrieked out; wherein she momentarily mingled my name with such a tone of demon-hate, with such language! – no professed harlot ever had a fouler vocabulary than she: though two rooms off, I heard every word [...]. (Brontë 371)

Bertha's coarse language does not belong in the scene of the novel, it pertains to a setting outside of Jane's experience, and is, therefore, narrated by Rochester. In the period Jane spends at Thornfield Hall Bertha never utters a word, indeed, she is introduced in the novel not through her voice, but through her laugh. Bertha's laughter, together with the animal sounds she reportedly emits, are all that remains of her voice. Rochester tries to steal those vocal remnants too, by instructing the servants to attribute them to Grace Poole, one of the housemaids. In so doing, Rochester deprives Bertha of her name and her identity, besides depriving her of a voice to determine that identity.



Unable to use words, Bertha Mason still manages to express herself through her actions. Her nocturnal irruptions into Jane's and Rochester's rooms are too timely to be dismissed simply as the irrational actions of a mad woman: Rochester's bed is set on fire on the night when his manner frees Jane from her "painful restraint" (Brontë 174), when she discovers for the first time that she is falling in love with him and he is no longer ugly in her eyes. Bertha's attack is preceded by Jane's reflections on Rochester's nature, and seems to contradict the conclusions to which she comes: "I believed he was naturally a man of better tendencies, higher principles, and purer tastes than such as circumstances had developed, education instilled, or destiny encouraged" (Brontë 175). Similarly, Bertha's final eruption takes place on the eve of Jane and Rochester's wedding, when she breaks into Jane's room and tears the wedding veil; again, Bertha's incursion appears to be a reaction against Jane's progressive subjection to Rochester (Shuttleworth 174), indeed, the protagonist confesses that: "[y]esterday [...] I thought of the life that lay before me—*your* life, sir" (Brontë 337). The calculated nature of Bertha's attacks suggests that the woman is trying to say something, conceivably, she is revolting against Rochester's attempt to imprison Jane in the *bonds* of marriage; however, since she does not have a voice, Bertha speaks through her actions: the "tongues of flame" (Brontë 176) she lit become her actual language (Beattie 501).

The characterisation of Bertha Mason is consistent with a conception of insanity as "behavioural and linguistic dis-order, a divergence from the values and practices of hegemonic society" (Beattie 497), which Michel Foucault would propose a century later in his *Madness and Civilisation*. Indeed, through the disquieting use of her voice (her laughs and animal sounds) and her anomalous behaviour (the night incursions and physical aggressions), the figure of the madwoman opposes traditional Victorian values (Beattie 499): Bertha Mason's madness voices a denunciation of the incarceration of women Victorian society enacted through patriarchal marriage (Beattie 499). While some critics (such as Helen Small), refuse such romanticised reading of Bertha's insanity, it is commonly acknowledged that the "madwoman in the attic" (Gilbert and Gubar) is more than just a literary device necessary to the advancement of the plot. Insane Bertha Mason has something to say, and this is apparent since her very introduction: the first laugh Jane hears is not characterised as hysterical (Beattie 498), the protagonist describes it as "distinct, formal, mirthless" (Brontë 125); such peculiar adjectives used in association to

the word 'laugh' are suggestive of a hidden meaning behind Bertha's laughter. Nevertheless, readers and critics can only speculate on the meaning of the character of Bertha Mason, on the nature of her insanity and on her intentions, since the novel does not grant access to Bertha's subjectivity (Small 166). Having no voice, Bertha is unable to define herself and to expose her own point of view; she is only seen from the outside, through the eyes of other people. Rochester and Jane, in their accounts, give their own definitions of Bertha, but her own voice is never heard: "[w]hen Bertha Mason leaps to her death, her shouts can be heard a mile off, but her words - if they are words - are not recorded for posterity" (Small 158).

### 3.3. The Position of Men

I lived with that woman upstairs four years, and before that time she had tried me indeed: her character ripened and developed with frightful rapidity; her vices sprang up fast and rank: they were so strong, only cruelty could check them, and I would not use cruelty. What a pigmy intellect she had, and what giant propensities! How fearful were the curses those propensities entailed on me! Bertha Mason, the true daughter of an infamous mother, dragged me through all the hideous and degrading agonies which must attend a man bound to a wife at once intemperate and unchaste. (Brontë 369)

Rochester's account of the growing symptoms of Bertha's insanity are the only evidence the novel provides about the state of her mental health preceding the years of incarceration in the attic. Rochester, backed by the authority of "the medical men" (Brontë 370), proclaims his wife to be insane because of her "intemperate and unchaste" (Brontë 369) nature, which prevented him from having a "quiet and settled household" (Brontë 369). *Jane Eyre* and *The Woman in White* foreground the workings of the Victorian patriarchal society, where it is men who dictate social norms; they determine sanity and insanity by deciding what women's natural place should be (Milbank 73). However, according to Foucault:

[u]ncritical acceptance of anything that is presented as natural [...] allows power relations to devolve into static states of domination, where only a very limited range of thought and behaviour is deemed valid or acceptable, with the result that many more modes of existence are considered invalid, immoral, or deviant and

thereby deserving of social sanction, legal punishment, or eradication. (D. Taylor 4)

This description applies to the fictional worlds of the two novels, where male authorities trace the boundaries of acceptable feminine behaviour, thus establishing that women who cross that line are to be considered deviant. Bertha is labelled insane because she does not fit in with the model of the Victorian angel-woman Rochester expected and wanted for his wife. Similarly, Anne Catherick's disobedience to the authority of Percival Glyde and of her mother, combined with her mental retardation, prompts her committal to the lunatic asylum.

The patriarchal system in place in *Jane Eyre* and *The Woman in White* establishes the inferiority of women, a condition male characters emphasize through their words and actions. Rochester, for instance, repeatedly refers to Jane with such patronizing terms as "fairy," "pale, little elf," or "witch" (Brontë 293, 309, 337), placing her in a position of inferior other; he also stresses his physical superiority, thinking aloud: "I could bend her with my finger and thumb" (Brontë 383). His actions, too, often deliberately underline Jane's inferiority: Rochester's strategical move of having Jane witness his flirtatious behaviour towards Miss Ingram, which he justifies as an attempt to provoke Jane's jealousy, is in fact a power-game aimed at making Jane aware of her social and sexual inferiority (Milbank 144). Furthermore, in the weeks preceding the wedding, Rochester's promises of expensive gifts, silks, and jewels, contribute to reiterating Jane's social and financial inferiority, while simultaneously asserting Rochester's possession and control over her (Milbank 144). Analogously, in Collins's novel, male characters frequently point out women's condition of inferiority, especially Count Fosco, who tells Glyde:

[...] never [...] accept a provocation at a woman's hands. It holds with animals, it holds with children, and it holds with women, who are nothing but children grown up. Quiet resolution is the one quality the animals, the children, and the women all fail in. If they can once shake this superior quality in their master, they get the better of HIM. If they can never succeed in disturbing it, he gets the better of THEM. (Collins 414)

Not only does Fosco place women on the same level as animals and children, but he also stresses the disparity between "THEM," the women, and "HIM," the "master" (Collins

414). Soon after, Fosco dismissively refers to Laura as the “poor, flimsy, pretty blonde wife of [Glyde]” (Collins 415), whom he contrasts with Marian’s “resolution of a man” (Collins 415). Fosco, who superficially praises women but actually disdains them, is taken aback by the liminal Marian. Marian’s “rare courage, the wonderful power of memory [and] the accurate observation of character [...]” (Collin’s 431), together with her masculine resolution, elevate her, in Fosco’s eyes, from her condition of woman; the admiration the Count feels for masculine Marian is, he confesses, “the first and last weakness of Fosco’s life” (Collins 793). This notwithstanding, Marian too, being a woman, needs to be pushed back into her inferior feminine position, her natural place. Through her writing and eavesdropping, Marian had placed herself on an equal footing with men, if not in a position of superiority; Fosco’s inscription on her diary deprives Marian of the narrative agency, a masculine prerogative (Gaylin 318), and his critical comments on her private writing, placing him in the position of both invader and judge, are “an assertion of male sexual as well as economic and legal dominance” (Milbank 75).

From their socially determined position of power, men can define the female characters in the novels; specifically, through their words men can label a woman as insane. As previously mentioned, Rochester’s account of the first years of his marriage places the label of insane on his wife, a label later confirmed by the doctors’ diagnosis, supposedly based on Rochester’s testimonies. By terming Bertha’s nature “intemperate and unchaste” (Brontë 369) he places her outside the boundaries of proper feminine behaviour, and inside the boundaries of insanity. Having branded his first wife a “lunatic” (Brontë 373), Rochester places Jane, too, in the spectrum of insanity by denying the existence of Bertha, the woman dressed in white who entered Jane’s room (Shuttleworth 171), and dismissing it as “the creature of an over-stimulated brain” (Brontë 341). He also adds: “I must be careful of you, my treasure: nerves like yours were not made for rough handling” (Brontë 341); in blaming Jane’s nerves for the alleged hallucination, Rochester brings her dangerously close to the deviant category of the “nervous, hysterical woman” (Shuttleworth 171). Similarly, in *The Woman in White* male narratives are the only evidence necessary to label a woman insane and imprison her in an asylum. Anne Catherick was not an “idiot” (Collins 74), and her slight mental retardation did not require her committal to the asylum, so much so that the doctor consulted by Mrs Fairlie about Anne’s mental condition declared that she would “grow out of it” (Collins 73), as long as

she received an adequate education. Only when Anne's freedom becomes a threat to Sir Percival is Anne labelled insane. Laura, too, previously perfectly sane, is admitted to the asylum thanks to the certificates of two medical men, compiled on the basis of Fosco's testimony, and to Percival's letter; men's words are all that is needed to commit a woman to an asylum, and her own words can do nothing to disprove male narratives. Indeed, both Anne and Laura try to give their versions of the story, the former by explaining Sir Percival's scheme to prevent her from revealing his secret, the latter by declaring that she is not Anne Catherick, but Laura Fairlie. Nevertheless, neither of the two stories is considered credible, firstly because, as previously mentioned, after being declared insane these women's voices have been delegitimised, and secondly because it is a woman's word against the word of a man. Sir Percival's testimony of Anne's and Laura's insanity is never questioned because, as Mr Gilmore, the lawyer, points out: "Sir Percival stands very high [...] – an eminent position, a reputation *above suspicion*" (Collins 149, emphasis added). Likewise, Rochester's account about Bertha's insanity is accepted as truth, since it comes from the mouth of a white privileged man.

Besides relating the process by which women are labelled as insane, the two novels illustrate other attempts of male characters to define women according to their own expectations and desires; men deprive most female characters of their original identity, in order to substitute it with a different one, both figuratively and literally. Rochester, for instance, marries the free-spirited and provocative Bertha Mason and turns her into a vicious "maniac" (Brontë 371). During their courtship, he tries to impose on Jane the model of the angel-woman that his first wife did not reflect: he calls her a "beauty" and an "angel" (Brontë 310, 311), but Jane rejects both these definitions. However, his desire for definitional power reaches its peak when he tries to impose on her a false role and a false name (Shuttleworth 171): that of "Fairfax Rochester's girl-bride" (Brontë 309). St John, Jane's cousin, attempts to define Jane according to his own desires as well; he wants to remove from Jane's person her passionate nature, and direct all her energies towards the help of other people: he wants to impose on Jane the new identity of selfless missionary, and hopes to subject her to his will by marrying her. St John explicitly points out that his marriage proposal is aimed at granting him power and control over Jane: "I want a wife: the sole helpmate I can influence efficiently in life, and retain absolutely till death" (Brontë 490). St John has subjugated Jane with the power of his "freezing spell"

(Brontë 481), he is aware that she is under his control, since she seeks his approval, so he tries to exert his “imperial authority” (Shuttleworth 178) over her: “[...] you are formed for labour, not for love. A missionary’s wife you must – shall be. You shall be *mine*: I *claim* you – not for my pleasure, but for my Sovereign’s service.” (Brontë 486, emphasis added). The ultimate sign of St John’s bid for absolute power of definition over Jane is his laying his hand on her head, in an attempt to master her mind; Jane feels her resolution break under the weight of her cousin’s “shaping hand” (Brontë 488). Nevertheless, perceiving that her passionate nature would not be able to survive under the selfless identity of St John’s missionary wife that he wanted to impose on her, Jane is finally able to free herself from her cousin’s control, and notices in him “the disappointment of an austere and despotic nature, which has met resistance where it expected submission” (Brontë 494).

Collins’s novel, too, narrates various male attempts to deprive women of their identities and label them according to masculine expectations and needs. As previously mentioned, Anne Catherick is labelled insane because Sir Percival perceived her freedom to be a threat to the preservation of his secret. Similarly, Laura’s identity of sane Laura Fairlie is removed from her and exchanged for the identity of insane Anne Catherick; once again, such an exchange occurs at the hands of Sir Percival and Count Fosco, who exert their patriarchal defining power over the two women. Although the aim of the whole novel, as declared by Walter Hartright, is that of re-establishing Laura’s identity, Hartright’s description of Laura on the first occasion he sees her, manages to assert the distinctiveness of her appearance, while simultaneously depriving it of her individualising traits (Small 198):

Think of her as you thought of the first woman who quickened the pulses within you that the rest of her sex had no art to stir. Let the kind, candid blue eyes meet yours, as they met mine, with the one matchless look which we both remember so well. Let her voice speak the music that you once loved best, attuned as sweetly to your ear as to mine. Let her footstep, as she comes and goes, in these pages, be like that other footstep to whose airy fall your own heart once beat time. Take her as the visionary nursling of your own fancy; and she will grow upon you, all the more clearly, as the living woman who dwells in mine. (Collins 63)

By encouraging readers to imagine Laura's face as the face of the woman they love, Hartright "deprive[s her] of the specificity which would have defined not only personality but the difference between sanity and insanity for a Victorian reader" (Small 198); indeed, at the time the disciplines of physiognomy and phrenology were fundamental tools in the interpretation of the character of individuals. By blurring Laura's physical traits in his description, Hartright prevents Victorian readers, knowledgeable about these pseudo-sciences, to judge for themselves whether Laura's traits are indicative of sanity or insanity. Besides Laura and Anne, who are literally deprived of their own identities, other female characters are robbed of their individuality: Laura and Marian's aunt, originally a rebellious spinster, is redefined by her husband in the role of the perfect, obedient Victorian woman. By marrying her, Fosco deprives her of both the name and the identity of Eleanor Fairlie, and labels her as the subjected Madame Fosco. Another woman who undergoes a similar process of feminisation and subjection is Marian Halcombe: initially presented as a strong and resolute woman, Marian will be displaced from her position of active narrator, in order to be reinserted into what, according to Victorian mores, was a more appropriate role for a woman, that of "passive, narratable object" (Gaylin 318). Such displacement, at the hands of Count Fosco, is reiterated by Hartright, who restrains Marian to the domestic space (Gaylin 318), thus depriving her completely of her identity of liminal individual, and imposing on her the definition of the good Victorian angel.

Once Marian has been removed from her role of narrator, the final competition for the control of writing is played out between Walter Hartright and Count Fosco (Gaylin 306); this final textual duel demonstrates how women ultimately have no power against male narratives, since "the story becomes one of male pens, competing to write women's stories, as well as their own" (Gaylin 319). Male characters in *The Woman in White* are involved in a competition over the determination of women's identities, so much so that Laura's identity becomes a bargaining chip: Hartright will grant Count Fosco his freedom, by keeping his past identity as member of a secret fraternity undisclosed; in return, Fosco will sign a letter confessing his and Glyde's plot, thus unveiling the identity exchange between Anne and Laura and enabling Hartright to reassert his wife's true identity, that of Laura Fairlie (Gaylin 323). The social recognition of Laura, the ultimate aim of Hartright's efforts, is essential for him to secure his new position of power: by marrying Laura Fairlie, heiress to Limmeridge House, Hartright establishes his social

advancement and his new role of patriarch (Gaylin 321). His newly found social position emboldens him to claim absolute control over the narrative, so that he establishes himself as the editor of the novel. In doing so, he can actively shape the narrative, while maintaining an illusion of neutrality: Hartright can organise the testimonies of other characters, he can control the extension of their accounts, determining the starting and end points of their versions of the events (J. Taylor, *Secret Theatre* 110), and he also determines which parts of Marian's journal will be included in the final work (Gaylin 320). Nevertheless, on a superficial level, such manoeuvring is undetectable. Hartright's growing control over the narrative is essential to secure his social position of power, and, vice versa, the re-establishment of Laura's identity, and the consequent attainment of a prestigious social role, allow him to seize narrative authority. The novel thus establishes a close relationship between the control over the narrative and the control over social identity (J. Taylor, *Secret Theatre* 110), so that women, deprived of narrative authority, have no possibility of self-determination, they are defined by all-powerful men. The ultimate evidence of Hartright's control over women's identities lies in his revelation, towards the end of the novel: "I tell this story under feigned names" (Collins 704). Hartright's attribution of fictitious name to the characters populating the novel, and specifically to his wife, repeats the annihilation of her individuality: Hartright steals the woman's identity once again, and confers upon her a name and an identity of his choice (Gaylin 322).

Male characters assert their superiority by limiting female agency. Indeed, both *Jane Eyre* and *The Woman in White* illustrate various instances of women's actual or figurative imprisonments. These imprisonments are the consequence of masculine fears concerning women's rebellious energies: when women transgress the accepted boundaries of feminine propriety, be it by embracing an open sexuality, disobeying male orders, or thwarting men's conspiracies, their actions are perceived as a threat to the patriarchal system governing society. As a result, men feel the need to "tame" (Collins 276) transgressive women, which they do by metaphorically restraining them into the narrow limits of the feminine sphere and the domestic space, or by actually imprisoning them in rooms and asylums. In Brontë's novel the first imprisonment that takes place is Jane's confinement in the red room, which is not actually at the hands of a man, but is prompted by Mrs Reed, a woman who has internalised the social laws of patriarchal society. Aunt



Reed punishes Jane for her burst of anger towards her cousin, John Reed; Jane's rebellion to "Master John" (Brontë 6) and her use of violence, are deemed unacceptable by Mrs Reed, who does not tolerate such behaviour in a child and a female. The physical imprisonment of Jane in the red room serves, according to the aunt, to instil in Jane the values of Victorian society, that is, that women must restrain their passions and demonstrate passivity and obedience. Rochester will try to impose on Jane the same patriarchal values, by defining her as the weak, innocent, beautiful Victorian angel; he attempts to formally restrain Jane in the role of subjected Victorian wife by marrying her, but Jane will be able to avoid that inferior position and will go back to Rochester only once she has obtained financial independence and social advancement, thus standing on an equal footing with him (Milbank 145). Rochester's desire for patriarchal restraint emerges in two other occasions in the novel: with Bertha Mason and with Céline Varens, his French lover. Both women are characterised by sexual energies that place them outside the boundaries of feminine propriety, and outside Rochester's control; indeed, Bertha is defined by Rochester as "unchaste" (Brontë 369), while Céline is caught entering her hotel room with a lover. Nevertheless, Céline is not tied to Rochester in any way, and she can sustain herself by "marketing her body" (Shuttleworth 108), therefore she is free from Rochester's control and from his desire for patriarchal restraint. By contrast, Bertha is tied to Rochester by wedlock, and cannot escape when he imprisons her in order to limit her sexual freedom (Shuttleworth 108). Rochester is not the only restraining male force in the novel, indeed, as previously mentioned, St John too tries to use marriage to confine Jane in an identity which does not belong to her and which she does not want. His aspiration to patriarchal control is explicit, insomuch as Jane observes: "as a man, he would have wished to coerce me into obedience" (Brontë 494).

In *The Woman in White* there are recurrent episodes of women hiding, while men chase them and try to confine them (Huffles 51); for instance, after the mysterious encounter with the woman in white, Hartright wonders whether she will be "traced and captured by the men in the chaise" (Collins 37). Later in the novel, when Anne and Mrs Clements cannot be found, the lawyer proceeds to "trac[e] the two women" (Collins 149); similarly, both Percival and Fosco venture out in the woods around Blackwater Park in order to look for Anne. These images resemble a hunt, where scared women, in the position traditionally occupied by hunted animals, escape and hide from the men who want to

capture them. This parallelism between animals and women is recurrent in Collins's novel, and is made explicit by Count Fosco, in his statement: "[i]t holds with animals, it holds with children, and it holds with women [...]" (Collins 414). Male characters in *The Woman in White* endeavour to tame and domesticate women, in the literal sense of the words: the definition of the term "domesticate" reads: "To make domestic; to attach to home and its duties" ("domesticate") – such definition perfectly applies to the intentions of men in the novel, who wish to confine women in the domain of the house, where they have to devote themselves uniquely to home duties. On the other hand, the definition of "tame" reads: "To overcome the wildness or fierceness of (a man, animal, or thing); to subdue, subjugate, curb; to render gentle, tractable, or docile" ("tame") – again, the definition fits perfectly with male characters' desires of subjugation; their purpose is to subdue women's transgressive energies, their fierceness, and turn them into docile Victorian angels. The quintessential women tamer in the novel is count Fosco, who has turned his once rebel wife into a "faithful dog" (Collins 276), constantly waiting for her husband's orders. The count employs an actual system of punishment and reinforcement in the taming of his wife, rewarding her when she is obedient and accommodating, and, supposedly, punishing her if she disobeys (Milbank 65):

His management of the Countess (in public) is a sight to see. He bows to her, he habitually addresses her as "my angel," he carries his canaries to pay her little visits on his fingers and to sing to her, he kisses her hand when she gives him his cigarettes; he presents her with sugarplums in return, which he puts into her mouth playfully, from a box in his pocket. The rod of iron with which he rules her never appears in company—it is a private rod, and is always kept upstairs. (Collins 283)

The count employs the same system with Laura: her disobedience to Percival, her husband, and her attempts to escape his control, are punished with the imprisonment in the lunatic asylum (Milbank 66), the ideal institution for reforming a disobedient deviant woman. Male characters repeatedly exploit the threat of imprisonment to curb women's freedom, restraining them into their feminine roles: when Laura openly opposes her husband's will by refusing to sign the documents without first reading them, she is punished by being imprisoned in her room. When Marian, incredulous of what she is witnessing, confronts Percival, asking him for explanations, he threatens her as well:

“Am I to understand, Sir Percival, that your wife’s room is a prison, and that your housemaid is the gaoler who keeps it?” I asked. “Yes, that is what you are to understand,” he answered. “Take care my gaoler hasn’t got double duty to do—take care your room is not a prison too.” (Collins 375)

The numerous instances of women’s incarcerations at the hands of men foreground the dynamics at play in the novels and, by extension, in Victorian society, where women had limited freedom and the power of the patriarch over them was potentially boundless: “in the privacy of the Victorian house a husband may, *legally*, affect the despotism of a Gothic villain” (Milbank 66, emphasis added).

In the novels, from their untouchable position of patriarchs, men can do almost anything without incurring the sanctions of society, a condition that is diametrically opposed to that of women. While, on one hand, women who take up masculine roles are punished and pushed back into the boundaries of the feminine sphere, men, on the other hand, can freely appropriate feminine symbols (Milbank 65). Such appropriation is nothing but “another variation of patriarchal power” (Milbank 65), allowing all-powerful men to live in absolute freedom. The two novels present examples of effeminate men exercising their power over women: Mr Fairlie, Laura’s uncle, to which Hartright attributes all the characteristics of a woman, can nevertheless exert social and economic influence from his patriarchal position, forcing Laura to marry Percival Glyde with a most disadvantageous marriage settlement, and later refusing her his protection (Milbank 65). Count Fosco, too, is attributed feminine characteristics and tastes, which he openly declares; when proclaiming his love for desserts Fosco confesses: “A taste for sweets [...] is the innocent taste of women and children. I love to share it with them—it is another bond, dear ladies, between you and me” (Collins 370). Fosco places himself along women and children, but, from his position of power, his similarity to and understanding of women does nothing but increase his dominance over them (Milbank 65). Similarly, in the gypsy scene of *Jane Eyre*, Rochester disguises himself as a gypsy woman, a strategy that allows him fuller access to Jane’s mind and greater control over her (Milbank 65).

Unlike women, all-powerful men are never threatened by the label of insanity, even if they cross the already flimsy line demarcating accepted masculine behaviour. Male characters in the novels are variously defined mad or out of their mind; Fosco, for

instance, reproaches Percival for his “mischievous folly” (Collins 414), and calls him “mad” (Collins 414); similarly, when the inn-keeper tells Jane about the fire at Thornfield and about Rochester’s degeneration he asserts that “he grew savage” (Brontë 517), and “he had lost his senses” (Brontë 518). This notwithstanding, the actual label of insanity is never imposed on them, and, even if dangerously unhinged, they are never confined neither in rooms nor in asylums. It is men who have the absolute power of labelling and determining insanity and, as they can brand women insane, so can they proclaim their own sanity.

### 3.4. Institutions for Silencing

The restraining and silencing of women that take place in the two novels are implemented with the complicity of a series of Victorian institutions, namely, the asylum, the boarding school, the institution of marriage and the institutions of family and law. What makes these institutions a tool to limit and silence women is the broader institution of Victorian mores, together with the patriarchal structure of society, which provides the foundation for all other social organisations. The basic principle underpinning patriarchal society, which allows men to exert their power over women, is a conception of women as biologically inferior to men. Indeed, Bayley points out that:

[...] western culture deems women, at best, creatures fundamentally different from, and naturally inferior to, men, whose identity is determined by a relationship of subordinated complementarity with men. At worst, western culture identifies women as inferior or abnormal men and, in order to maintain ‘quality control’, seeks to ‘fix’ as many of the defectives as possible and annihilate the rest. (99)

According to this perspective, not only are men allowed, but they are required to exert control over women, for society’s sake.

One of the chief institutions male characters employ to silence women is marriage. The two novels illustrate the dynamics at play in various marriages (or perspectives of marriage in the case of *Jane Eyre*), namely: Bertha-Rochester, Jane-Rochester and Jane-St John in *Jane Eyre*, and Laura-Percival, Laura-Hartright and Count Fosco-Madame Fosco in *The Woman in White*. Each of these unions displays different dynamics of power, but, to some extent, they all reveal a restrictive nature. Rochester, married to the

“intemperate and unchaste” Bertha (Brontë 369), exploits the institution of marriage to silence her, imprisoning her in the attic (Shuttleworth 108). The marital bond gives Rochester absolute power over his wife, so that he can legally lock her up in the third storey of Thornfield for years. Bertha is thus deprived of her right to self-determination and, from then on, she loses her identity and starts to be defined only as the “madwoman in the attic” (Gilbert and Gubar). As previously mentioned, Rochester is incapable of exercising the same power over Céline Varens, since she is not constrained by the institution of marriage, but he will try to use marriage to get control over Jane. Indeed, in the weeks preceding the wedding Rochester attempts to turn Jane into the model of the obedient and devoted wife, and he does so through another Victorian institution: the ideal of the angel in the house. By defining Jane as a beautiful, caring, and docile woman, thus identifying in her the distinctive traits of the Victorian angel, Rochester is gradually pushing her towards that model and enclosing her in the narrow boundaries of feminine propriety. Similarly, St John tries to exploit the institution of marriage to exert control over Jane; by proposing to her he attempts to silence her passionate nature and impose on her a new identity: “you are formed for labour, not for love. A missionary’s wife you must – shall be. You shall be mine: I claim you [...]” (Brontë 486). St John arrogates to himself the right to determine whether or not Jane has a right to love and be love, and to define her: he recognises in her the perfect temperament for a missionary’s wife, “docile, diligent, disinterested, faithful, constant, and courageous; very gentle, and very heroic” (Brontë 487), and he is aware that the best means to impose this new identity on her and to retain control over her is marriage.

In *The Woman in White*, Count Fosco, one of the major patriarchal authorities, not only exerts control over his wife as if she were a pet, acting and speaking only when given permission, he also proves that he is fully aware of the social laws governing the patriarchal system, which grant him complete control over his wife. In his final written confession, Fosco reveals the secret behind Eleanor Fairlie’s transformation into Countess Fosco:

What is the secret of Madame Fosco’s unhesitating devotion of herself to the fulfilment of my boldest wishes, to the furtherance of my deepest plans? I might answer this by simply referring to my own character, and by asking, in my turn, where, in the history of the world, has a man of my order ever been found without

a woman in the background self-immolated on the altar of his life? But I remember that I am writing in England, I remember that I was married in England, and I ask if a woman's marriage obligations in this country provide for her private opinion of her husband's principles? No! They charge her unreservedly to love, honour, and obey him. That is exactly what my wife has done. I stand here on a supreme moral elevation, and I loftily assert her accurate performance of her conjugal duties. Silence, Calumny! Your sympathy, Wives of England, for Madame Fosco! (Collins 794)

Fosco is fully aware that the institution of the English law is complicit in men's endeavours to curb women's freedom, since the laws regulating marriage require wives to subject themselves to their husbands and always be loving and obedient. Fosco's knowledge of such laws allows him to not only control his wife, but also to bring Laura to heel, reminding her she has no right to rebel against her husband. Talking to his mice while involved in a conversation with Laura, Fosco makes a veiled analogy between marriage and imprisonment (Milbank 67): "My pretty little smooth white rascal [...] here is a moral lesson for you. A truly wise mouse is a truly good mouse. Mention that, if you please, to your companions, and never gnaw at the bars of your cage again as long as you live" (Collins 295). In so saying, Fosco is advising Laura to stop rebelling against the 'bars' of marriage and accept her position of subjected wife (Milbank 67). While, initially, the comparison between cage and marriage is veiled by the metaphor of the mouse, in his next conversation Fosco makes the parallelism between the mice and Laura explicit (Milbank 67):

Come here, my jolly little Mouse! Hey! Presto! Pass! I transform you, for the time being, into a respectable lady. Stop there, in the palm of my great big hand, my dear, and listen. You marry the poor man whom you love, Mouse, and one half your friends pity, and the other half blame you. And now, on the contrary, you sell yourself for gold to a man you don't care for, and all your friends rejoice over you, and a minister of public worship sanctions the base horror of the vilest of all human bargains, and smiles and smirks afterwards at your table, if you are polite enough to ask him to breakfast. Hey! Presto! Pass! Be a mouse again, and squeak. If you continue to be a lady much longer, I shall have you telling me that Society

abhors crime—and then, Mouse, I shall doubt if your own eyes and ears are really of any use to you. (Collins 301)

Fosco is here warning Laura that it is useless she should rebel from the control of a husband she herself preferred to the humbler Hartright (Milbank 67), since society, and the law, do not abhor the ‘crime’ of husbands controlling and restraining their wives, and this Laura should be able to judge based on her own caged condition. Like the other male characters, Percival uses the institution of marriage to gain control over Laura and over her money. Laura’s refusal to sign Percival’s documents is deemed, by Victorian mores and by Percival, who subscribes to the social laws of patriarchy, an unacceptable behaviour from a wife that should instead be obedient. Indeed, Percival voices his astonishment and scorn: “Right! [...] A wife right in distrusting her husband!” (Collins 312), and he then asserts: “it is no part of a woman’s duty to set her husband at defiance” (Collins 314). Laura is later punished for her unacceptable disobedience with the seclusion in her room. As previously mentioned, Hartright, too, gains power over Laura by marrying her, and, in accordance with his role of patriarch, confines her in the position of obedient angel in the house.

In *The Woman in White*, the second major institution used for silencing women is the asylum. When Anne Catherick threatens Sir Percival with the revelation of his secret, the best solution he can think of to silence her is shutting her up in an asylum, which he does notwithstanding Mrs Catherick’s attempts to change his mind. Laura will be committed to the lunatic asylum for the same reason: Sir Percival is convinced that Anne has revealed his secret to Laura, who is therefore perceived as a new threat. However, neither woman actually possesses such knowledge, they are shut up and silenced in order to keep a secret they do not even know (J. Taylor, *Secret Theatre* 128). As previously mentioned, Anne and Laura are not silenced only in that they are kept away from anyone who could hear their stories, indeed, by labelling them insane, Sir Percival has delegitimised their voices, which are thus perceived as the voices of madwomen, voices nobody will ever believe. When Anne Catherick attempts to tell the truth about her incarceration to the staff of the asylum and, later, in a letter addressed to Laura, her words are given no heed since they are spoken by an allegedly insane person (J. Taylor, *Secret Theatre* 101). Similarly, when trying to assert her real identity in the asylum, Laura is not believed, since the version given by Fosco and Percival is much more credible than her version, which comes from

the lips of a supposedly deranged woman. Hence, the asylum can effectively silence women, who are placed “in living tombs, beyond which their voices cannot be heard” (Leavy 115).

However, although the institution of the asylum imprisons and silences the two women, their wrongful confinement is also aided by “the broader institutions of middle-class common-sense – the law and the family – none of whom can recognise Laura once she is pronounced ‘socially, morally, legally, dead’” (J. Taylor, “Narratives of Moral Management” 55). Indeed, the institution of the family is itself portrayed as problematic, since Laura Fairlie is originally put in danger by her own relatives. Laura’s father endangers her by choosing for her a dangerous selfish husband (Huffels 45), while her uncle, Frederick Fairlie, exposes her to danger by signing a disadvantageous marriage settlement for her, in order not to be bothered with the documents (Milbank 64). The institution of the family in Victorian society expected women not to have a say in the arrangements concerning the marriage. Actually, Laura could choose not to marry Percival, but, although she is in love with Hartright, she feels compelled to marry the man his father chose for her, in order to oblige his dying wish. However, once the choice of a husband is settled, Laura cannot preside over the marriage settlement, her voice is completely powerless in that respect. It is the patriarchal authority of the family, in this case her uncle, that has absolute control over the arrangements.

If the family is not a safe space for women, neither is the home. Indeed, in *The Woman in White* the home becomes a place of enclosure. Limmeridge House assumes the connotations of an asylum due to the patient living there, Frederick Fairlie (J. Taylor, *Secret Theatre*, 108). When referring to the condition afflicting him, Marian says: “[w]e all say it’s on the nerves, and we none of us know what we mean when we say it” (Collins 44); however, due to this alleged health problem, everyone at Limmeridge must be careful not to disturb Mr Fairlie’s ‘asylum’ (J. Taylor, *Secret Theatre* 108). The “air of profound seclusion” (Collins 49) Hartright feels in Mr Fairlie’s room foreshadows the claustrophobic spaces of Blackwater Park and the series of incarcerations taking place in the house (J. Taylor, *Secret Theatre* 108). Describing Percival’s house, Marian evokes a sense of claustrophobia: she writes that the house “seems shut in – almost suffocated [...] by trees” (Collins 250), both the rooms and the garden are small, and even the “stagnant waters” (Collins 260) of the lake are allowed no movement (Milbank 66). The house turns



into an actual prison when Glyde locks up Laura in her room and threatens to do the same with Marian (Milbank 66). Marian too, despite having escaped this first imprisonment, will be held captive in the house; sick and drugged, she will be confined in an abandoned wing of the ancient mansion.

In both cases the home becomes a place of female imprisonment: women are punished for their transgressive behaviour; their rebellious energies are silenced through the psychological shock of incarceration and the fear of the reiteration of such punishment. The superposition of home and asylum becomes more explicit when Fosco, talking to Marian, covertly refers to the dwelling she and Laura share with Hartright in London as an asylum (Small 202): “[s]he has found a new asylum in your heart. Priceless asylum!” (Collins 577). This subtle sentence is multi-layered: on a superficial level Fosco is saying that Laura has found asylum, meaning refuge and protection, in Marian’s heart. On a deeper level, saying that she found a *new* asylum, he is implying that Hartright’s home is a new place of confinement for both of them, since Hartright will enclose Laura in the position of obedient wife, he will confine Marian to the domain of the house and silence her narrative (Gaylin 320). However, Fosco is simultaneously threatening Marian, implying that, now that he knows where they live, Laura could actually find a new asylum, that is, she could be returned to the institution from which Marian rescued her (Small 202). In order to avoid this repercussion, Fosco subtly suggests, Laura and Marian will have to behave and mind their inferior position of women. The difference between “asylum-as-confinement” and “asylum-as-refuge” (Small 202) is broken down in the novel, and the only “means of maintaining it [is] a domestic self-discipline that must have internalized the institutional control it forestalls” (Small 202).

In *Jane Eyre* there are no actual asylums, but other institutions take up the role of the madhouse, and equally restrain women: the home (more specifically the attic) and the boarding school (Shuttleworth 160). These institutions come into play in the novel when women manifest rebellious energies that threaten patriarchal order, and their role is to silence such transgressive voices. Indeed, Bertha is enclosed in the attic at Thornfield due to her displaying a depraved behaviour, to her disobedience to Rochester and to her uncontrollable temper. Being unable to effectively exert his patriarchal control over her, since Bertha’s nature cannot be curbed to fit the ideal of the Victorian angel, Rochester recurs to physical restraint to punish her, silence her rebellious energies, and hide her

from himself and from the world. Similarly, Jane is sent to Lowood when she gives voice to her anger, caused by the mistreatments and injustices she endures at Gateshead Hall.

While at Thornfield the silencing of female rebellious energies takes the form of physical restraint, the boarding school operates through moral management. The girls at Lowood are subject to a strict educational regime aimed at the repression of transgressive energies and the mortification of “worldly sentiments of pride” (Brontë 34), which instead must be replaced by obedience, plainness, and humility. In order to attain this transformation, the students are accustomed to “simple attire, unsophisticated accommodations [and] hardy and active habits” (Brontë 35), all elements that, according to Brocklehurst and Mrs Reed, are necessary to bring them up “in a manner suiting [their] prospects” (Brontë 34), that is, becoming obedient and docile Victorian women. The practice of silencing based on moral management proves to be extremely effective, particularly on Helen Burns. Helen, from the very first conversation she has with Jane, demonstrates to have fully internalised the philosophy of suffer and be still taught to Victorian women, which runs parallel to her Christian “doctrine of endurance” (Brontë 61). Indeed, Helen believes that “[i]t is far better to endure patiently a smart which nobody feels but yourself, than to commit a hasty action whose evil consequences will extend to all connected with you” (Brontë 61); in accordance with this philosophy, the girl always silently accepts all the wrongs she experiences, and she never voices any form of rebellion. When Jane points out that Miss Scatcherd, one of the teachers at Lowood, is unjust and punishes Helen too harshly, Helen does not join Jane in her criticism, but she only keeps silent: “[...] this is all very provoking to Miss Scatcherd, who is naturally neat, punctual, and particular.’ ‘And cross and cruel,’ I added; but Helen Burns would not admit my addition: she kept silence” (Brontë 61).

Nevertheless, the forms of restraint employed in *Jane Eyre* are not as effective as those at play in *The Woman in White*. Indeed, neither Bertha nor Jane have been completely silenced by the different means of incarceration imposed on them. Bertha is able to occasionally elude the control of her gaoler, her laughter still resounding in the corridors of Thornfield, and, as previously discussed, through the sounds she makes and her actions Bertha still manages to communicate something (Beattie 498). Similarly, the moral management of Lowood allows Jane to develop an impressive self-control, but it is not enough to completely annihilate her passionate nature. Indeed, propelled by the impellent

need for new stimuli, Jane eventually ‘escapes’ from Lowood, a flight described “in terms of the upsurge of clamorous, independent energies” (Shuttleworth 161), those energies the boarding school had tried to quench.

At the foundation of all these Victorian institutions that allowed the imprisonment and silencing of women at the hands of men is, as previously hinted, the broader institution of patriarchy, working hand in hand with the institution of Victorian mores. Indeed, the patriarchal system, based on the notion of women’s inferiority, fosters the Victorian ideal of the angel in the house, the obedient and docile woman subjected to men. These two institutions ultimately cause the imprisonment and silencing of all women, even of those who had escaped all other forms of institutionalisation. Both Marian and Jane, at some point in their narrations, express the feeling of constraint they experience as Victorian women: Marian voices the limits her womanhood imposes on her, preventing her from free physical and mental activity: “[b]eing, however, nothing but a woman, condemned to patience, propriety, and petticoats for life, I must respect the housekeeper’s opinions, and try to compose myself in some feeble and feminine way” (Collins 252). Jane expresses the same feelings in an even more open and political way:

It is in vain to say human beings ought to be satisfied with tranquillity: they must have action; and they will make it if they cannot find it. [...] but women feel just as men feel; they need exercise for their faculties, and a field for their efforts, as much as their brothers do; they suffer from too rigid a restraint, too absolute a stagnation, precisely as men would suffer; and it is narrow-minded in their more privileged fellow-creatures to say that they ought to confine themselves to making puddings and knitting stockings, to playing on the piano and embroidering bags. (Brontë 128, 129)

Jane and Marian are voicing the complaints of many Victorian women, who felt imprisoned in their role of Victorian angels, confined within the walls of the house, and condemned to annihilate their desire for physical and mental activity. The reflections of the two female narrators recall, in their turn, the words of Florence Nightingale (Strovas, “Narratives of Sleep” 27), who denounced the conditions of passivity to which Victorian society forced women:

What these [women] suffer – even physically – from the want of such work no one can tell. The accumulation of nervous energy, which has had nothing to do during the day, makes them feel every night, when they go to bed, as if they were going *mad*; and they are obliged to lie long in bed in the morning to let it evaporate and keep it down. (Nightingale 221, emphasis mine)

Through this extract from Nightingale's *Cassandra* our discussion circles back to the double bind of Victorian femininity, necessarily leading to insanity: on one hand, the impossibility of self-expression and of physical and mental activity inside the boundaries of acceptable feminine behaviour are likely to drive a woman crazy; on the other hand, women who transgress those boundaries are branded deviant by men and by society, and are therefore restrained. In the novels this happens to both Bertha and Jane, and to Anne, Laura, and Marian. Women in *Jane Eyre* and *The Woman in White* are never completely free, there is always some kind of institution limiting them; Laura, for instance, undergoes a series of institutional imprisonments, first at the hands of the institution of family, then she is imprisoned by marriage, she is subsequently enclosed in the asylum, and lastly her freedom is undercut by the ideal of the Victorian angel imposed on her. By contrast, Marian can elude all those institutions, since she has no relatives except for Laura, she does not marry, and she escapes the label of insane, which would lead to the incarceration in the asylum. However, she is eventually restrained and silenced by the foundational institution, patriarchy, along with the social laws regulating it. Marian is ultimately enclosed, along with Laura, in the "asylum" (Collins 577) Hartright has provided for them (Gaylin 306): confinement is "women's institutional fate in a system of male-dominated social establishment" (Gaylin 306).

Similarly, Jane escapes from Lowood and eludes two marriages, but, in the end, she goes back to Rochester and takes up of her own accord the role of Victorian angel in the house. Brontë exposes how social conventions can act as restraining forces, by "becom[ing] inscribed within the self" (Shuttleworth 244); indeed, it is not Rochester who restrains Jane in the end, but she rather encloses herself in the Victorian home and in the idealised model of the Victorian angel, since she has internalised the social laws of patriarchal society. Hence, the freedom Jane seems to have acquired at the end of the novel, through her financial and emotional independence, and through the possibility of finally giving

voice to her passions and choosing for herself, is not complete, since the institution of patriarchy hovers over the whole novel, and over the ending, with its restraining force.

In conclusion, the patriarchal organisation of society, based on the idea of women's inferiority to men, gave women scarce possibility of self-determination. Indeed, being men perceived as the superior gender, social laws granted them absolute control over female individuals, who were thus confined to the position of passive and obedient women. In the patriarchal society men had the power of definition, they were the ones to determine women's natural place, that is, they dictated behavioural norms and delineated the boundaries of acceptable feminine behaviour. Brontë's *Jane Eyre* and Collins's *The Woman in White* expose these social dynamics with a note of social denunciation: the two novels point out men's abuse of their patriarchal authority, which they exploit to define women according to their own expectations and desires. Male characters in the two novels carry out a series of imprisonments to the detriment of women, both actually and figuratively, aimed at enclosing them in a position of obedience and subjection, and at punishing those women who transgressed the boundaries of propriety. The patriarchal system at the root of Victorian society and, by extension, of the two novels, provides the means for its own self-preservation: indeed, men are granted the power to restrain transgressive women, who manifested rebellious energies that could engender patriarchal order. The ultimate means male characters employ to limit these threatening female energies is the label of deviancy, which is always followed by some form of restraint. Such label, once imposed on women, is almost impossible for them to shake off, since the word of a man is portrayed as being more powerful and authoritative of the word of a woman.

In Victorian society men held the power of definition, they determined sanity and insanity through their words; in the novels, once a woman is branded insane, her voice, already powerless when contrasted with the voice of a man, loses all authority and credibility. The two novels portray a number of female characters who have been deprived of their voice; they are silenced either through physical imprisonment (Anne, Laura, Bertha) or through subjection to male authorities (Madame Fosco, Marian). The only two female characters who can make their voice heard are Marian and Jane, the two female narrators. The two women recur to writing to impose their own definitions of themselves and of the

events taking place in their lives; through writing they can defy men's definitions of them, thus asserting their identity and their sanity.

Male characters exploit the label of insanity to curb women's freedom and annihilate their transgressive energies: when women manifest behaviours that are perceived as threatening to the patriarchal organisation of society the ready label of insanity, imposed by the words of men, is all that is necessary to effectively silence them. Bertha is branded insane after her manifestation of improper sexual behaviour, which, according to Rochester and to Victorian society, had to be stopped; both Laura and Anne are committed to the lunatic asylum after rebelling to Sir Percival; Jane is sent to Lowood after her violent bursts of anger, which were deemed improper in a child and gained her the label of insane; Marian is imprisoned in the abandoned wing of Blackwater Park after appropriating of the masculine prerogatives of movement and resoluteness in her eavesdropping transgression, which exposed her as a deviant woman. Moreover, in various occasions the label of insanity and the consequent prospect of imprisonment are overtly employed by men as a threat and a warning for women against the transgression of their role of obedient and passive individuals.

Victorian institutions, rather than protecting women against male abuses of power, are shown to be complicit in men's endeavours to silence and imprison female characters. Indeed, such institutions as the law, the family, marriage, the asylum, and the boarding school have their roots in the patriarchal system, therefore, they enforce, rather than hinder, men's repression of transgressive feminine energies. Patriarchy, along with the institution of Victorian mores is the one element setting the conditions that enable the carrying out of all the imprisonments taking place in the two novels. Indeed, it is the patriarchal organisation of society that grants men absolute power over women, and allows them to define female individuals as they please, in accordance to their own advantages and expectations. Hence, for one reason or another, many of the women in the two novels have to endure, sooner or later, the label of deviancy, and "to be deviant, whether as Jane or Bertha, [as Anne and Laura, or as Marian,] is to partake of "insanity" and run the risk of being shut up in the Red Room or in the attic at Thornfield" (Beattie 503), in an asylum, or in the abandoned wing of a Victorian mansion.

## Conclusions

*Jane Eyre* and *The Woman in White* both present traditional endings, where all the characters occupy the positions traditionally assigned them by Victorian society. By the end of the novels, the rebellious energies of women have been tamed: Jane takes up the position of docile woman, serving her husband, while the rebellious Bertha Mason has died; resolute Marian is enclosed in the role of angel in the house, along with Laura, while the deviant Anne has died as well. These supposedly happy endings hide a note of negativity, indeed, both the gloomy atmosphere of Ferndean, Jane's final home, and Marian's last words in the novel, uttered with the permission of Walter Hartright, evoke a sense of enclosure. This oppressive impression is suggestive of the imprisonments female characters have had to endure, indeed, at the end of the two novels, the female protagonists are forced to accept some form of submission to the social role they are expected to fulfil, in order to escape the label of insanity. If, as it has been argued, madness is diagnosed when there is a deviance from socially accepted roles, then the traditional endings, assigning everyone to their expected social position, serve to re-establish the sanity of the whole society.

As we have seen, Victorian society was particularly preoccupied with asserting its own sanity, and cultivated the misogynistic assumption that women were responsible for the propagation of madness. Indeed, on one hand madness was believed to be hereditary, and transmittable particularly among generations of women; on the other hand, female bodies were deemed to be biologically predisposed to insanity, due to their reproductive system, supposedly responsible of making them emotional and irrational. To avert the potentially dangerous diffusion of female insanity in society, a number of theories were developed, which speculated on how to identify the signs of mental disease in women, how to prevent its manifestation and how to treat it. Women were thus caught in a net of contrasting hypotheses that profoundly limited their freedom; for instance, while some medical men held that women should not exert their physical and mental faculties to avoid the risk of blocking the menstrual flow, which would have led to insanity, other doctors condemned feminine idleness and pointed it out as a potential factor causing the interruption of menstrual discharge as well. Women were analysed in their physical appearance, since they might present external signs of mental disease, identifiable through physiognomy and phrenology, but women's behaviour was believed to be the chief site where feminine

insanity manifested and was therefore under constant scrutiny. Indeed, the manifestation of rebellious energies on the part of women, who dared to trespass the boundaries of the passive role society had established for them, was immediately identified with insanity and punished through confinement.

Such aspects of female insanity as its hereditariness and its manifestation in terms of transgression of the boundaries of feminine propriety, can be retraced in the representation of mad characters in Brontë's *Jane Eyre* and Collins's *The Woman in White*. Indeed, the two quintessentially insane characters in the novels, Bertha Mason and Anne Catherick, are characterised according to the symptoms of moral insanity, in the case of Bertha, and of a combination of moral insanity and monomania, in the case of Anne. These women's essential fault, which earns them the label of insane, is their transgression of the accepted feminine role of passivity and obedience: Bertha displays an open sexuality, which Victorians labelled as vicious, and Anne disobeys her mother and threatens Sir Percival, both behaviours which Victorian society deemed improper in women. Other female characters who exhibit rebellious energies, either by disobeying male authorities (Laura), displaying a passionate temper (Jane), or assuming masculine roles (Marian), are branded deviant and punished through confinement. The novels expose women's precarious condition of sanity, indeed, female characters are portrayed as standing in a precarious balance among definitions of insanity: they are involved in a tension between resoluteness and passivity, that is, between the imposition of their own will and the subjection to other people's will, where insanity lies at both ends of the spectrum; similarly, women in *Jane Eyre* have to exert their self-control in order to maintain a balance of passions, since both a complete repression of passions and a complete subjection to them can lead to insanity; finally, women in *The Woman in White* are portrayed as being much less free than their masculine counterparts, indeed, the novel foregrounds the mechanism whereby a woman who takes up masculine roles is branded deviant and punished through seclusion, while the same rule does not apply to men, who can exhibit feminine traits with no repercussions.

Men are never threatened with the label of insanity because they were the ones who defined things and people in Victorian England, so that they can assert their own sanity, as well as determine women's insanity. In patriarchal society men held the power of definition, they could determine what women's place in society was, and, consequently,



trace the line of demarcation between sanity and insanity. In Brontë's and Collins's novels, male characters exploit their patriarchal authority to define women according to their own expectations and advantages; specifically, they use the label of insanity to threaten women into submission, and to silence them when their voices become an obstacle to the realisation of men's plans. When female characters manifest behaviours or ideas that are perceived as threats to patriarchy, men impose on them the label of insanity, in order to effectively silence their rebellious voices. Patriarchal society set in place a set of institutions that function as controlling mechanisms in the hands of men to control and silence women when they do not act according to expectations. Indeed, female characters undergo a series of incarcerations which men perpetrate through patriarchal institutions, such as the asylum, the boarding school, marriage, the law, but also the ideal of the Victorian angel in the house and, more in general, Victorian expectations on gender roles.

This thesis thus demonstrated how the label of insanity was employed in Victorian society as a threat against female transgression, and as punishment for women who trespassed the boundaries of feminine propriety imposed by Victorian mores. Moreover, it analysed how these dynamics of oppression are at play in Brontë's *Jane Eyre* and Collins's *The Woman in White*, which narrate the stories of women struggling for freedom under the oppressive imposition of Victorian rules of propriety. The two novels, previously analysed, separately, in their representations of insanity, have here been compared; specifically, this thesis pointed out how in both works women's freedom is limited by the looming label of insanity, ready to be imposed on them at the first transgression. Furthermore, it has been argued that female insanity, in the novels, is determined by the words of men, who hold definitional power over female characters. In Victorian society women were controlled through a number of institutions, all, to some extent, coercive. The most wide-reaching institution was the ideal of the Victorian angel: indeed, Collins's and Brontë's novels show how women were compelled to restrain themselves in order to fit inside the narrow confines of feminine propriety, enclosed in the Victorian ideal of the angel in the house. Often, this ideal was imposed on women through marriage, a patriarchal institution asserting the dominance of men over women. However, those women who escaped marriage, and refused to assume the passive and subjected role of

Victorian angels, were restrained through other institutions, such as the asylum or the boarding school.

This thesis outlines the interplay of institutions and mores devoted to subject women's right to self-determination and the control over their own bodies to male power in Victorian society, and specifically how these mores and institutions made use of new discoveries and studies in the field of mental health. It is interesting to notice that male power over women is conferred to them by the dynamics at play in patriarchal society, and the system of patriarchy is, in its turn, justified on the ground of women's biologically determined inferiority to men. In accordance to this assumption, it was natural that men should detain power, and that they should control and limit the dangerous potential of women. Despite the fact that, on paper, the Western world has dismissed the patriarchal organisation of society, the notion of female inferiority has been internalised, and still exerts a certain influence in several spheres of social life. This thesis could thus represent a starting point for a number of research topics, aimed at analysing how gender dynamics at play in contemporary society actually originated with Victorian assumptions on female inferiority.

For instance, related to the subject of women's health, it would be important to study the relationship between nineteenth-century misogynistic stereotypes in the field of medicine and contemporary issues on the diagnosis of inherently feminine diseases. As in the nineteenth century medical knowledge on women's bodies and their illnesses was influenced by a cultural factor, in our times, too, culturally determined biases on femininity may influence, on certain occasions, doctors' diagnosis. Specifically, the phenomenon of women who are not believed when exposing their symptoms is related to a scarce consideration of women's voices, whose physical symptoms of pain are often dismissed as mental conditions such as stress or depression.<sup>5</sup> Hence, the dynamics at play in the diagnosis of the so called 'invisible illnesses' of women are related to two themes explored in this thesis: on one hand, a cultural tendency to devalue women's words and their testimonies; on the other hand, a medical stereotype which conceives women as

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<sup>5</sup> Some data on the so called "invisible illnesses" and the testimony of a patient can be found in the article "Women are still branded 'hysterical' because of chronic illnesses which are under-researched and under-funded" published on the newspaper website *inews*: <https://inews.co.uk/opinion/chronic-illness-women-me-fibromyalgia-research-treatment-905879>

particularly vulnerable to mental diseases, thus leading medical personnel to blame their physical symptoms on their nervous system. These diseases predominantly affect women, and, arguably, it is for this reason that they are under-researched and under-funded; indeed, while most symptoms manifested by men are undisputed, even if they do not find an explanation in medicine, “women’s symptoms are more often considered illegitimate thanks to a combination of medical uncertainty and gender bias” (Graham), leading to a delay of many years in diagnosis.

Hence, the relevance of this thesis lies in its discussion of the issue of gender inequality. By exposing the dynamics whereby all-powerful Victorian men could exploit the label of insanity, and the threat whereof, to curb women’s freedom, this work retraces the origins of a number of social issues related to women’s rights, which still have an impact on our contemporary society. Moreover, by analysing Victorian silencing of women’s voices, the present work foregrounds the mechanisms of patriarchal power, and aims to give back a voice to those women whose voices had been stolen. Western women in the twenty first century are no longer imprisoned in the red room, in asylums, in the attic, or in the abandoned wing of a mansion, but they often endure other, more subtle, forms of injustice, whose origins this thesis aims to put under the spotlight.

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