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Wives, Daughters, and Illness: Neurasthenia in the Works of Charlotte Brontë and Elizabeth Gaskell

by Shelley Fania Teskey

B.A. Simon Fraser University, 1988

A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS

in the Department of

ENGLISH

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ABSTRACT

In the nineteenth-century, a recurrent literary image emerged, in the form of the invalid gentlewoman. Victorian physicians attempted to explain the preponderance of ailing middle- and upper-class women in terms of physical inferiority and emotional susceptibility. Invoking, among other ailments, the now archaic designation of neurasthenia, the medical profession reinforced the received assumptions that comprised and perpetuated the image of the feminine ideal. However, it is evident that this ideal and all that it embodied and prescribed led to the widespread ill health that women experiencing. The enforced domesticity and idleness, limited opportunities, and social constraints that characterized the lives of many Victorian gentlewomen predisposed them to debility. Charlotte Brontë and Elizabeth Gaskell are particularly adept at analysing the life experiences of ailing women through the medium of fiction, and revealing more plausible and perceptive explanations for their overwhelming numbers. Wives and Daughters and Shirley especially provide uncommon insight into the connection between women's health and their oppressive lifestyles.

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CHAPTER 1

Neurasthenia, Invalidism and the Victorian Novel

The conflict between conceptions of the ideal Victorian woman and her living, breathing counterpart had grave consequences. As one critic has enquired, "How does a woman prepare herself for a vocation of altruism . . . What does it do to her as a human being?" The writings of many Victorian novelists suggest some responses to these and other difficulties. Fiction provides a faithful and intuitive appreciation of the intricacies underlying middle—to upper-class Victorian women's many and various constraints. Once one takes into consideration the author's subjective position, the demands of his/her audience, and the personal and social factors which influenced them, the Victorian novel, with its abundance of detail and numerous female characters, provides considerable insight into Victorian society and the anomalous position woman inhabited therein.

Whether by subtle or obtrusive means, the Victorian woman's struggle for autonomy manifested itself in myriad forms, each one illuminating and explicating the phenomenon of female existence in a paternalistic and restrictive culture. One expression of the underlying tensions experienced by Victorian women is a literary motif that recurs with frightening persistency: the image of the invalid gentlewoman, who pervades much of Victorian literature. Foreshadowed in Austen's portrayal of the "delicate and

Patricia Meyer Spacks, "Taking Care: Some Women Novelists," *Novel* Fall (1972): 36.

nervous" Fanny Price and pre-Victorian society, in Mansfield Park (1814), are the ruminations of a great many nineteenth-century writers, who have recorded for posterity their perceptions of a predominantly ailing female society, the authenticity of which is borne out when they are juxtaposed with historical evidence.

Victorian novelists, in depicting female invalidism in their culture, may not have understood the socioeconomic causes that precipitated and perpetuated female infirmity (albeit many did). However, the very prevalence of feminine invalidism in Victorian novels is revealing. In some cases there was no doubt merely a recognition of the problem of female ill health and nothing more, but there were also practical concerns (most particularly in the case of the female novelist) that could not be ignored. Through carefully probing the myths surrounding women and by deviating from the norm in depicting their heroines, some novelists risked alienating their audience, which was mainly comprised of middle- and upper-class readers. These readers presumably shared the essentially middle-class values from which the received feminine ideal derived, which dictated that real women, and thus heroines in fiction, should be subservient, chaste, and devout, and aspire, above all, to exchange their parents' authority for that of their husband. No doubt this is one of the foremost reasons for the widespread conservativism of many Victorian novels: "Few women novelists of this period are active reformers (at least in their fiction), and their books are generally not the forerunners of social change; however, in the pictures which they present they reveal the problems which women faced, the limitations of the traditional female role, and some alternatives to the currently accepted

ideals."2 Therefore, the very act of writing invalid gentlewomen into the literature of the period becomes a form of social commentary on the conditions militating against Victorian women.

The Victorian woman is often characterized in literature as an indolent creature, swooning, crying for smelling salts or generally the victim of a debilitating lassitude. There is a wealth of information, notably in the work of Charlotte Brontë and Elizabeth Gaskell, which illuminates the condition of Victorian woman and the dis-ease from which she suffered at the hands of an essentially migogynist society. Brontê, in fact, directly confronts the masculine ideals which enclose and exclude females, rendering their entire sex "invalid" in all spheres except that of wife and mother. In Shirley (1849), both Caroline Helstone and Shirley Keeldar agonize over their limited choices and impotence, and eventually their psychological turmoil translates itself into physical infirmity. In Wives and Daughters (1866), not a single major female character escapes some form of debility as a result of socially and spiritually oppressive living conditions. Characters in the works of both novelists exhibit the tendencies typically associated with a "neurasthenic" condition and the reasons underlying their decline are explicated. These depictions of female invalids are cautious and discreet, a but carry

²Susan Koppelman Cornillon, ed., *Images of Women in Fiction: Feminist Perspectives* (Ohio: Bowling Green University Popular Press, 1972), p. 29.

³Susan Gorsky writes the following with regard to the wariness of Victorian writers: "Some of the more prominent female characters (especially in the works of George Eliot, Mrs. Gaskell, Charlotte Brontë and Virginia Woolf) are carefully individualized and realistically portrayed. Of equal importance are those characters who appear to fit the familiar molds and yet through whom those molds are inspected for flaws. Outright rejections of the traditional roles of woman or the received picture of the heroine are rare; rather, the questioning which occurs within the novels is cautious, the disapproval generally subtle. No matter how strongly the author may have disbelieved the

portentous meaning which indicts their society's values. This social criticism usually operates through implication. This thesis focuses on a detailed discussion of female health in these two novels. Before examining these works, however, a context must be provided, indicating the status of female ill health in this period.

There are many and diverse reasons for the emergence of the image of the female invalid in Victorian fiction and here the disciplines of history, medicine, and literature must necessarily intersect. While history sought to record the phenomena which medicine professed to discover and treat, literature sought to probe the mechanisms which resulted in "a terrible decay of female health all over the land," both in fiction and reality. Certain repeated features of Victorian novels suggest that the marginal status of women was related to their physical decline in such numbers. They were bound to an ideal of femininity which necessarily jeopardized their well-being.

However, when the medical profession intervened, it proposed a theory and method of treatment which attributed the widespread decline of female health to woman's inherently inferior and nervous constitution. Medical discussion played a significant role in what Foucault calls the "hystericization of woman": "Females were believed to exhibit nervous weaknesses, even as children, more frequently than males. As one medical man put it, girls frequently displayed a 'morbid susceptibility of the nervous

wisdom or appropriateness of the tradition, her doubts were expressed gently" (Images of Women in Fiction: Feminist Perspectives, p. 29).

^{*}Barbara Ehrenreich and Deirdre English, For Her Own Good: 150 Years of the Expert's Advice to Women, (New York: Anchor Press, 1978), p. 103.

^{*}Michel Foucault, *The History of Sexuality: Vol. I - An Introduction*, (New York: Vintage Books, 1980), p. 121.

system. "" Most often, they were diagnosed as neurasthenic or hysteric, catch-all terms which could refer to a great diversity of symptoms. The medical profession strove to explain female debility in terms of biological inferiority and usually prescribed isolation and lack of stimulus as a cureall.

However, many writers at the time perceived that the numbers of female invalids were so disproportionate as to indicate something was amiss, beyond the medical explanations. These explanations were not only self-interested. but tended to ignore the potential significance of the limited sphere of the typical Victorian woman. Women, themselves, perceived the connection between their restricted existence and physical infirmity. For instance, Florence Nightingale has documented the phenomenon of declining female health based both on her personal experiences and on those of women in general, and expressed outrage over the enforced passivity, ennui, and repression which most often characterized the Victorian woman's existence, and had illness as its consequence. Because women were denied significant or satisfactory occupation, and were forced to define themselves only in personal relationships, Nightingale argues that they became increasingly dependent on their inner lives and therefore more prone to depression and mental collapse. Furthermore, sickness held a certain perverse appeal in some instances: "Sickness presents a tempting escape from the contingency of the female role; it offers a respectable reason to be alone, and real, if perverse,

^{*}Deborah Gorham, The Victorian Girl and the Feminine Ideal, (London: Billing & Sons, 1982), p. 72.

opportunities for self-development." Many Victorian women were expected to conform, from an early age, to an ideal that embodied idleness, domesticity, and chastity (but, oddly enough, maternal virtues as well). They were frequently expected to amuse themselves in cultivating a smattering of (often useless) accomplishments, such as embroidery or sewing. Intellectual pursuits were discouraged in many households as women were perceived as too undisciplined for rigorous study and too delicate to make any progress without necessarily risking their physical well-being. In general, many women were taught that they were abnormal if they did not derive satisfaction from attending to the family hearth and little else, and if they did not, above all, aspire to matrimony as their raison d'être.

Nightingale's Cassandra (written between 1852 and 1859 and published in 1928) reveals the various conditions which caused malaise on the part of women which doctors had a vested interest in overlooking. In fact, doctors were wont to prescribe rigid adherence to the Victorian ideal of femininity as a remedy for the malaise which seems in fact to have been caused by this ideal. Physicians were more concerned with the physical health than the psychological well-being of their patients. While they were not necessarily interested in imposing conventional sex roles upon their female patients, inevitably they did, by and large, share the prevailing attitudes of their age, which influenced their beliefs and practises. While this may have occurred

^{*}Elaine Showalter, The Female Malady: Women, Madness, and English Culture, 1830-1980, (New York: Penguin Books, 1985), p. 64.

[&]quot;Deborah Gorham has the following to say with regard to the Victorian doctors' tendency to reinforce the ideology of femininity in their treatments: "Their [Victorian physicians] belief that there was a connection between normal puberty and what they saw as healthy behaviour caused them to advocate behavioural changes in their patients. And from the descriptions

on a subconscious level, nonetheless it served to perpetuate the onslaught of patients from whom physicians drew their fee: "'daily we see neurotics, neurasthenics, hysterics, and the like . . every large city [is] filled with nerve-specialists and their chambers with patients.""

Meanwhile, numerous practical changes in the realms of education and employment were being made which potentially improved conditions for many women. For example, Queen's College for women was opened in London in 1848 and women increasingly moved into such professions as nursing after the 1850's. However, women's delicate health was often posited as a dangerous, if not lethal, hindrance to their professional and educational success in these areas. While new opportunities for growth and self-fulfillment in education and the professions were being offered to women, doctors were simultaneously warning them that pursuit of these opportunities would result in illness, infertility, and decimation of the middle- and upper-class population. The medical profession drew a correlation between the epidemic of nervous disorders (anorexia nervosa, hysteria, and neurasthenia) of the period and women's ambition. Obviously, they were doing no more than expressing the values of their culture, but the extent of the damage wrought permeates the literature of the time. Women suffered the effects of suppression, often with grave results: "Depression, illness, withdrawal, and complaint . . . were feminine forms of protest far less effective than rebellion and action . . .

associated with abnormal female puberty, it is evident that the behaviour that medical men perceived as normal closely reflected the Victorian ideal of feminine girlhood" (The Victorian Girl and the Feminine Ideal, p. 90).

The Female Malady, p. 121.

middle-class Victorian women were . . . rendered so crazy and powerless by their society that they could rail and rave but never act."10

There are difficulties inherent in retrospectively analysing a phenomenon which was on the larger scale documented and described by male medical practitioners and historians, and on the personal level recorded primarily through fiction, diaries, and other forms of autobiographical writing. Inevitably, the question of which experts to consult and which writers to include and exclude must be faced. There are only statistics, medical journals, and writings of an often biased nature to consult with regard to the medical aspects of such a study. Fiction, necessarily subjective, must be carefully perused, in order to avoid the very generalizations that physicians were guilty of in this era. Therefore, this thesis deals extensively with only two texts, although reference is made to others. This concentrated focus reveals a surfeit of female invalids within the confines of a handful of works. It also demonstrates that one need not look far to uncover a social problem that defies medical expertise. There is an implicit recognition underlying this thesis that health care and physical conditions were manifestly inferior to those of the present age and therefore that physical well-being was necessarily more difficult to maintain in the Victorian period. However, it is the disproportionate number of ailing women that is held up for consideration here.

Another difficulty facing such an exposition concerns the neurasthenic condition itself, which, for the sake of brevity, will be dealt with independently of other complaints (it encompasses enough on its own to

¹⁰ Ibid.

warrant special consideration). This elusive and inexact diagnosis reflects both the Victorian physician's perplexity when confronted with so many, varied and persistent symptoms, and his tenacious efforts to cobble together so many complaints into an all-inclusive definition/diagnosis.

The originator of the now archaic term neurasthenia (from neuro for nerve and asthenia for weakness) was the eminent nineteenth-century neurologist George M. Beard (1839-1883), whose theories almost invariably influenced subsequent diagnosis and treatment. He described this infirmity as a "functional disease of the nervous system without structural organic changes but distinct from mental illness (insanity)."11 Beard stressed that nervousness did not arise from emotional excess nor excitability as it was a physical rather than a mental state. Thus neurasthenia was of a physical nature but devoid of any organic basis. From the late nineteenth-century until Freud's psychological terms began to become generally accepted by the medical community in the early years of the twentieth-century, neurasthenia was used to characterize almost every nonspecific emotional disorder (although it was not, of course, to be linked to the emotions in terms of causality) short of outright insanity, from vague stress to severe neuroses. Beard, an American physician, argued that neurasthenia was a predominantly American syndrome: however, his explanations for the rise of this phenomenon in the social and technological advances of society easily lent themselves to describe the British condition. Moreover, as the middle-class British woman was usually concerned with the establishment of the social position of the family, she was subject to the same presures: "Middle-class women were

Arthur Kleinman, Social Origins of Distress and Disease, (New Haven: Yale University Press, 1986), p. 15.

pursuing a 'career of sociability,' the necessary complement to a man's career of monetarily remunerated work".12

There are many flaws inherent and immediately obvious in Beard's assertions. Firstly, it is clearly directed toward the American male specifically, who, although neurasthenia was by no means confined to the female sex, definitely appeared to suffer infinitesimally in comparison with women in terms of sheer volume.13 Secondly, if it does address women, it does so only indirectly. Certainly the competitive aspects of North American (and British) capitalist industrialized society affected women. However, again, it was on a different scale from that which affected the male, and manifested itself in a distinct fashion. American women presumably felt pressure to ascend the social ladder. However, this ascent was passive; it was left for the wife to comport herself in a manner befitting or enhancing the social position which her husband achieved. Perhaps British social status was less volatile in this period, yet competition amongst middle-to upper-class Britons existed no less, manifesting itself in a constantly raging battle over minute degrees of social status/acceptance, which gave rise to considerable tension: "A sense of anxiety is such a pervasive element in Victorian discourse that one historian has seen it as the most important feature of the Victorian 'frame of mind."14 However, the English class system was still relatively static compared to that of the United States. This blend of stagnation and apprehension of changes for the oming likely contributed as much to stress and

^{**}Elizabeth Langland, "Nobody's Angels: Domestic Ideology and Middle-Class Women in the Victorian Novel," *PMLA* Vol. 107, No.2 (March 1992): 294.

is The Female Malady, p. 137.

¹⁴The Victorian Girl and The Feminine Ideal, p. 3.

general malaise in England as did the competitive nature of capitalism and the eternal quest of the upwardly mobile in North America. Beard does admit that neurasthenia had its origin in civilization in general and American civilization in particular. Therefore, his ruminations on this topic can be (and were) extended to the population of any civilized, industrialized society. It remains debatable whether he was correct in assuming the conditions of North America provided a more favourable socioeconomic "climate" for neurasthenia.

Finally, it is never really clear why Beard divorces this ailment from the psyche. The correlation between the anxieties of coping with capitalist values and endeavours and subsequent mental strain seem to pave the way for a psychosomatic explanation of causality and yet Beard seems resolute in his belief that neurasthenia is entirely a "physical" complaint and not a "mental state." Further exploration of the various guises in which neurasthenia presented itself reveals similar discrepancies.

After Beard, neurasthenia was variously described and defined and its symptoms were of seemingly infinite variety, the most prevalent being that of fatigue:

Fatigue of mood is marked by depression of a mild kind, a liability to worry, an unenthusiasm for those one loves or for the things formerly dearest. And finally the fatigue is often marked by a lack of control over the emotional expression, so that anger blazes forth more easily over trifles, and the tears come upon even a slight vexation. "To be neurasthenic is to magnify the pins and pricks of life into calamities, and to be the victim of an abnormal state that is neither health nor disease." ""

Neurasthenia could manifest itself in either pains and aches of a specific, localized nature or in a more general malaise. Changes in the appetite, such

¹⁸Abraham Myerson, *The Nervous Housewife*, (Boston: Little, Brown & Co., 1929), pp. 20-21.

as the loss thereof or capriciousness, the condition of the stomach or bowels, constipation, disturbed sleep (insomnia or fitful sleep), fear, dyspepsia, depression, and many nonverifiable complaints were among the more common symptoms described. The experts seemed to catalogue a curiously inclusive list of symptoms in their diagnoses and, although careful examination could reveal no organic basis for these ailments, nevertheless they proved incapacitating to individuals who had previously led contented and fruitful lives. 29 Neurasthenia's causes continued to be shrouded in nebulous terms which yielded neither a feasible physical nor psychological explication.17 Physicians differed somewhat with regard to their definitions of neurasthenia, and the general description of this malady was varied slightly, but such variance was usually insignificant. One constant, however, was the preponderance of women complaining of the forementioned symptoms. Inevitably, the issue of their gender would influence treatment and how the malady was regarded generally.

Sexuality was deemed detrimental to the health of the female neurasthene: "No one fact in the history of sexual exhaustion is more interesting and instructive than the opposite effects that are produced by excess. The whole nervous system may be disturbed with a vast array of

between the left and right hemispheres of the brain. It is the "want of balance" and unity between the two brains (meaning unconscious and conscious, objective and subjective) that causes neurasthenia. This faulty brain control is due to psychological causes that remain unidentified in his treatise. See F.G. Gosling, Before Freud: Neurasthenia and the American Medical Community 1870-1910, (Urbana: University of Illinois Press, 1987), p. 2.

¹⁷Neurasthenia has been described as a "more respectable somatic mantle to cover mental illnesses and psychological and social problems that otherwise raise embarassing issues of moral culpability and social stigma" (Social Origins of Distress and Disease, p. 15).

functional phenomena, or the entire force of the disease may expend itself locally." It was considered unethical as well as irresponsible to treat women suffering from such symptoms through counselling or like means. Moreover, the medical profession appeared to be split on this issue as it contained inherent contradictions. In this period, anxiety surrounding female sexuality often took the form of denying that woman could be a sexual creature. To diagnose excess as the root of her complaint would definitely elucidate the dangers lurking within expressions of sexuality on her part. Yet it would also run contrary to the traditional image of the Victorian woman. Therefore, many physicians ruled out sexual excess as a causal factor in their patients. Either way, sexuality was presented as an anomalous or pathological quality when expressed by women.

Scientific objectivity, or rather attempts thereat, dominated the literature on this malady. Heredity and biological factors were considered the culprits leading to the neurasthenic condition (and yet this was arrived at largely by process of elimination). Physicians concluded that the most viable explanation for the preponderance of female neurasthenes lay in the realm of biology. Women were physically weaker than men, and since they experienced the ordeal of childbirth (in an age that no longer saw labour and delivery as entirely natural), they were considered more sensitive to emotional distress.

Moreover, women's internal organs continually waged war on their health from the moment they commenced functioning. The theories that guided doctors' practises from the latter nineteenth-century to the early twentieth-century

¹⁸George M. Beard, Sexual Neurasthenia, (New York: Arno Press, 1972 c.1898), p. 136.

held that women's normal state was that of infirmity¹⁹ and it was generally accepted that women's reproductive organs kept their health in this continual state of flux. This belief again led to the paradox of female sexuality: "although women were perceived as specialised for the function of sex, they were to be wholly un-sexual; because sex was their raison d'être, certain theories became 'tenable.'"²⁰ These theories consisted of the belief that every conceivable ailment in a female patient was the result of dysfunctional reproductive organs. ²¹ Despite the fact that lust was often considered deviant in the female patient, it did apparently surface periodically, evoking genuine concern (if not chagrin) in the physician. Therefore it became necessary to deprive the patient of all potentially lewd or provocative materials and events. Even passionate or lustful thoughts inspired by fiction, festivities, flirtations, or hot drinks could prove injurious to a woman's physiology. This and like hypotheses regarding the dangers of the intellect²² or merely stimuli of various sorts, were inherent in the theory

¹⁹ For Her Own Good, p. 110.

²⁰ Ibid, p.120.

²¹In fact, these organs often took complete precedence over consideration of the patient as a whole being: "Professor M.L. Holbrook, addressing a medical society in 1870, stated that it seemed 'as if the Almighty, in creating the female sex, had taken the uterus and built up a woman around it" (For Her Own Good, p. 120).

²²It was believed that higher education would cause women's uteruses to atrophy. The mental woman as opposed to the uterine woman could aspire only to the status of freak, morally and medically. Moreover, she was seen as the very "apotheosis of selfishness" from the standpoint of "biological ethics" (For Her Own Good, p. 129).

of the rest cure in particular and the imposition of idle and bland lifestyles on women in general.23

If the uterus and ovaries had definitively come to reign over women's entire physiological condition, the brain was conversely seen as potentially damaging to female health (that is, when applied to intellectual or stimulating activities; when conscientiously employed in the management of a household, the brain was considered harmless). Many authorities deemed reproduction as the only viable female pursuit, subordinating all other vocations to it: "women were urged to throw their weight behind the uterus and resist the temptations of the brain. Because reproduction was woman's grand purpose in life, doctors agreed that women had to concentrate all their energy downward toward the womb."24

Such doctrines perpetuated a condition that was already of such epidemic proportions that the birth rate in the middle- to upper-classes shrank significantly, alarming a number of authorities who believed in social Darwinism. Sickness and reproductivity could not share space for long, and soon it became apparent that it was the former that was gaining ground. Following this growth pattern, neurasthenia reached its peak in the early years of the twentieth-century and began its decline, both diagnostically and as a phenomenon, after 1910.26

²³It is now generally recognised that the rest cure used methods similar to those employed in twentieth-century brainwashing techniques: total isolation, sensory deprivation, and the like (For Her Own Good, p. 131).

²⁴For Her Own Good, p. 127.

²⁵ Ibid, p. 134.

²⁶Before Freud, p. 13.

Economic, social and aesthetic considerations apparently exerted a profound influence on the incidence of neurasthenia, revealing that the basis for this malady could not possibly be biological. The fact that neurasthenia became fashionable for some leisured women is perhaps the most obvious indicator of a more complex explanation. Sickness, in the latter half of the nineteenth-century, became synonymous with bourgeois sensibilities: "It was acceptable, even stylish, to retire to bed with 'sick headaches,' 'nerves,' and various unmentionable 'female troubles,' and that indefinable nervous disorder 'neurasthenia' was considered, in some circles, to be a mark of intellect and sensitivity."27 The more susceptible to the pressures of daily living that a woman showed herself to be, the more it appeared that she was a spiritual creature, above, and incapable of dealing with, the stresses of the mundane world. This led inexorably to frightening practices and attitudes. Some society ladies even took to ingesting arsenic as a means of attaining a pallid and sickly appearance. Both fashion trends and a restrictive lifestyle facilitated a neurasthenic reaction:

The social structure which glorified the image of the invalid gentlewoman reveals that "hostility never lies too far below the surface of sexual

Treather Own Good, p. 108.

²⁸ Ibid, p. 108.

romanticism."29 Neurasthenia's perverse brand of popularity was nurtured by a species of paternalistic necrophilia and the fact that it was a socially acceptable, if ineffectual, form of either protest or withdrawal.

The absence of working-class women in the physician's consulting room indicates another curious aspect of this disease. It was confined to the middle-and upper-classes. This discrepancy provokes immediate suspictor with regard to the biological theories of causation already discussed. Poor women did not seem to suffer from this malady, or at least did not seek professional help for it. Middle- to upper-class women, however, had become subject to a sexuo-economic relationship with their husbands upon entering into the married state; they performed sexual and reproductive duties in exchange for financial support. 30 Poor women had neither the funds nor the time to cultivate neurasthenic symptoms. Neurasthenia was a luxury, afflicting only the moneyed, leisured classes, and as will be seen from an analysis of several Victorian novels, it was this very leisure, coupled with women's particular circumstances, and social expectations, that gave rise to infirmity. Physicians made a few feeble efforts to explain the immunity of working-class women, but these did no more than continue the work of exalting the feminine ideal.31

geIbid, p. 109.

³⁰Olive Schreiner called the position of the middle- to upper-class woman that of "female parasitism" (For Her Own Good, p. 105).

and made the middle-class woman sickly; her physical frailty went hand-in-white-gloved-hand with her superior modesty, refinement, and sensitivity". The poor are brushed aside as being hopelessly robust: "better off women were sickly

Neurasthenia's origins and the reasons underlying its prevalence are most thoroughly revealed in an analysis of the upbringing and prospects of many Victorian gentlewomen. The education and indoctrination that most young girls received helps explain the forces at work upon their self-esteem. In the early and mid-Victorian years, manuals designed for young girls emphasized that their future role as adult women would involve, above all, an acceptance of limitations, and dependence upon the male as a physical and intellectual superior:

In the words of Sara Stickney Ellis, author of *The Daughters of England*, one of the most popular early-Victorian manuals of advice for middle-class girls: "As women, then, the first thing of importance is to be content to be inferior to men, inferior in mental power, in the same proportion as you are inferior in bodily strength." In adolescence, the testing ground for adulthood, girls were to accept that they must keep a tight rein both on their aspirations and on their behaviour. Whereas boys, in adolescence, were encouraged to develop their independence, girls were encouraged to accept dependence on the male as a natural and inevitable part of the feminine condition ...³²

That this and like efforts at conditioning resulted in a sense of superfluity on the part of many Victorian girls/women is obvious. Generally, woman was, from her earliest years, destined for a fate vastly different from that of her brothers, in fact its very antithesis. Whereas activity reigned in his sphere, passivity and indolence characterized hers. Education was not denied most Victorian girls, but it was often of an entirely distinct nature, because it usually endeavored to suppress, rather than reveal, their

because of their refined and civilized lifestyle. Fortunately, however, this same lifestyle made them amenable to lengthy medical treatment. Poor and working-class women were inherently stronger, and this was also fortunate, since their lifestyle disqualified them from lengthy medical treatment anyway" (For Her Own Good, pp. 114-115).

³²The Victorian Girl and the Feminine Ideal, p. 102.

aspirations and native intelligence. This period is noted for its variability in the area of female education. The education of some girls was completely neglected, while a minority received instruction both rigorous and extensive. However, it remains a fact that a girl's early education was rarely something which might be taken to its logical conclusion at a university or in the public sphere: although the first women's college (Girton) was founded in Cambridge in 1869, women could not receive their degrees there until 1947. Consequently, a more extensive education, besides appearing inappropriate for a girl, could make her limited opportunities in later life even more traumatic to deal with. Her future, it was assumed, lay in a domestic setting, unlike that of her brothers. That most Victorian girls became aware of their dependence and inferior status at the threshold of adulthood, when all should have been opening outwards for them, is doubly appalling. 33

Even the prominent Victorian mental health reformer, John Conolly, perceived a correlation between the quality of female education and the prevalence of mental disorders in women. Women formed the vast majority of inmates in mental asylums by the year 1850 and Conolly had observed the problems inherent in a lady's education which facilitated their decline. He found the condition of the female mind appalling, even in the higher classes:

it is recognised that education means neither a cramming of facts nor a smattering of accomplishments, but a preparation for *life*, and for the demands which life makes upon every woman, whether married or single, these sad consequences of deliberate incapacity and helplessness must abound. Whilst parents persist in venturing their daughters' welfare on the single chance of a successful marriage, a chance which by circumstances not under her control, is daily being removed further from certainty, misery of mind and body must be the fate of many." See Shirley Foster, "Female Januses: Ambiguity and Ambivalence towards Marriage in Mid-Victorian Women's Fiction," *International Journal of Women's Studies* May/June (1983): 148.

"the few accomplishments possessed by them have been taught for display in society, and not for solace in quieter hours.' Since their education provided them with so little of the self-discipline and inner resources psychiatrists deemed essential for the individual's struggle against moral insanity, women were seen as poor mental risks." However, although Conolly and others recognised the dangers posed by women's education, they nevertheless regarded the consequences as a failure of training and will. In other words, the effects of such an education were something to be transcended and no mention is made of pedagogical reform.

For Victorian women, once they were educated in some fashion, there was virtually no alternative to matrimony, excepting positions of employment that embodied traditionally female virtues of self-effacement and -abnegation, which were viewed as a loss of social position in any case. The option of spinsterhood was regarded with derision and abhorrence. Emotional and psychological pressures to marry were added to the social and economic ones of earlier periods:

These pressures were made more acute by particular ironies of the contemporary situation. As demographic figures indicate, the proportion of unmarried women in the total population expanded dramatically during the Victorian period. The census of 1851 showed that there were 2,765,000 single women over the age of fifteen, and by 1871 this figure had increased to 3,228,700.35

Women believed themselves to be in surplus and the anxiety surrounding the issue of marriage surged as the percentage of single marriage able women grew.

Although marriage was viewed as women's only acceptable vocation, it was

³⁴The Female Malady, p. 60.

^{**}Victorian Women's Fiction: Marriage, Freedom and the Individual, pp. 6-7.

considered vulgar to appear to actively seek a husband, a fact which made the task doubly distressing.

Assuming that a woman was successful in the enterprise of attracting a mate, there was a whole new multitude of pitfalls and obstacles in her path. The ideal Victorian wife was a contradiction from the outset. She was to symbolize the refuge found in the private sphere, a realm which the outside world was not to penetrate. In fact, the cult of domesticity effectively charged women with a distinct set of roles to be played out in an entirely separate sphere. Women were not supposed to possess ambition or hostlity or anger. Since there were few productive or stimulating activities allowed the middle- to upper-class woman, it was inevitable that her energies would eventually focus on a counter-productive or negative physical awareness of her body. Consequently, the middle- to upper-class woman's lifestyle predisposed her to illness, and illness in turn predisposed her to continue to live as she was expected to.

Frustration, inactivity, and a pervasive sense of futility easily translated themselves into the physical symptoms the neurasthene complained of, since she typically experienced not only the circumstances that produce malaise, but the time in which to nurture it as well as "indulge" herself in prolonged invalidism. This invalidism became a species of passive and ineffectual revolt as well as a manipulative tool, for the querulous patient could achieve at least minimal control over certain aspects of her life and the lives of others because of her condition. Subsequent chapters demonstrate that the work of Brontë and Gaskell depict women who attempt to regain control of their lives through the medium of ill health and that, whether or not the novelists' attacks on the patriarchal structure of Victorian England

were explicit, they were nonetheless successful in elucidating the phenomenon of female illness and the repressive regimen that became the rhythm of many women's days.

CHAPTER 2

Wives and Daughters: 'The Natural Consequence of Mental and Bodily Idleness'

The novels of Elizabeth Gaskell (1810-1865) are rich in their portrayals of women. Her incisive prose draws the reader into the psychological dramas of both married and unmarried women, paying particular attention to the dilemmas facing the young girl on the brink of either of these fates. Married to a Unitarian minister and mother to four daughters, Gaskell recognized the disadvantages, frustrations, and complexities that devolve upon a matron, while revealing an equally profound insight into the difficult life of the single woman. However, there was no question in Gaskell's mind as to where a woman's first loyalties rested, be she single or not: "no other can take up the quiet regular duties of the daughter, the wife, or the mother, as well as she whom God has appointed to fill that particular place: a woman's principal work in life is hardly left to her own choice; nor can she drop the domestic charges devolving on her as an individual, for the exercise of the most splendid talents that were ever bestowed."2 Clearly Gaskell considered herself fortunate in having been allowed the opportunity to write without having this detract from what she believed were her primary duties.

Her last novel, Wives and Daughters (1866), which was brought to a premature close some few pages short of its conclusion by Gaskell's sudden

^{*}Elizabeth Gaskell, *Life of Charlotte Bronte*, (New York: Thomas C. Crowell & Co., n.d.), p. 279.

death, perhaps represents the culmination of her artistic achievements and is regarded by many as her finest work. Others have proven less laudatory in their assessments of this work:

... it is tinged with the conservativism of middle-age and in some ways seems less ideologically questioning than her earlier works. Gaskell appears more contented with the status quo, more tolerant of human fallibility, and more benevolently disposed towards social creeds and institutions. In many respects, her characters, especially the women, are fixed in defined roles and do not challenge sexual orthodoxies.²

Yet Wives and Daughters does challenge sexual orthodoxies in that it indeed emphasizes the problems and miseries that matrimony usually inflicts upon women and illustrates the consequences of discontent, inactivity, and malaise which generally follow. While it is true that Gaskell does not propose meaningful alternatives to marriage for her heroines yet she does manage to highlight the distinct inadequacies of the status quo, which was in itself a daring undertaking. Gaskell reveals a certain ambivalence about the way in which the problems of matrimony versus singlehood could and should be resolved, presumably because she had not definitively worked the problem out herself. Regardless, Wives and Daughters poses important questions about woman's "place" and makes compelling statements about the stultifying nature of woman's role.

Earlier novels such as Mary Barton (1848) and North and South (1855) involve heroines who do not challenge sexual stereotypes. Mary Barton is susceptible to the attentions of a gentleman, for whom she nearly forsakes the love of the devoted but regrettably working-class Jem Wilson. In the end, she opts for marriage with the latter, and the novel closes with this

[&]quot;Victorian Women's Fiction: Marriage, Freedom and the Individual, p. 176.

conventional resolution. Margaret Hale, in North and South, challenges the traditional, antagonistic relationship between the working classes and the "masters" or mill-owners, but in private life she disproportionate amount of time and thought on the question of whether Thornton respects her any more. This question is of course answered in the affirmative by their marriage at the end of the novel. In terms of personal autonomy, these earlier heroines are no more effective than is Molly Gibson. In Cranford (1853), the ladies of the little town appear somewhat independent in that they live in a curious place where men are almost nonexistent. Furthermore, few of these ladies are defined by a relationship with a man (spinsters predominate in Cranford). But even they need a little male assistance from time to time and the women are not shown as being entirely effective in managing their affairs (Matty has, in fact, through her neglect of financial matters, lost her income). The ladies' obsessive interest in trivialities, of so trifling a nature that they provide much of the comedic impact of the work, reveals that their existence is barren and desolate.

The women that Gaskell assembles in her final work virtually all betray symptoms of dissatisfaction and frustration with their roles. This is invariably manifested in varying degrees of ill health, usually either entirely "fancied" or of a psychosomatic nature. That not a single major female character escapes infirmity is revealing; that Gaskell creates such a scenario without inspiring incredulity is appalling. Moreover, the instances of widespread ill health that Gaskell describes are so casually referred to that it is obvious that the Victorian is relatively inured to such phenomena. Quite simply, illness was a fact of life for many Victorian

women, although few perceived the underlying conflicts as thoroughly as Gaskell.

It is Mrs. Hamley, Squire Hamley's apparently placid and devoted wife, through whom the reader first gleans insight into the life of an invalid Victorian gentlewoman. She has made invalidism a lifestyle, and it is during the frequent visits of Mr. Gibson, Molly's father and the local physician, to Mrs. Hamley, that the reader is introduced to the circumstances of her illness. It becomes rapidly apparent that, whatever the original causes of her indisposition, they have become transmuted into a real and eventually life-threatening situation. Although many, including Hamley himself, are inclined to dismiss her discomfiture as relatively harmless, Gibson realizes that it is serious:

He knew there was real secret harm going on all this time that people spoke of her as a merely fanciful invalid; and that one or two accused him of humouring her fancies. But he only smiled at such accusations. He felt that his visits were a real pleasure and lightening of her growing and indescribable discomfort; he knew that Squire Hamley would have been only too glad if he had come every day; and he was conscious that by careful watching of her symptoms he might mitigate her bodily pain. s

Gaskell covertly suggests both that the prevalence of illness makes onlookers apt to dismiss invalids as elaborate frauds and hypochondriacs, and that invalids find some degree of comfort if only in the validation of their complaints.

Gaskell sketches a revealing portrait of the marriage which has inadvertently but relentlessly diminished Mrs. Hamley's vitality, leaving

³Elizabeth Gaskell, *Wives and Daughters*, (London: J.M. Dent and Sons, 1966), p. 55. All subsequent references to *Wives and Daughters* will be to this edition and will appear in the text of this thesis.

diffidence and lethargy in its wake. Hamley is one of a dying breed of men, those who have no place in the world of educated aristocrats, but whose pride forbids them to associate with their "inferiors" in station. It is his lack of a formal education that causes him to avoid his social equals, (which is one reason underlying his insistence that his sons receive a first-rate education) and therefore he isolates himself, and necessarily his wife as well.

Their mutual attraction during courtship no doubt consisted of the fascination one feels for one's foil. Mrs. Hamley possesses the breeding and refinement lacking in Hamley's disposition, whilst he displays the candour and spunk which Mrs. Hamley rarely would have encountered amidst her London cohort. Gaskell describes Mrs. Hamley as "a fine London lady" and asserts that it was "one of those perplexing marriages of which one cannot understand the reasons" (p. 45), and yet she suggests subtle facets of their personalities which leave one less doubtful of their mutual desire.

Of the causal factors involved in Mrs. Hamley's illness, Gaskell is quite certain: "possibly Mrs. Hamley would not have sunk into the condition of a chronic invalid if her husband had cared a little more for her various tastes, or allowed her the companionship of those who did" (p. 53). After having "got all that was worth having out of the crowd of houses they called London" (p. 53), he was inclined to forget that the wretched place ever existed, and to rest content in the country setting which was his natural and chosen milieu. He often reminded Mrs. Hamley that she was the only "redeeming quality he could ever perceive London to possess" (p. 53) and this backhanded compliment, insensitive given that Mrs. Hamley is enamoured of much that London has to offer, begins eventually to grate on

her ears: "it charmed her at first, it pleased her up to the last time of her hearing it; but, for all that, she used sometimes to wish that he would recognise the fact that there might still be something worth hearing and seeing in the great city" (p. 53).

Hamley not only flatly refuses to accompany his wife to London but patronizes her upon her return when she "stubbornly" insists upon visits to the metropolis on her own. Moreover, he treats her as if she is no more than an emblem of himself and his pride. He is "kind" enough to bestow both his consent and his cash upon her to facilitate these sorties, but "showed so little sympathy with her when she came back full of what she had done on her visit that she ceased caring to go" (p. 53). The only approbation that Hamley can muster consists of a blend of condescension and arrogance:

"There, there, my little woman, take that! Dress yourself up as fine as any on 'em, and buy what you like, for the credit of Hamley of Hamley; and go to the park and the play, and show off with the best on 'em. I shall be glad to see thee back again, I know; but have thy fling while thou'rt about it." (p. 54)

It is obvious that he wilfully misreads his wife's purpose in visiting London. When Mrs. Hamley returns, Mr. Hamley frequently claims that the very talking about it tires him exceedingly, and he is apt to dismiss her anecdotes and exploits by bluntly changing the subject.

London is not the only pleasure that Mrs. Hamley foregoes for her husband's sake, although it is symbolic of a great deal more. Mrs. Hamley's tastes are refined; she is a prolific reader and possessed of "considerable literary taste." Furthermore, she is "gentle and sentimental; tender and good"(p. 54). In addition to her London visits, she also gives up her pleasure in social intercourse with her peers in education and position. Clearly the life of a leisured gentlewoman fond of entertaining could not

be led in tandem with Hamley. Although (or perhaps because) Mrs. Hamley finds herself even more firmly ensconced in Hamley's esteem for all she has given up, she also becomes most dissatisfied for having denied herself all of her passionate interests: "He loved his wife all the more dearly for her sacrifices for him; but, deprived of all her strong interests, she sank into ill-health; nothing definite; only she was never well" (p. 54). Shirley Foster sees this as a function of her deteriorating mental health and claims that it is Mrs. Hamley's "unresisting adoption of compromise and self-sacrifice [that] has created a stable marriage, but has also broken her spirit." 4

Even her children do not serve to give Mrs. Hamley a purpose, or diversion from turning her thoughts inward, and this is again basically a function of Hamley's practical, but thoughtless, aspirations. He does not want to place his sons in his own anomalous position with regard to social standing, and yet sending his sons to preparatory school early leaves his wife bereft of any consuming occupation or maternal pleasures. This act clearly shows deliberate sensitivity to the situations of his children but is devoid of any like sentiment with regard to Mrs. Hamley. Perhaps a compromise, in the form of sending them to school a little later on, could Hamley's been reached, but Mrs. feelings are obviously inconsequential.

Mrs. Hamley sinks slowly into an infirm state and for many years is unable to walk beyond the confines of her garden: "the greater part of her life was spent on a sofa, wheeled to the window in summer, to the fireside in winter" (p. 55). The only control she wields over her life is both minimal

^{*}Victorian Women's Fiction: Marriage, Freedom and the Individual, p. 178.

and manipulative. Her "delicacy" is invoked and inflamed when unpleasant events transpire. When Osborne loses his fellowship at Trinity, Mrs. Hamley reacts swiftly. In the words of Mr. Gibson:

"I can't understand it. I never expected anything extraordinary from Roger; but Osborne---! And then it has thrown madam into one of her bad fits of illness . . ." (pp. 186-87)

Hamley appears to make small concessions to his wife on account of her illness: "My wife sets her heart on things, as sick people do" (p. 187). This he says when entreating Molly to accompany him back to Hamley Hall to comfort Mrs. Hamley. But it is the lack of any significant concessions that has led to her malaise in the first place.

Mrs. Hamley also uses her illness to practise a form of denial with regard to her tedious existence. She has made it apparent that, as an invalid, she cannot call upon others in the neighbourhood nor receive calls. Her son Roger is confirmed in his belief that this is the reason why she no longer socialises: "My mother is very delicate, and obliged to humour her health, which has made her keep aloof from society" (p. 168). Of course, it is Mr. Hamley who has kept her "aloof" from society, with his disparaging opinion of London and his reluctance to interact with his neighbours. Mrs. Hamley's conformity to the Victorian notion of female obedience dictates that she must adapt herself to his lifestyle rather than protest. And so she chooses to reverse the order of events: it is because she is ill that she cannot socialise, and not that she becomes ill because she has been denied social intercourse. Here she is able to use her illness to fool herself as well as others.

Mrs. Hamley worsens after Osborne's fall from grace. Yet even her husband does not take her decline seriously. He is as disinclined to validate its existence as he is to prevent its emergence:

"It's nonsense thinking her so ill as that-you know it's only the delicacy she's had for years; and if you can't do her any good in such a simple case-no pain-only weakness and nervousness-it is a simple case, eh?-don't look in that puzzled way, man!-you'd better give her up altogether, and I'll take her to Bath or Brighton, or somewhere for a change, for in my opinion it's only moping and nervousness." (p. 195)

Whether Mrs. Hamley's indisposition is the result of "nerves" or no, this "moping," this mere weakness, swiftly kills her. When Hamley finally becomes aware that she is in fact suffering, and fatally so, it is very near the end. Although he had seen the "death-like pallor" on Mrs. Hamley's face numerous times, he is now compelled to take her seriously. It gives him a "fresh shock" every time he looks at her in the latter stage of her illness (p. 190), and yet previously he was insensitive enough to dismiss it since it was not life-threatening. Perhaps it is for this reason that, in her drugged and scarcely coherent state, Mrs. Hamley summons Molly, her only female friend, to her bedside for comfort, rather than her husband: "The Squire scarcely ever left his wife's room; he sat by her, watching her, and now and then moaning to himself. She was so much under the influence of opiates that she did not often rouse up; but when she did, she almost invariably asked for Molly" (p. 200).

Mrs. Hamley does not linger. Her death is as swift as it is inevitable. But the course of her illness has been slow and tedious: "Mrs. Hamley had sunk out of life as gradually as she had sunk out of consciousness and her place in this world. The quiet waves closed over her, and her place knew her no more" (p. 217). But her death is clearly a formality; she ceases to occupy

a "place" in this world long before she ceases to draw breath. Her illness and death demonstrate Gaskell's analysis of the connection between frustration and female ill health.

Lady Cumnor is an invalid of an entirely distinct type from that described thus far. The mordant wit that predominates in much of the prose concerned with Lady Cumnor and her frivolous and empty lifestyle serve to illuminate the absurd logic underlying many perceptions of Victorian invalidism. Lady Cumnor feels oppressed by the banality of her many obligations, most of which are entirely inconsequential. Although she does not depreciate her tasks in the slightest and, to the contrary, probably considers them too momentous to be entrusted to anyone else, she makes no secret of the fact that they tire her. Nonetheless, this is the result of elaborate denial, for were she to admit that the majority of her occupations are insipid, she would also have to confess that her life is entirely meaningless. Her obligations fatigue her because they are, in a word, boring. Gaskell is delightfully candid in revealing the artful manner in which Lady Cumnor makes of her various complaints opportunities to gratify her desires. Unlike that of Mrs. Hamley, her indisposition, born of a similar ennul and stagnation, has not yet manifested itself in authentic infirmity. The chameleonic nature of her malady, varying according to events and her own whims, indicates that she is manipulating her status as an invalid:

Lady Cumnor... found her labours as a chaperone to Lady Harriet, the youngest, considerably lightened by co-operation; and, at, length, she had leisure to be an invalid. She was, however, too energetic to allow herself this indulgence constantly; only she permitted herself to break down occasionally after a long course of dinners, late hours, and London atmosphere: and then, leaving Lady Harriet with either Lady Cuxhaven or Lady Agnes Manners, she betook herself to

the comparative quiet of the Towers, where she found occupation in doing her benevolence, which was sadly neglected in the hurly-burly of London. This particular summer she had broken down earlier than usual, and longed for the repose of the country. (pp. 97-98)

Lady Cumnor specifically justifies her distaste for certain duties and her querulousness and impatience by claiming the privileges of an invalid. When she is weary of deciding upon details, she is suddenly afflicted with vague symptoms: "It was a great relief to her to have Mr. Gibson to decide for her what she was to do; what to eat, drink, avoid. Such decisions 'ab extra,' are sometimes a wonderful relief to those whose habit it has been to decide, not only for themselves, but for everyone else; and occasionally the relaxation of the strain which a character for infallible wisdom brings with it, does much to restore health" (p. 110). Lady Cumnor pleads illness whenever she does not feel like coping with her tedious errands and obligations or when her wishes are thwarted. When Lady Cumnor is ready early for a meeting with Molly, she expects Clare to divine this and bring the girl in right away. When Clare fails to do so, Lady Cumnor perceives the punctual Molly to be inexcusably late. This puts her in a difficult mood: "Every small occurrence is an event in the day of a convalescent invalid, and a little while age Molly would have met with patronising appreciation, where now she had to encounter criticism" (p. 134).

Finally, it is interesting that even though Lady Cumnor believes that ill health is indicative of a weak nature, she persists in vindicating her torpor by "falling ill" when convenient. Lady Harriet calls her mother a ""great invalid" but also claims that "'she does not choose to give up her reputation for good health, having always considered illness a want of self-control" (p. 347). Although it goes against her instincts, using illness

to escape tedious tasks is the only means which Lady Cumnor can legitimately employ. Furthermore, it is attractive in that the aristocratic invalid is made much of: "Lady Cumnor had so far recovered from the violence of her attack and from the consequent operation, as to be able to be removed to the Towers for change of air; and accordingly she was brought thither by her whole family with all the pomp and state becoming an invalid peeress" (p. 502). Illness fuels Lady Cumnor's insatiable vanity, and this in itself renders the invalid state attractive. Indeed, Gaskell's treatment of Lady Cumnor reveals the attractions of female invalidism, for the affluent, at least, just as her depiction of Mrs. Hamley outlines its dangers.

Perhaps the most poignant example of an invalid in the novel is presented in the form of Molly Gibson. She is normally the epitome of youthful exuberance and vitality. Hope springs eternal for Molly for the greater part of the novel and so, when she finds herself somewhat estranged from her beloved father as the result of his injudicious marriage, and rendered superfluous, her subsequent decline is all the more pitiable. By initially portraying Molly as the picture of bright-eyed optimism and vigour, Gaskell points more emphatically to the psychic causes of the illness that later on subdues her.

The events and attitudes that conspire against Molly's spiritual well-being are slowly spelled out, and begin approximately when Molly is on the threshold of adulthood. Firstly there is the circumstance of her education. Mr. Gibson's instructions to the newly hired governess, Miss Eyre, are explicit and purposive:

"Don't teach Molly too much; she must sew, and read, and write, and do her sums; but I want to keep her a child, and if I find more

learning desirable for her, I'll see about giving it to her myself. After all, I'mnot sure that reading or writing is necessary. Many a good woman gets married with only a cross instead of her name; it's rather a diluting of mother-wit, to my fancy; but, however, we must yield to the prejudices of society, Miss Eyre, and so you may teach the child to read." (p. 46)

Although Mr. Gibson's desire to keep Molly a child potentially endows her with a greater degree of freedom than that accorded a young woman, yet it also must come to an end eventually, at which time her transition into the role of young Victorian woman would be even more difficult to adjust to. Furthermore, Molly's natural curiosity and desire for knowledge are crushed by such an injunction. The governess teaches Molly to read and write but "tried honestly to keep her back in every other branch of education" (p. 46) in compliance with Mr. Gibson's wishes. That Molly, who is obviously an intelligent girl, feels constrained by this is evident in her petitions for more schooling: "It was only by fighting and struggling hard, that bit by bit Molly persuaded her father to let her have French and drawing lessons" (p. 46).

Secondly there is the circumstance of Mr. Gibson's remarriage to the shallow and domineering Mrs. Kirkpatrick. Not only does that lady thwart the intimacy that Molly has previously enjoyed with her father, but she charges herself with overseeing Molly's upbringing, which is, of course, the reason behind Mr. Gibson's seeking a wife in the first place. Whereas before Molly has been given a much freer rein than most, owing to her mother's death and her father's preoccupation with his practice, now she must comply with the new Mrs. Gibson's efforts to render her marriageable. Mrs. Gibson is admirably suited to the task of presenting young ladies to social advantage and wastes no time in effecting changes in Molly's dress and demeanor. Although the result is a suppression of Molly's natural

inclinations and personal autonomy, Mrs. Gibson fulfills her duty by helping Molly avoid what is seen as a most unsavoury fate: "The wife's masterful negotiation of the rules of etiquette and fashion makes her a key player in arranging Molly's and Cynthia's marriages—marriages that install the young women permanently within the upper middle class and remove them from the ambiguous status of doctor's daughters and potential governesses."

The issue of Molly's marriageability continues to stifle the young woman. When Squire Hamley and Dr. Gibson are discussing the relative merits of Cynthia, Gibson's stepdaughter, and declare her "one in a hundred," Molly is viewed as vastly superior in terms of personality but overall deficient owing to her lineage and financial position:

The Squire meditated a little. "Your Molly is one in a thousand, to my mind. But then, you see, she comes of no family at all and I don't suppose she'll have a chance of much money." (p. 379)

Molly has become a commodity and worse, because, although she is generally recognised as a superior creature, her virtues are not valued as those which will advance a young woman in any significant way.

Molly finds herself increasingly trapped in what seems to her a situation of hopeless redundancy. Without a prospect of marriage, she is allotted little if any real purpose in life and finds idleness ill-suited to her nature: "Molly strives to fill her time; the admirable men in the book struggle to find time for all they wish to accomplish." Of course, Molly's agitation is exacerbated by her romantic attachment to Roger Hamley and his subsequent devotion to Cynthia, who greatly undervalues him in Molly's

[&]quot;Nobody's Angels: Domestic Ideology and Middle-Class Women in the Victorian Novel," p. 300.

[&]quot;Taking Care: Some Women Novelists, p. 37.

opinion. The injunction against revealing one's sexual feelings that is a vital element in the Victorian feminine ideal prohibits Molly from expressing her sorrow, and Roger remains unaware of her attachment. The Misses Browning loom on the horizon, depressing representatives of the fate of the unmarried. Their lives are characterized by an obsessive and pathetic attention to trivia and gossip and they are generally the object of ridicule, if they are noticed at all. The fact that Lady Harriet designates them "Pecksy and Flapsy" (p. 164) reveals why keeping a low profile is often preferable for such women. Molly certainly cannot look to their fate as a cheerful alternative to marriage. The despondency which emerges when Dr. Gibson remarries, and intensifies when Molly begins to feel dispensable, objectified, and enclosed becomes the source of a real and increasing debility:

...poor Molly had not passed a cheerful winter, independently of any private sorrows that she might have in her own heart. She did not look well, either: she was gradually falling into low health, rather than bad health. Her heart beat more feebly and slower; the vivifying stimulant of hope-even unacknowledged hope-was gone out of her life. (p. 397)

⁷Phoebe Browning is hopeful that Mr. Gibson's ruminations regarding remarriage are voiced to prepare her for a proposal (p. 148). That this is not his intention and that Phoebe looks slightly ludicrous as a result is a reflection of society's contempt for old maids who have the audacity to consider themselves desirable: "Society trained women for one function, marriage, and then mocked those who sought this idyllic state after having reached maturity." See Martha Vicinus, ed. Suffer and Be Still: Women in the Victorian Age, (Bloomington: Indiana University Press, 1972), p. xii.

^{*}Patricia Meyer Spacks writes of Gaskell's ability to perceive much that went undiscerned by her contemporaries: "Suppression as a legitimate form of self-control has long been recommended to women; literary recognition of its dangers as early as Mrs. Gaskell's time is unusual" (Taking Care: Some Women Novelists, p. 40).

Dr. Gibson is fearful for Molly's future when she shows no sign of rallying. The difference in one who has previously been so habitually cheerful and vibrant is sufficient cause for alarm. Gaskell has already revealed the doctor as relatively cognizant of the effects of one's psyche upon physical health, and so Gibson's reaction is much more immediate than that of, say, Squire Hamley with regard to his wife: "The illness which [Gibson] apprehended came upon Molly; not violently or acutely, so that there was any immediate danger to be dreaded; but making a long pull upon her strength, which seemed to lessen day by day, until at last her father feared that she might become a permanent invalid" (p. 557). But while Gibson treats her psychological disturbance seriously, Mrs. Gibson voices a common opinion of her age with respect to female illness: "'Molly's illness is only nervous, Mr. Gibson says. A nervous fever; but you must remember nerves are mere fancy, and she's getting better" (p. 558).

Molly actually suffers from one of those infamous swooning fits so popular in the Victorian period, but, being acquainted with Molly's sincere nature, the reader is compelled to take it seriously. When Molly perceives that Roger Hamley has just been dismissed by Cynthia both from the parlour and from her life, she faints away "utterly" and Cynthia must summon smelling salts (p. 573). Her illness intensifies and a brief sojourn at the Towers is recommended during the family's removal for Cynthia's wedding. It is not surprising either that Roger Hamley happens to be visiting the Towers during this period, nor that Molly's infirmity gradually goes into remission. Had the novel been completed, it is obvious that a marriage between Molly and Roger would have taken place. Her spiritual malaise will be relieved by the proximity of her beloved Roger, and by the prospect of

an active and purposive life following such a marriage, and thus the novel closes. Of course, Gaskell does not resolve the problem of "woman's place" in Victorian society and seems unable to avoid the conventional ending here. But she has revealed the circumstances that lead Molly down the path of infirmity and back again, even if she has not satisfactorily proposed more humane and fulfilling roles for women.

Gaskell furthers her argument by presenting a foil to Molly in Cynthia, Molly's stepsister. Cynthia Kirkpatrick is subject to anxiety regarding her future as surely as is Molly, but her apprehension, though source, manifests springing from the same itself Conventionally beautiful and possessed of a certain facile charm which men and women alike find enchanting, Cynthia is more sure of her future (which certainly will include marriage) and is only unsure as to whom the bridegroom will be. In the meantime, she is harassed by her mother every time a lucrative match is proposed (for example, in the case of Mr. Henderson) and thwarted in her plan to wed Roger Hamley. She is as much a commodity as Molly, and more so, since she is the prototypical young Victorian lady, captivating and exquisitely formed. Like her mother, she assents to the view of herself as a commodity. This not only puts enormous pressure on Cynthia to make an advantageous match, but makes her secret pledge to the loathsome Mr. Preston even more distressing. In fact, his efforts to make Cynthia acknowledge and seal her pledge to him are equalled only by her struggle to conceal her youthful blunder. Since it is made under duress, at a time when Cynthia is basically friendless, and extremely young and isolated as well as lacking in sufficient funds, the reader is sympathetic to her plight. But Preston is not and, seeing his advantage, he

pressures her as vehemently as her mother does on similar matters. The result is that Cynthia falls prey to a dwindling of spirits, which leads to a decline in her physical health. It is not serious since there is "nothing very much the matter, only a general lowness of tone and depression of health and spirits" (p. 304). But she is affected enough to worry the other characters.

Not only does Gaskell recognise the origin of her ailment, but these other characters do as well. Mrs. Gibson confides to Roger Hamley that she "'could tell tales as to the cause of [Cynthia's] indisposition in the spring'" (p. 362). Of course, she is here referring to the anxiety Cynthia experienced owing to her entanglement with Mr. Preston, and yet implying that Roger Hamley was the source of her emotional distress since this implication better suited the situation. Cynthia does not delude herself as to the nature of her decline: "If there is one thing I dislike,' said Cynthia to Mr. Gibson, after he had pronounced tonics to be the cure for her present state, 'it is the way doctors have of giving spoonfuls of nauseous mixtures as a certain remedy for sorrows and cares'" (p. 304). Caught in a tangle of limiting social strictures, Cynthia is unable to cope and recedes into the background, or attempts to do so, through illness.

Cynthia's mother is the last female character to be reckoned with. She maintains a hearty interest in everything (and especially others' affairs), but does find time to complain of vague pangs when it appears that her wishes might not be complied with. This occurs when her daughter rejects Mr. Henderson:

"she need not have quite finally refused him until well, until we had seen how matters turn out. Such an invalid as I am too! It has given me quite a palpitation at the heart. I do call it quite unfeeling of Cynthia" (p. 513).

Although Mrs. Gibson had indeed suffered from influenza and was now recovering, Gaskell reveals that Mrs. Gibson is prone to manipulate her physical state according to circumstances, "... she being one of those who, when their malady is only trifling, exaggerate it, but when it is really of some consequence, are unwilling to sacrifice any pleasures by acknowledging it" (p. 511). Of course, thus far Mrs. Gibson has been generally capable of turning events to her advantage through mischief, falsehood, and snivelling. Here she resembles a middle-class version of Lady Cumnor, for both of whom invalidism is often a means to a selfish end.

Although Osborne Hamley's illness is authentic and, indeed, fatal, Gaskell includes certain details relating to his character and situation which render him, metaphorically, a representation of the female neurasthene. Despite the fact that he is indisputably male, Osborne possesses many traits characteristic of the Victorian female ideal. He is feminized by Gaskell by both appellation and depiction. His name is that of his mother before she married, and Gaskell fashions him after this mother, explicitly stating that, in temperament, he is effeminate:

Osborne, the eldest-so called after his mother's maiden name-was full of taste, and had some talent. His appearance had all the grace and refinement of his mother's. He was sweet-tempered and affectionate, almost as demonstrative as a girl. (p. 54)

Through the feminization of Osborne, Gaskell furthers her case against the condition of Victorian woman, revealing that it is not gender that produces female debility but rather the possession of those characteristics women were expected to cultivate. Moreover, Osborne's illness, like that of his mother, is possibly exacerbated by the lack of sympathy shown by Mr. Hamley.

The image of the invalid gentlewoman is most extensively dealt with in Wives and Daughters but appears in other works by Gaskell. In Mary Barton there is a species of nouveau riche Lady Cumnor, and in North and South there is an aristocratic mother and daughter to whom invalidism is an effective means of manipulating others. In the former, Mrs. Carson, the mother of Mary's alleged suitor, has working-class roots but has "come up in the world" alongside of her ambitious spouse. As an indirect result of her newfound status, she has taken on certain characteristics of the upper class for which she had previously neither the time nor the inclination. Undoubtedly bored beyond belief by her lifestyle, especially since it is not what she is accustomed to, she becomes self-absorbed and pernickety:

Mrs. Carson was (as was usual with her, when no particular excitement was going on) very poorly, and sitting upstairs in her dressing-room, indulging in the luxury of a headache. She was not well, certainly. "Wind in the head," the servants called it. But it was the natural consequence of the state of mental and bodily idleness in which she was placed. Without education enough [and here Gaskell certainly means useful education] to value the resources of wealth and leisure, she was so circumstanced as to command both. It would have done her more good than all the ether and sal-volatile she was daily in the habit of swallowing, if she might have taken the work of one of her own house-maids for a week

Housework, although not necessarily stimulating, would be preferable to the inactivity Mrs. Carson's social position requires of her, and indeed, any purposive exercise must be seen as welcome when the alternative is a sense of futility.

In North and South it is Margaret Hale's fastidious Aunt Shaw and her shallow daughter Edith who consider themselves too frail to perform any

^{*}Elizabeth Gaskell, Mary Barton, (Edinburgh: Turnbull & Spears, 1906), p. 237.

obligations which they find distasteful. Aunt Shaw also manages to rationalize the carrying out of her whims by invoking "doctor's orders" when she wishes to go abroad: "Now that, the general [her deceased husband] being gone, she had every good of life, with as few drawbacks as possible, she had been rather perplexed to find an anxiety, if not a sorrow. She had, however, of late settled upon her own health as a source of apprehension; she had a nervous little cough whenever she thought about it; and some complaisant doctor ordered her just what she desired, a winter in Italy." Mrs. Shaw has been accustomed to complaining about her husband and his rather inconsiderate death has put her in the difficult position of having to invent a new grievance. An exaggerated concern for her health is the result. When she goes to collect Margaret after Mr. Hale has passed on suddenly, she pleads poor health in an uncharitable bid to quit Milton in a hurry, as the town is not to her taste.

Edith, Aunt Shaw's daughter, is similar to Mrs. Carson in that she only finds herself suffering from "delicacy" when there is no suitable diversion on her social calendar. She invariably engages the obliging Margaret who "took all charge of the semblances of duties off Edith's hands; answered notes, reminded her of engagements, tended her when no gaiety was in prospect, and she was consequently rather inclined to fancy herself ill."11 Both Edith and her mother are opportunistic invalids (as well as entirely selfish creatures).

¹⁰Elizabeth Gaskell, *North and South*, (London: Oxford University Press, 1973), p. 13.

¹¹ Ibid, p. 372-73.

It becomes difficult in North and South to separate the fancied from the authentic illness, which perhaps reveals what a nebulous concept it was that doctors tried to define neatly. Mrs. Hale initially appears to be a querulous and hypochondriacal woman (like her sister, Mrs. Shaw, and her niece, Edith), whose complaints stem purely from dissatisfaction with the village she inhabits. When she finds Milton worse, her subsequent complaining seems to be merely a continuation of the former. And yet, wholly dissatisfied with her life, she falls ill and dies. Even her husband does not suspect that his wife is in danger until her illness is quite advanced.

Gaskell very candidly (and cleverly) renders explicit the conditions which lead to the deterioration of mental and physical health as they are manifested in the lives of many Victorian gentlewomen, indicating that symptoms may appear innocuous at the outset (and even remain so in some cases) but are capable of progressing into genuine and lethal sickness.

As previously mentioned, Gaskell cannot provide a satisfactory alternative for the women who appear in and often suffer throughout her novels. But some critics have suggested that it is the very sense of fragmentation and incongruity in women's lives that results in this capitulation. Shirley Foster, in writing about works by Gaskell, Brontë, and others, offers the following explanation: "The dichotomies in their work can be seen as direct confrontation of the discordancies of their world, an exploration of the dualistic nature of female experience, both protest against and accession to convention. So, while implementing traditional patterns of marriage and motherhood, they uncover the miseries of

matrimonial bondage." Gaskell is unique in that her prose effects this unmasking of the patriarchal monolith with both subtlety and force. She is frank in expressing the sense of conflict she herself felt in juggling her roles as wife/mother and novelist. Yet a striking feature of Gaskell's novels is the fact that disease arises not from the over-employment she must have experienced, but from the problem of under-employment.

It is evident that Gaskell's perception of her own situation as well as those of the women whom she knew intimately, and her keen perception of the contradictory nature of Victorian values, led her to expose the malaise which often gave rise to genuine as well as imagined invalidism. These both have their root, in Gaskell's fiction, in stagnation and impotence. They appear to defy neat explications by the medical profession but are revealed as ineffectual coping mechanisms or complex physical manifestations of a repressed spirit. In any case, they are represented as the shocking consequences of living in a misogynist society. Gaskell does not include medical diagnoses in her works, in the form of the scientific expert coming forth to lend his opinion on matters (Gibson is obviously a more sympathetic portrayal of a medical man than she could easily have penned). However, it is clear that several characters, such as Lady Cumnor and Mrs. Carson, are "fashionably" neurasthenic whereas others, like Molly Gibson and Mrs. Hamley, are seriously ill as a result of the apparent meaninglessness and helplessness which characterize their existence. The symptoms these characters exhibit are varied, and include headaches, heart palpitations, fainting spells, insomnia, loss of appetite, depression,

¹² Victorian Women's Fiction: Marriage, Freedom and the Individual, p. 14.

fatigue, anxiety, and wide mood swings. However, this medley of symptoms points to the predicament of the neurasthene. Gaskell renders her not only visible but predominant in *Wives and Daughters* and so nonchalantly includes her in other works that she must clearly be seen as an institution in Victorian fiction and parlours alike.

CHAPTER 3

'Morbid Self-Esteem' in Shirley

In Shirley (1849), Charlotte Brontë addresses so many complex and controversial issues that many readers were initially scandalized by its subject matter:

Brontë's first readers reacted against the militancy of the novel. They possibly even sensed how this book about the 'woman question' uses the workers' wrath to enact the women's revenge against lives of enforced emptiness, of starvation. Far from being merely feverish or hectic, Shirley justifies and embodies Brontë's feminist consciousness.¹

Charlotte Brontë was undoubtedly more outspoken than Elizabeth Gaskell on the subject of the "woman question," and her sense of both patriarchal injustice and the forces at work undermining female self-esteem and energy were inevitably expressed in her fiction. Shirley is an exploration of spinsterhood, marriage, and the female self, and the impotence which characterized these in Victorian society. Brontë's belief in the importance of work, identity and personal fulfillment informs most of this work, through the voices of the female characters and occasionally through authorial interjection. Brontë makes extensive forays into the world of "old maids," class conflict, conjugal relationships, and feminine occupations to examine thoroughly the nature of woman's "place," and the repressive ideologies that determine it.

^{*}Susan Gubar, "The Genesis of Hunger, According to Shirley," Feminist Studies, Spring/Summer 1976:5.

In Shirley, Brontë's treatment of women is strengthened by her use of two heroines. The novel outlines both Caroline's and Shirley's jagged progress through stages of hope, despair, illness, and eventual renewal of faith and felicity through marriage. Shirley does not directly portray alternatives for women any more than most of Victorian fiction does, and in fact invokes a familiar script:

The drawing room world created by the women novelists for their largely female audience is scented with roses and filled with fancy-work and ballgowns, but it is a world in which man is supreme. The best hope for the young heroine is marriage with an appropriate man, for the mating game which leads to marriage is the central adventure of her life and in marriage itself traditionally lies her fulfillment. Here, too, is the most prevalent plot of these novels, the tracing of a young woman's career through the challenges and obstacles of courtship to the threshold of marriage.²

What Shirley does do is to elucidate the intricate and sometimes subtle constraints which thwart the female characters in their quests for self-realization. For this reason, Brontë's very subject matter renders the novelization of her ideas a difficult task: "How to plot a story about characters defined by their very inability to initiate action—this is the problem Brontë faced. Shirley focuses on impotence, the stasis that derives from hopelessness." Despite this difficulty and the fact that Shirley relies rather heavily on extraordinary circumstances in order to bring Caroline and her mother together, Shirley is a compelling work precisely because Brontë's style is a reflection of her subject matter and its resistance to conventional means of novelistic expression:

²Victorian Women's Fiction, p. 30.

^{3&}quot;The Genesis of Hunger, According to Shirley," p. 6.

. . . the men are impeded while the women are completely immobilized by the constraints imposed by their society. Circumscribed principally by their gender, the women are necessarily passive and this is reflected in the plot which consistently calls attention to its own inorganic development, its dependence on the manipulations of the narrator who keeps secrets, pushes characters in and out of the neighborhood, and engineers fortuitous misunderstandings, riots, and reunions.*

Brontë utilizes a variety of images and analogies to evoke a sense of the futility of much of female existence in the era in which Shirley is placed (that of the Ludditeriots which lasted from 1811-1812) and in her own. The working class is swiftly and absolutely vanquished by the mill-owners, yet even their subjugation is as nothing compared to the subjugation of the women, who are even more denigrated than the working class itself: "What connects the workers to the women is their vulnerability, their common victimization and invisibility." However, Brontë does not stop at identifying the plight of labourers with that of women; rather, she demonstrates that women occupy an even lower echelon on the scale of worth than the working class. Through the vehicle of the rough, ignorant Joe Scott, the upper-class, educated and intelligent Shirley is revealed as inferior in power to an illiterate and backward labourer. He quotes from St. Paul in order to dismiss Shirley's input in a political conversation:

"Let the woman learn in silence, with all subjection. I suffer not a woman to teach, nor to usurp authority over the man, but to be in silence. For Adam was first formed, then Eve." (Timothy 1:11-13)

^{4&}quot;The Genesis of Hunger, According to Shirley," p. 12.

⁵Ibid., p. 9.

Charlotte Brontë, *Shirley* (Great Britain: Penguin Books, 1974), p. 322. All subsequent references to *Shirley* will be to this edition and will appear in the text of this thesis.

Joe Scott might not be terribly bright but even he feels superior to the opposite sex, and knows how to disparage them by invoking established authority.

As well as dealing with the general issue of the subordination of women, Brontë also raises the issue of spinsterhood and all of its concomitant horrors to scrutinize the assumptions underlying specific notions of female occupations and self-definition. None of the scant choices which Caroline or Shirley perceive appear to satisfy their cravings for self-actualization and autonomy, and they long for a kind of singlehood that does not involve self-obliteration or evoke disgust and derision. They conceive of a world in which women may work at a fulfilling vocation without fear of ridicule or stigmatization. Caroline, in addressing the apparent meaninglessness of her life, muses bitterly: "I often wonder what I came into the world for. I long to have something absorbing and compulsory to fill my head and hands, and to occupy my thoughts'" (p. 235). As Foster observes, "in Shirley, Caroline Helstone and Shirley Keeldar look critically at their society's ideologies about marriage, and challenge the notion that singlehood inevitably means a wasted life for a woman,"7 The roles and status of the unmarried women, Miss Mann and Miss Ainley, are discussed in more detail later in this chapter.

Brontë's heroines evince misgivings about the marital state as well as the single state. Shirley well knows that wedlock will entail relinquishing many of the freedoms she presently enjoys. However, her relatives are already pressuring her to make an advantageous match and

Victorian Women's Fiction: Marriage, Freedom and the Individual, p. 78.

she believes that she will have no place in the world if she retains her single status. Caroline, who is in a more vulnerable social situation, spends more time mulling over her future as an old maid, as she believes that her one true love, Robert Moore, has forever forsaken her. But Brontë's representation of Mr. Helstone's marriage to Mary Cave and Caroline's parents' union make it clear that marriage itself is no panacea. The sheer brutality, mental and physical, portrayed in these unions points to a more pessimistic view of conjugal "bliss" than is traditionally conveyed. Even the Yorkes present a disturbed vision of matrimony, although they are less violent. Brontë, like some of her female colleagues, succeeded in removing the film of sentiment obscuring the true picture of many connubial relations. In Shirley, Foster says that "idealism about marriage as the supreme female fulfillment is often challenged: the heroines themselves frequently verbalise their anger and frustration at male-oriented definitions of womanhood. Yet sooner or later, romance triumphs; the heroines give up the fight and seem happy to sink into the protecting man." Shirley finishes with overwhelming ambivalence, but the characters' malaise is unequivocally there. Caroline, Shirley, and Mrs. Pryor explicitly state and manifest the adverse effects that Victorian ideals inflict upon their health, and, although the young women marry in the end, bronte has broached so many provocative and

^a"Female Januses: Ambiguity and Ambivalence towards Marriage in Mid-Victorian Women's Fiction," p. 217.

^eSusan Gubar points out that Brontë is undoubtably aware that such closure is unsatisfactory: "Brontë cannot avoid the conventional 'happy ending,' as bankrupt as she knows it to be. Having recognized that the inherited novelistic conventions assign to characters a degree of freedom that contradicts her own sense of the female condition, she can only call

serious issues in the process that her work remains an important contribution to the "woman question," in so far as it relates to marriage. In Shirley, the idea that women's status and consequent lifestyles inflict misery and infirmity is stated with conviction and precision and frequently communicated through illness. Brontë describes the mental state which finds itself a willing host to illness, of either a lingering or fatal nature, or both:

People never die of love or grief alone; though some die of inherent maladies, which the tortures of those passions prematurely force into destructive action. The sound by nature undergo these tortures, and are racked, shaken, shattered; their beauty and bloom perish, but life remains untouched. They are brought to a certain point of dilapidation; they are reduced to pallor, debility, and emaciation. People think, as they see them gliding languidly about, that they will soon withdraw to sick-beds, perish there, and cease from among the healthy and happy. This does not happen: they live on; and though they cannot regain youth and gaiety, they may regain strength and serenity. The blossom which the March wind nips, but fails to sweep away, may survive to hang a withered apple on the tree late in autumn; having braved the last frosts of spring, it may also brave the first of winter. (pp. 205-6)

This passage serves to illustrate the forces at work undermining the health of the women characters in this novel as well as those of whom we hear about but do not encounter. For instance, we are introduced to the darker side of matrimony through Brontë's depiction of Mr. Helstone and his delicate bride, Mary Cave. She is presented as a species of "angel in the house," an archetype of the Victorian wife, whereas Mr. Helstone is obtuse and egocentric. His brand of misogyny is thinly disguised and virulent: "He made no pretence of comprehending women, or comparing them with men; they were a different, probably a very inferior, order of existence; a wife could

attention to this by describing remarkably improbable escape routes." ("The Genesis of Hunger, According to Shirley", p. 19).

not be her husband's companion, much less his confidant, much less his stay" (p. 82). Mary Cave is much sought after, and a fierce rivalry has erupted between Mr. Helstone and Hiram Yorke, after which the former has been favored with her hand in marriage. But this is obviously viewed by Helstone as a dispute over coveted property, as he subsequently displays no interest in his wife whatsoever. She is an ornament to grace his house and flaunt in front of his comrades, nothing more.

It is no wonder that Mary ultimately withers and fades away. Helstone is utterly impervious to the feelings of others:

Nature never intended Mr. Helstone to make a very good husband, especially to a quiet wife. He thought, so long as a woman was silent, nothing ailed her, and she wanted nothing. If she did not complain of solitude, solitude, however continued, could not be irksome to her. If she did not talk and put herself forward, express a partiality for this, an aversion to that, she had no partialities or aversions, and it was useless to consult her tastes. (p. 82)

Lacking in meaningful communication, companionship, and occupation, Mary's spirit shrivels. She experiences a prolonged decline (apparently unnoticed by her husband) and eventually expires, eliciting little dismay or sorrow from Helstone: "His wife, after a year or two, was of no importance to him in any shape; and when she one day, as he thought, suddenly for he had scarcely noticed her decline but, as others thought, gradually, took her leave of him and of life, and there was only a still beautiful-featured mould of clay left, cold and white, in the conjugal couch, he felt his bereavement who shall say how little?" (p. 82). Brontë concedes that he was a man ill-fitted to show his grief, undemonstrative to a fault, and yet she appears unconvinced that Mrs. Helstone's passing made any great impression on him. His personality in general does not indicate that women

are worth mourning over. They are playthings for males, and any evidence of female passion or self-esteem, any impertinent manifestations of intelligence, are aberrations that must be effaced: "At heart, he could not abide sense in women: he liked to see them as silly, as light-headed, as vain, as open to ridicule as possible; because they were then in reality what he held them to be, and wished them to be, inferior: toys to play with, to amuse a vacant hour and to be thrown away" (p. 138). When they display the above qualities, Helstone can respond by appearing to be a charming and pleasant man, but his is a patronising gallantry, affected and insincere. 10 That Mary Cave is a sensitive and caring person, deserving of more than condescending chivalry, is implied in the reactions of Mrs. Helstone's nurse: "His [Helstone's] dry-eyed and sober mourning scandalized an old housekeeper, and likewise a female attendant, who had waited upon Mrs. Helstone in her sickness, and who, perhaps, had had opportunities of learning more of the deceased lady's nature, of her capacity for feeling and loving, than her husband knew" (p. 82".

Brontë does not limit herself to the depiction of only one violent and disastrous marriage. Caroline's father, Helstone's brother, is also an imperfect specimen of husband (and father). We know very little about him

¹⁰ In essence, Helstone is not unlike St. John in Jane Eyre. Although holding dissimilar views regarding how best to serve God, both are self-righteous and selfish men who desire an ideal rather than a woman. St. John actually has the audacity to tell Jane that she is selfish if she does not conform to his ideal of how one should live one's life (and ally herself to him in a cold and loveless marriage). Refusing him is tantamount to refusing to allow God in her life (the analogy is revealing!). Jane's description of his temperament brings Helstone to mind; he had "... an austere and despotic nature ... the disapprobation of a cool, inflexible judgement, which ... detected in another feelings and views in which it [had] no power to sympathize." See Jane Eyre, p. 414.

except for a brief sketch offered by Caroline, in which he appears as a demented and sadistic phantom, abusive and neglectful of his daughter:

Rumours had reached her ear of what that father's character was; old servants had dropped hints; she knew, too, that he was not a good man, and that he was never kind to her. She recollected-a dark recollection it was - some weeks that she had spent with him in a great town somewhere, when she had been shut up day and night, in a high garret-room, without a carpet. with a bare uncurtained bed, and scarcely any other furniture; when he went out early every morning, and often forgot to return and give her her dinner during the day, and at night, when he came back, was like a madman, furious, terrible; or-still more painful-like an idiot, imbecile, senseless. She knew she had fallen ill in this place, and that one night when she was very sick, he had come raving into the room, and said he would kill her, for she was a burden to him: her screams had brought aid, and from the moment she was then rescued from him she had never seen him, except as a dead man in his coffin. (p. 126)

Caroline's mother found Mr. Helstone, her husband, equally unbearable. In fact, Mrs. Pryor's disgust with her husband is so profound as to render any associations with her past as his wife repulsive. This even extends to her daughter, Caroline. Mrs. Pryor's torment is such that she has avoided reuniting herself with Caroline, fearing that the progeny of such a man must necessarily be tainted with his savage and deranged nature. In this instance, Mrs. Pryor's physical health remains unaffected since she has escaped her husband, yet his influence even when absent is such that it greatly and seemingly permanently affects Mrs. Pryor's mind and personality. Such a bleak portrait of matrimony is painted that Caroline's ambivalence regarding her future is revealed as even more distressing, since even the option that is regarded as preferable appears to involve danger and misery.¹¹

¹¹Shirley Foster observes that "many Victorian women novelists, even while apparently accepting both the necessity and the blessings of matrimony, and using its thematic conclusiveness as a shaping principle in their works, cast a more quizzical eye on the convention with their actual

Caroline arrives at the conclusions which lay the foundations for her decline slowly and inexorably. When Robert Moore appears indifferent to her, she is compelled to ruminate on her future, which she had heretofore assumed, unconsciously or not, would be woven into his. Caroline finds that she is even denied the solace of explanation on his part regarding his change of heart: "A lover masculine so disappointed can speak and urge explanation; a lover feminine can say nothing; if she did, the result would be shame and anguish, inward remorse for self-treachery. Nature would brand such demonstration as a rebellion against her instincts, and would vindictively repay it afterwards by the thunderbolt of self-contempt smiting suddenly in secret" (p. 128). Brontë then reveals the course of silence and inaction which is deemed appropriate for women who suffer from unrequited love. It entails elaborate deception and fortitude and furthers the creed of self-renunciation. After advocating treating the mental pain as a species of stone or scorpion and either "breaking one's teeth" on it or gripping the creature firmly until the sting has rendered one desensitized, Brontë goes on to explain the logistics of doing so:

Never mind: in time, after your hand and arm have swelled and quivered long with torture, the squeezed scorpion will die, and you will have learned the great lesson how to endure without a sob. For the whole remnant of your life, if you survive the test-some, it is said, die under it-you will be stronger, wiser, less sensitive. This you are not aware of, perhaps, at the time, and so cannot borrow courage of that hope. Nature, however ... is an excellent friend in such cases; sealing the lips, interdicting utterance, commanding a placid dissimulation: a dissimulation often wearing an easy and gay mien at first, settling down to sorrow and paleness in time, then passing away, and leaving a convenient stoicism, not the less fortifying because it is half-bitter. (p. 128)

portrayals of the marital experience" ("Female Januses," p. 220). Brontë's "eye" proves more than quizzical, and indicts the brutality that was often deemed the right of Victorian husbands.

In these lines, Brontë presents a microcosmic analysis of the pathology of women's lives in general. The "passing away" which refers ostensibly to the disturbed emotions might as well involve the corporeal woman also (Brontë even states that some "die" under such trials).

After coming to grips with this unpleasant imperative of silence, Caroline must also confront her options. After visiting Miss Mann and Miss Ainley, she contemplates the old maids' lives and motives, and arrives at some painful truths. Miss Mann's brittle shell and severity are revealed as a defense against self-annihilation at the hands of her persecutors, who also happen to be her neighbors, the clergy, and so on. Miss Ainley is a philanthropist who knows her fellow parishioners and their private agonies and needs better than the local pastorate do (and attends to those needs with formidable devotion). Yet the women are reviled nevertheless, ¹³ despite the fact that for many single women, the odds were against their

¹² Susan Gubar refers to the vehemence of Brontë's message and what it portends for women's lives more generally: "With what fury the lesson of repression is given. Endurance and submission, silence and suffering involve pain and self-destruction. When Brontë describes the transubstantiation of bread into stone, of egg into scorpion, she explains the cause and result of female suffering: with no sustaining nourishment, growth is impossible and so is escape; the woman can only witness her imprisonment and withdraw into it with the ambiguous solace that comes from being hidden" ("The Genesis of Hunger, According to Shirley," p. 8).

old maids. Caroline "discovers that unmarried women are real victims of society. They often have a more useful function than many wives and mothers; and it is the stupid ostracism practised against them that contributes to their common embitterment. They are the byproduct, the waste, of an archaic ideal of woman, that dooms her only to be a wifemother." See *Relative Creatures*, (New York: Schocken Books, 1974), p. 158.

marrying from the beginning. 14 In answer to Caroline's plaintive query "Where is my place in the world?" (p. 190), the conventional answers ring hollow in her ears, revealing that she will not, indeed, occupy a place:

"your place is to do good to others-to be helpful whenever help is wanted." That is right in some measure, and a very convenient doctrine for the people who hold it; but I perceive that certain sets of human beings are very apt to maintain that other sets should give up their lives to them and their service, and then they requite them by praise: they call them devoted and virtuous. Is this enough? Is it to live? Is there not a terrible hollowness, mockery, want, craving, in that existence which is given away to others for want of something of your own to bestow it on? I suspect there is. Does virtue lie in abnegation of self? I do not believe it. Undue humility makes tyranny; weak concession creates selfishness. (p. 190)

Here Brontë is scarcely distinguishable from her creation. Caroline finds no comfort in the possibility of living out her days as a spinster, even though there is much to commend in the two old ladies (much in the way of character, that is; the aversion Caroline feels is entirely for their circumstances). Whereas the days used to signify infinite promise to Caroline, she is now at a loss as to how she will fill them:

"I have to live, perhaps, till seventy years. As far as I know, I have good health. Half a century of existence may lie before me. How am I to occupy it? What am I to do to fill the interval of time which spreads between me and the grave?" (p. 190)

It is significant that governessing is the only means of escape that Caroline can realistically imagine. Brontë and others, notably her sister Anne in *Agnes Grey* (1848), through their fiction and actual experience, have exposed the profession as anomalous and often annihilating. That it here

¹⁴Foster draws attention to the incompatibility of Victorian fact and fantasy. Not only had the numbers of single females over the age of fifteen leapt to over three million by 1871, but "the unequal sex ratio, worsened by the numbers of eligible bachelors who emigrated, promised permanent spinsterhood for many" ("Female Januses," p. 218).

represents a kind of salvation to Caroline indicates that she is, because of her cold, distant uncle, Robert's apparent disdain and her lack of any goal, desperate indeed. Caroline's determination proves futile, in any case. Her uncle thwarts her and even Mrs. Pryor attempts to dissuade her. When Caroline broaches the subject with Helstone, his demand to know what "whim" compels her now sets the tone for his prohibition of the idea. Although he finally recognises that she is troubled and very evidently so ("bloom had vanished, flesh wasted; she sat before him drooping, colourless, and thin," p. 203), he is unsympathetic and belittles her:

"Pooh! Mere nonsense! I'll not hear of governessing. Don't mention it again. It is rather too feminine a fancy. I have finished breakfast, ring the bell; put all crotchets out of your head, and run away and amuse yourself." (p. 205)

Helstone implies that Caroline is to blame for her condition and only offers a doctor or a "watering-place" as a solution. Furthermore, his dignity and social position will be adversely affected if Caroline finds a place in a family as governess and this is another reason for vetoing her suggestion. Considering it a point of pride that Caroline continue her useless existence, since she will have an annuity from him and never need seek a situation for financial reasons, he takes his leave of her.

Mrs. Pryor attempts to instill a sense in Caroline both of the selfobliteration required by governessing and the adverse effects on the
health as a result. After describing the contradictory nature of the
governess' role, she frankly spells out the specific consequences as they
once affected her: "My life in this house was sedentary, solitary,
constrained, joyless, toilsome. The dreadful crushing of the animal spirits,
the ever prevailing sense of friendlessness and homelessness consequent
on this state of things, began ere long to produce mortal effects on my

constitution—I sickened" (p. 363). Mrs. Pryor goes on to say that "morbid self-esteem" was considered the culprit by the lady of the house. Caroline is made to realise that governessing is merely an extension of her own existence in her uncle's house, requiring the same surrender and sacrifice. Significantly, it brings about the same consequence, that of serious illness.

Although her conversations with Shirley elucidate the problem, and indicate that she is not alone, in perceiving it or suffering from it, they do nothing to alleviate Caroline's pain. She is aware both that useful occupation is a balm to one's spirits, and that it is not sufficient as a raison d'être. Caroline wishes "fifty times a day" that she had an occupation, but does not view it as a cure-all. Labour can "give varieties of pain, and prevent us from breaking our hearts with a single tyrant master-torture. Besides, successful labour has its recompense; a vacant, weary, lonely, hopeless life has none'" (p. 235). Caroline goes on specifically to describe the plight of neighbouring girls of her acquaintance and what she believes is their fate and the fate of most women:

"The brothers of these girls [the Sykes, for example] are every one in business or in professions; they have something to do: their sisters have no earthly employment, but household work and sewing; no earthly pleasure, but an unprofitable visiting; and no hope, in all their life to come, of anything better. This stagnant state of things makes them decline in health: they are never well; and their minds and views shrink to wondrous narrowness. The great wish-the sole aim of every one of them is to be married, but the majority will never marry: they will die as they now live. They scheme, they plot, they dress to ensnare husbands. The gentlemen turn them into ridicule: they don't want them; they hold them very cheap: they say-I have heard them say it with sneering laughs many a time-the matrimonial market is overstocked. Fathers say so likewise, and are angry with their daughters when they observe their manoeuvres: they order them to stay at home. What do they

expect them to do at home? If you ask, they would answer, sew and cook. They expect them to do this, and this only, as if they had no germs of faculties for anything else:a doctrine as reasonable to hold, as it would be that the fathers have no faculties but for eating what their daughters cook, or for wearing what they sew. Could men live so themselves? Would they not be very weary? And, when there came no relief to their weariness, but only reproaches at its slightest manifestation, would not their weariness ferment in time to frenzy?" (pp. 377-8)

But, while Caroline can perceive the root of the problem and direct attention to the inherent fallacies operative in her society, she is still unable to frame some sort of solution. This deficiency leads ultimately to sickness.

Caroline comes down with some sort of infirmity apparently after walking home in the fresh air. Brontë explicitly states that her mental turmoil precipitates her fever: "How she had caught the fever fever it was-she could not tell. Probably, in her late walk home, some sweet, poisoned breeze, redolent of honeydew and miasma, had passed into her lungs and veins, and finding there already a fever of mental excitement, and a languor of long conflict and habitual sadness, had fanned the spark of flame and left a well-lit fire behind it" (p. 399). Meanwhile, the real catalyst behind this fever has arrived at the Moores' residence while Caroline is visiting there, in the form of a bouquet of flowers from Fieldhead. Hortense has casually joked that Robert is the favourite there, and this effectively seals Caroline's fate. In her opinion, this intimation that a courtship is in the works between Shirley and Robert confirms her path towards a long, slow death as a spinster in her uncle's house. 20

¹⁸Gubar points to the cause of Caroline's ailment: "Far from being merely love-sick, Caroline is discontent. Her illness is a result of her misery at her own impotence" ("The Genesis of Hunger, According to Shirley," p. 15).

Caroline experiences a rapid decline as a result. Whereas she had previously been ill, and thought to be fatally so by some, now it is evident that there is undeniably cause for alarm. Everyone notices a change in Caroline's appearance after Moore treats her coldly and Helstone refuses her appeal to obtain a private situation, and most go so far as to say she will die. But Caroline has remained optimistic:

She never thought so herself; she felt in no dying case; she had neither pain nor sickness. Her appetite was diminished; she knew the reason; it was because she wept so much at night; sleep was coy and hard to be won; dreams were distressing and baleful. In the far future she still seemed to anticipate a time when this passage of misery should be got over, and when she should once more be calm, though perhaps never again happy. (p. 206)

Caroline now entertains no such hopes. Mrs. Pryor anxiously nurses her, yet she shows no improvement whatsoever. Caroline "wasted like any snow-wreath in thaw; she faded like any flower in drought" (p. 401). Even Shirley, who is generally free from morbid reflections, is frightened by the vision on Caroline's sick-bed. She petitions Helstone to seek professional advice, but the doctor summoned merely makes some mystical proclamation, to the effect that only time will tell, and advises medicines and the like, instilling those present with a sense of his infallible expertise, but probably knowing "well enough he could do no good, but [not liking] to say so" (p. 402).

Only Mrs. Pryor recognizes that Caroline is suffering from some mental anguish, and Brontë suggests that it is through Mrs. Pryor's bountiful experience of subjugation that she is able to perceive the origin of the girl's ailment. Caroline's "quickly consummated debility puzzled all who witnessed it, except one; for that one alone reflected how liable is the undermined structure to sink in sudden ruin" (p. 402). Mrs. Pryor's horrific marriage and her situation with the tyrannical lady of the house to whose

children she was governess, render her exceptionally sensitive to Caroline's feelings of futility and despair: "But your mind, Caroline: your mind is crushed; your heart is almost broken: you have been so neglected, so repulsed, left so desolate" (p. 409).

Mrs. Pryor, determined to give Caroline a reason to live, reveals her true identity. She is right in believing that this will give no small measure of comfort to the girl, who rallies, stating that she should now like to recover. Caroline can now realistically envision a close relationship, built on mutual affection, with another. However, Brontë also manages to bring Robert and Caroline together, to seal Caroline's affiliation with the living. Caroline's colour and vigour return, her melancholia dissipates, and she is "lifted on the wing of hope" (p. 557). Robert's decline, the result of a bullet wound, is found to be facilitated by the same brand of spiritual malaice that has afflicted Caroline: "I am hopelessly weak, and the state of my mind is inexpressible – dark, barren, impotent" (p. 542). Upon comparing their experiences, Robert and Caroline discover that they are both suffering from what they perceive as a hopeless situation in terms of unrequited love. Robert recovers swiftly upon learning of the possibility of a relationship, just as Caroline herself has.

But these two experiences are not as similar as they may appear. A potentially fatal wound catalyses Robert's infirmity and it is as difficult to believe that anything less catastrophic would have compelled him toward his fatalistic musings as it is to believe that his malaise would have continued, unconquered, had Caroline for some reason rejected him. He has his life and his work to compel him onward and it is difficult to conceive of Robert as one who could mourn forever, and eventually dwindle away as the

result of a thwarted attachment.¹⁸ Shortly thereafter they are married, leaving the reader uneasy as to the actual felicity this will bring, as well as pondering those swarms of single women to whom is yet consigned a life of oppression and banality.

Like the other characters in the novel, Shirley falls prey to debility. Since she is depicted as the very essence of cheerfulness and vivacity, this change seems an aberration, unnatural in one so habitually robust. Shirley goes on a walk with her cousins and in an interval of perhaps twenty minutes, her whole aspect changes, from one of profound contentment, to malaise. She concedes that she is a "little sick," but soon feigns the vigour of her customary self, and vehemently denies any manifestation of illness thereafter. Brontë alludes to nothing specific. Only there was a "new and peculiar shadow that lingered on her countenance and manner" (p. 466). Shirley's customary pride does not admit any disagreeable enquiries and yet it is obvious that she is failing. She thenceforth wastes, practising the art of denial proportionate to her dis-ease. It is obvious to the reader that it is Louis Moore who is the cause of much of her anxiety, and not the fear of hydrophobia possibly contracted from the dog-bite she suffers while out on her walk. Shirley's love for him and ambivalent feelings

Interestingly enough, Louis Moore becomes ill as well. At one point in the novel, he describes the grief he feels at being apart from Shirley in terms of his bed being comprised of thorns (p. 482), owing to which he spends many sleepless nights. When he contracts a fever, Brontë depicts him as "tossing on his thorny bed" (p. 450), which of course conjures up romantic images of the source of his malaise. However, there is the possibility that he has contracted a fever from one of the poor cottages in the district, and in any case, he rallies quickly: "Mr. Moore's good constitution quickly triumphed over his indisposition: in a few days he shook it off, and resumed his duties" (p. 453). Like Robert, he has a vocation and feels compelled to recuperate.

regarding the possibility of a marriage as well as the desirability of any marriage are the culprits which oppress her spirits. She is genuinely not well, but the causes are spiritual rather than otherwise. Fully cognizant of the fact that alliance with Louis necessarily means subjection, and to one who is socially and financially very much her inferior, Shirley's self-esteem rebels. Although she is not much swayed by visions of her own self-importance and the prestige attached to being mistress of Fieldhead, to relinquish her slight hold on what is an unusually autonomous existence is difficult. If she is to fulfill herself sexually, it will be at the expense of self-government. It is this particular agony that is at the core of her agitation. Since Shirley is such an independent and lively character otherwise, her illness provides a glaring contrast to her usual self, and elucidates her situation.

Mrs. Pryor has already discussed her illness in relation to her position as governess, in an effort to extinguish Caroline's longing to tread the same path. When she falls ill as a result of a solitary and joyless existence, the self-esteem that is denied expression is diagnosed as "wounded vanity" by her employer. Evidently even this austere and cruel woman is able to divine the foundations of her employee's despondency, if not the inherent injustice of Mrs. Pryor's position: "She hinted that if I did not make an effort to quell my 'ungodly discontent,' to cease 'murmuring against God's appointment,' and to cultivate the profound humility befitting my station, my mind would very likely 'go to pieces' on the rock that wrecked most of my sisterhood-morbid self-esteem-and that I should die an innate of a lunatic asylum" (pp. 363-4). Sadly enough, the lady of the house was uttering some truths in the midst of her invective, in describing the

possible fate of those who find themselves trapped in Mrs. Pryor's predicament and unable to adapt (her perceptions of the desirability of submission and self-respect excepted). Mrs. Pryor makes it obvious that only her escape from this situation (into a disastrous marriage from which she also flees) prevents her from sinking into permanent, if not terminal, convalescence: "Those languishing years would follow, of which none but the invalid and her immediate friends feel the heart-sickness and know the burden: consumption or decline would close the chapter. Such is the history of many a life; I would not have it yours" (p. 365).

None of the women who experience illness within the confines of this novel has any physical complaints which would predispose them in any way. In fact, they are all portrayed as possessed of strength, in terms of character and constitution, yet they all manifest the vague symptoms which characterize the condition of the neurasthene. They find no remedy in appealing to physicians and persist in ailing until some fortunate circumstance relieves their emotional stress (however superficially this is accomplished). Brontë makes an appeal, through the medium of Caroline's impassioned speech, to the consciences of those who would deny lifegiving activity and autonomy to women:

"God surely did not create us, and cause us to live with the sole end of wishing always to die. I believe in my heart we were intended to prize life and enjoy it, so long as we retain it. Existence never was originally meant to be that useless, blank, pale, slow-trailing thing it often becomes to many, and is becoming to me, among the rest." (p. 376)

But this indictment of Victorian values is not explicit enough for the obstinate Brontë. She points specifically to the patriarchs who appear tragically indifferent to what is going on around them: "Men of England, look

at your poor girls, many of them fading around you, dropping off in consumption or decline; or, what is worse, degenerating to sour old maids envious, backbiting, wretched, because life is a desert to them; or, what is worst of all, reduced to strive, by scarce modest coquetry and debasing artifice, to gain that position and consideration by marriage. which to celibacy is denied" (p. 378). Although Brontë is writing about a period which is somewhat removed from her present, it is clear that she perceives little, if anything, to have changed in the interim. 17 Brontë knew the pitfalls of governessing first-hand (her trials and negative experiences while engaged in this occupation are well documented in Gaskell's Life of Charlotte Brontë), as well as the constraints placed on women's behaviour as a result of the "overstocking" of the marriage market. In a letter to a friend she makes reference to an occasion when she mistook an unmarried man for a married one, with unpleasant results: "I know that if women wish to escape the stigma of husband-seeking, they must act and look like marble or clay cold, expressionless, bloodless; for every appearance of feeling, of joy, sorrow, friendliness, antipathy, admiration, disgust, are alike construed by the world into the attempt to hook a husband."18

¹⁷Roslyn Belkin describes the criminal neglect by the English male in the context of *Shirley* as well as Brontë's lifetime: "Even in Brontë's day, some forty years later [than the events of *Shirley* were supposed to take place], the 'fathers' had done nothing to improve the stultifying conditions of their daughters' lives. Women were still barred from the labour-market and the professions, and as Brontë (and her sisters) knew from bitter, first-hand experience, the only recourse that remained for a single, middle-class woman who had to earn her own living was the soul-destroying job of governess." See Roslyn Belkin, "Rejects of the Marketplace: Old Maids in Charlotte Brontë's *Shirley*," p. 65.

¹⁸Life of Charlotte Brontë, p. 229.

But for all of Brontë's denunciation of the limitations imposed on women, in the marketplace, the home, and in social intercourse, marriage is invoked as a balm that magically soothes the sting of "ungodly discontent." Even in the realm of meaningful labour, which Brontë relentlessly asserts must be allowed women, the author reveals herself as ambivalent, since she, herself, subordinated her writing to attending to her husband's comfort during her brief married life. Brontë does not appear convinced that marriage is not the culmination of a woman's life: "The unmarried woman, spinster or worker, is generally conceived either as a creature without an identity, an object of sarcasm or pity, or as a virtual and virtuous heroine who will later find fulfillment in marriage [as a model of self-abnegation]. Even with Charlotte Brontë work does not loom large in their lives." That is, work is something that enables one to get through one's humdrum existence in the interval between girlhood and wifehood, or else dulls the pains of those who are unfortunately unable to ensnare a man.

However, in explicitly outlining and examining the plight of many women, Brontë has achieved a triumph. The fact that Brontë's unusually keen faculties were unable to resolve the problem of "woman's place" indicates the enormity of the task: "The dichotomies of Brontë's fiction, like that of her contemporaries, constantly warn us that the complexities of women's roles and relationships cannot be summed up in a single statement." Brontë offers up no piecemeal solutions, in fact no solutions whatever except on the personal and individual level, but shapes

¹⁹ Relative Creatures, p. 270.

²⁰"Female Januses: Ambiguity and Ambivalence towards Marriage in Mid-Victorian Women's Fiction," p. 227.

her material in such a way as to articulate the problem, to "highlight the immorality of the affluent and powerful members of nineteenth-century England, who wilfully shut their eyes to the pain of the weak and powerless." As a champion of the latter, Brontë does justice to her cause.

^{21&}quot;Rejects of the Marketplace: Old Maids in Charlotte Brontë's Shirley," p. 66.

'Journeying through the wilderness of the present': Some Final Ruminations on the Fiction and Lives of Brontë and Gaskell

The Victorian male's growing uncertainty over his place in the world arose partly from the technological advances and changing class distinctions which were transforming the way in which men defined themselves. This uneasiness not only extended to women, but affected them especially strongly, a fact which is less commonly noted. Although men tended to agonize over self-definition during this period, it was women who had to grapple directly with their lack of independent identity. Even though the ideal of the "proper lady" was a kind of demarcation, it allowed for little autonomy. If their few privileges were jeopardized, middle— and upper-class women had even greater cause for bewilderment than did men.

This turmoil is expressed in the works previously discussed. The doubts and anxiety that typified the experience of Victorian women cannot be emphasized enough: "Indeed, the clearest characteristic of the mid-Victorian period was how few women of character fit the ideal lady." Elizabeth Gaskell and Charlotte Brontë drew attention to the inequities endured by women that were endemic in Victorian society's attitudes and practices, by presenting profiles of women of various means and rank whose essential circumstances created the same constraints, and who suffered from debilitating or fancied infirmities as a result of their limited sphere.

¹Suffer and Be Still, p. xi.

Several differences in their works can be attributed to the fact that, although Brontë and Gaskell were of the same social class and were close friends, they came from rather disparate backgrounds and were subject to vastly different experiences. Although married to a Unitarian minister and thereby subject to certain restrictions and expectations regarding her behavior, Elizabeth Gaskell appeared to enjoy a significant degree of independence. She seconded her husband in his work, not from a dry sense of duty, but rather as the natural extension of a benevolent and affectionate nature. 2 Gaskell's religious beliefs were serious enough to compel her to censure George Eliot's decision to live out of wedlock, but generally were manifested in a deep commitment to humanity, rather than a theoretical and highly constricting attention to scriptural detail. Far from spending a great deal of time at home, playing the part of minister's wife to the exclusion of all else, Mrs. Gaskell led an active life. The Rev. Gaskell spent his holidays away from his family, was busy with the many pursuits that derived from his occupation, and was generally sufficient unto himself: "Mrs. Gaskell was often away from home, and both she and her husband were given to journeying apart."3 Mrs. Gaskell thrust herself into the world, and experienced much that was denied by circumstance, and to some degree temperament, to Charlotte Brontë. When she was ailing in later life, it was difficult for Mrs. Gaskell to accept physical limitations, given her habitual animation:

²Arthur Pollard and J.A.V. Chapple, eds., *The Letters of Mrs. Gaskell*, (Manchester: Manchester University Press, 1966), p. xxii.

³Ibid, p. xiv.

It is this sense of her vitality, of life lived to the full, that in retrospect gives to the last letters much of their pathos. She was so tired. She who had done so much, who yet felt that within her there remained so much still to do, was moving swiftly to that sad day when literally in a moment she was cut off in the fullness of her powers.⁴

Conversely, it is a sense of stasis which characterizes Brontë's life, much of which was devoted to the querulous and decidedly selfish Rev. Brontë, whose caretaker Charlotte was to remain throughout her adult life. Charlotte's religious beliefs were greatly influenced both by Mr. Brontë, and by the deaths of all of her siblings, which left a sense of desolation which was to plague her until her own death. The self-sacrifice which Mr. Brontë demanded of his children⁶ and the depression resulting from a solitary and often joyless existence imbued Charlotte with a sense of fatalism that is echoed in her religious convictions. When Mrs. Gaskell, in conversation with Brontë, opined that people receive roughly the same lot in life, and that their variance lies not in degrees of happiness and sorrow but in how these are blended, Charlotte professed a very different view: "She smiled, and shook her head, and said she was trying to school herself against ever anticipating any pleasure; that it was better to be brave and submit faithfully; there was some good reason, which we should know in time, why sorrow and disappointment were to be the lot of some on earth. It was better to acknowledge this, and face out the truth in a religious faith." Charlotte looked to a future in Paradise rather than any kind of felicity on earth.

⁴Ibid., p. xxiii.

[°]Life of Charlotte Brontë, p. 35.

albid, p. 385.

In the meantime, her steadfast trust in patience and resignation, and her staunch refusal to allow hope, colored her fiction as surely as it did her life. In *Villette*, Lucy Snowe's constant ruminations on the subject of hope, and her ongoing battle to extinguish it from her life as a dangerous element, meant only for a certain elect, are identical in substance with Charlotte's stated convictions:

My mind... made for itself some imperious rules, prohibiting under deadly penalties all weak retrospect of happiness past; commanding a patient journeying through the wilderness of the present, enjoining a reliance on faith-a watching of the cloud and pillar which subdue while they guide, and awe while they illumine-hushing the impulse to fond idolatry, checking the longing out-look for a far-off promised land whose rivers are, perhaps, never to be reached save in dying dreams, whose sweet pastures are to be viewed but from the desolate and sepulchral summit of a Nebo.

Obviously the disparity between Gaskell's and Brontë's beliefs and experience would lead to different methods of treating the position of woman in their fiction. Gaskell, with her greater worldly experience, presented works that included a wider range and treatment of social classes. Her heroines are less cloistered and evince less despair than those of Charlotte Brontë. Although limited in terms of personal freedom and vocation, they feel less of the pervasive sense of hopelessness that characterizes the lives of many of Brontë's female characters. Brontë's heroines tend more to self-renunciation as a creed and several of them spend many chapters in what can only be termed a species of spiritual self-flagellation, a persistent injunction against expectations of any kind.

In Gaskell's work, illness serves to highlight the different life experiences of men and women, and the evils of such differentiation.

^{*}Villette, p. 330.

Although some women lose their very lives because of oppressive circumstances and expectations, Gaskell is less outspoken in indicting the practices and attitudes which condemn women to idle and ornamental lifestyles. The lesson is implicit, its extraction dependent upon a careful reading.

Charlotte Brontë takes no such chances. Lest the reader miss her point, Brontë explicitly rails against that which confines and proves ultimately fatal to many women. Many of her heroines contract illnesses which not only debilitate but even transform their personalities. In Jane Eyre, Villette, and Shirley, Brontë's heroines are forever marked by their bouts with illness. When Jane takes her leave of Rochester after declaring him a bigamist, and finds herself homeless, helpless, and desperate, she falls prey to the elements and her own psychic disturbances before finding respite with her cousins. Thereafter she becomes resigned to a lifetime of self-effacement and dry duty, although not to the degree St. John would like. Fortunately for Jane, there is relief from her cloistered existence in store as Brontë contrives to bring Rochester and Jane together in marriage at the close of the novel. Caroline Helstone, as previously mentioned, undergoes a dramatic change after discovering her prospects for the future and subsequently falling ill. Formerly cheerful and vital, she now schools herself in the doctrine of self-renunciation and becomes a sceptical, resigned, and shadowy figure. In Villette, Brontë outlines Lucy Snowe's experience in such a vivid and terrifying way that, although Brontë is less explicit here in pointing to the culpability of society than she is in Shirley, Lucy's tortured spirit deserves especial commentary.

When left alone during school holidays with a cretin and a servant,

the former serving as a nightmare double to Lucy, who is also unwanted and considers herself rather "freakish" as a result, Lucy succumbs to an intense bout of "fever" which even she recognises as inevitable, given her circumstances: "Indeed there was no way to keep well under the circumstances. At last a day and night of peculiarly agonizing depression were succeeded by physical illness." The intensity of her ruminations on her place in the world give rise to an appalling perception of her own insignificance and of how little she values life on earth. For Lucy, as for Brontë, the hereafter is the sole repository of happiness. After recovering from her "swoon," Lucy does not rejoice that she is spared; rather, she paints a depressing picture of what has actually transpired while she was unconscious:

I know she [the soul] re-entered her prison with pain, with reluctance, with a moan and a long shiver. The divorced mates, Spirit and Substance, were hard to reunite: they greeted each other, not in an embrace, but a racking sort of struggle. The returning sense of sight came upon me, red, as if it swam in blood; suspended hearing rushed back loud, like thunder; consciousness revived in fear.

Thereafter, Lucy chides herself severely every time she feels so much as a twinge of hope or gaiety. Her illness results from her discovery that her life of toil and dependence holds no prospect of improvement. Solitude and the leisure to reflect on this suffice to bring this realization violently to the forefront of Lucy's mind. Lucy, although not previously a particularly dynamic character, now becomes consciously committed to the belief that for certain human beings, including herself, happiness is out of

aVillette, p. 222.

⁹Ibid, p. 235.

reach, and therefore pleasurable feelings must be exorcized in order to prevent even greater dejection once they are revealed as illusory. Life consists of tedium, loneliness, and toil, and while that is effectively all that Lucy has ever known, the change in her is drastic as she now believes that there will be no relief in the temporal world.

The fatalism that Lucy embraces and the desperation that she experiences during and after her illness are spelled out with shocking clarity. However, Brontë does not trace Lucy's illness back to its source explicitly. Perhaps its vivid representation of inner turmoil took precedence over any overt criticism of Victorian society because Villette was written during "a time of unbearable loneliness and bitter depression, of recurring illness and nagging self-doubt." In any case, Brontë had presented her case in Shirley, which uneqivocally states her objections to Victorian patriarchal structures.

Although Gaskell and Brontë approached their fiction from differing standpoints and with distinct methods and styles, their positions as Victorian women writers enforced similar constraints on their material and mode of depicting the Victorian woman. No doubt this greatly influenced their dependence upon marriage as a convention with which to close a novel, and other contentious elements of their fiction. They appeared to vacillate on many subjects, especially the issue of the desirability of wedlock for the Victorian woman. However, as Shirley Foster has indicated, this is understandable given their situation: "Many critics argue that covert protest lurks beneath this apparent capitulation to convention, but it can

¹⁰ Ibid., p. xi.

the female novelists, themselves uncertain about their own responses towards the relative benefits of singlehood and matrimony, present in their work dualistic versions of female experience, both inside and outside sexual union, thus revealing their recognition of the complexity of woman's role in contemporary society... Because they are still explorers, contrast and ambiguity are the keynotes of their work."

Nevertheless, this constant investigation, this ability to exhume and expose the annihilating aspects of women's prescribed existence, serve to indict the patriarchal system and thus pave the way for a re-examination of the "woman question," and, it is hoped, for viable and fulfilling alternatives for living, breathing women.

[&]quot;Female Januses: Ambiguity and Ambivalence towards Marriage in Mid-Victorian Women's Fiction," p. 216.

WORKS CITED

Austen, Jane. Mansfield Park. Toronto: Signet Classics, 1964.
Basche, Francoise. Relative Creatures. New York: Schocken Books, 1974.
Beard, George M. Sexual Neurasthenia. New York: Arno Press, 1972.
Belkin, Roslyn. "Rejacts of the Marketplace: Old Maids in Charlotte Brontë' Shirley." International Journal of Women's Studies. Jan/Feb. 1980, pp. 50-66.
Brontë, Anne. Agnes Grey. London: Oxford University Press, 1967.
Brontë, Charlotte. Jane Eyre. London: Oxford University Press, 1973.
Shirley. Great Britain: Penguin Books, 1974.
Villette. Oxford: Clarendon Press, 1984.
Chapple, A. V. and Arthur Pollard, eds. <i>The Letters of Mrs. Gaskell</i> Manchester: Manchester University Press, 1966.
Cornillon, Susan Koppelman.,ed. Images of Women in Fiction: Feminist Perspectives. Ohio: Bowling Green University Popular Press, 1972.
Ehrenreich, Barbara, and Deirdre English. For Her Own Good: 150 Years of the Experts' Advice to Women. New York: Anchor Press, 1978.
Foster, Shirley. Victorian Women's Fiction: Marriage, Freedom and the Individual. London: Billing & Sons, 1985.
. "Female Januses: Ambiguity and Ambivalence towards Marriage in Mid- Victorian Women's Fiction." <i>International Journal of Women's Studies</i> May/June 1983, pp. 216-29.
Foucault, Michel. The History of Sexuality. New York: Vintage Books, 1980
Gaskell, Elizabeth. <i>Cranford</i> . Toronto: Copp Clark Ltd., 1853.
. The Life of Charlotte Brontë. London: Oxford University Press, 1919.
. Mary Barton. Edinburgh: Turnbull & Spears, 1906.
North and South. London: Oxford University Press, 1973.

- Gorham, Deborah. The Victorian Girl and the Feminine Ideal. London: Billing & Sons, 1982.
- Gorsky, Susan. "Old Maids and New Women: Alternatives to Marriage in Englishwomen's Novels." *Journal of Popular Culture*. Summer 1973, pp. 68-85.
- Gosling, F.G. Before Freud: Neurasthenia and the American Medical Community, 1870-1910. Urbana: University of Illinois Press, 1987.
- Gubar, Susan. "The Genesis of Hunger, According to Shirley." Feminist Studies. Spring/Summer 1976, pp. 5-21.
- Kleinman, Arthur. Social Origins of Distress and Disease. New Haven: Yale University Press, 1986.
- Langland, Elizabeth. "Nobody's Angels: Domestic Ideology and Middle-Class Women in the Victorian Novel." *PMLA* Vol. 107 No. 2, (1992), pp. 290-304.
- Myerson, Abraham. The Nervous Housewife. Boston: Little, Brown & Co., 1929.
- Nightingale, Florence. Cassandra. New York: Feminist Press, 1979.
- Showalter, Elaine. The Female Malady: Women, Madness, and English Culture, 1830 1980. New York: Penguin Books, 1985.
- Spacks, Patricia Meyer. "Taking Care: Some Women Novelists." Novel. Fall 1972, pp. 36-51.
- Vicinus, Martha (ed.). Suffer and Be Still: Women in the Victorian Age.
 Bloomington: Indiana University Press, 1972.

WORKS CONSULTED

- Chapple, A. V. and Arthur Pollard, eds. *The Letters of Mrs. Gaskell.*Manchester: Manchester University Press, 1966.
- Clarke, Isabel C. Haworth Parsonage: A Picture of the Brontë Family. London: Hutchinson & Co. Ltd., n.d.
- Digby, Ann. Madness, Morality and Medicine. London: Cambridge University Press, 1985.
- Duthie, Enid L. The Themes of Elizabeth Gaskell. London: MacMillan Press, 1980.
- Easson, Angus. Elizabeth Gaskell. London: Routledge & Kegan Paul, 1979.
- Feinstein, J. Becoming William James. Ithaca: Cornell University Press, 1984.
- Gaskell, Elizabeth. Sylvia's Lovers. London: J. M. Dent & Sons, 1966.
- Gilbert, Sandra M. and Susan Gubar. The Madwoman in the Attic: the Woman Writer and the Nineteenth-Century Literary Imagination. New Haven: Yale University Press, 1979.
- Gilman, Charlotte Perkins. The Yellow Wallpaper. New York: Pantheon Books, 1980.
- Levine, Philippa. Feminist Lives in Victorian England: Private Roles and Public Commitment. Cambridge: Basil Blackwell Ltd., 1990.
- Poovey, Mary. The Proper Lady and the Woman Writer: Ideology as Style in the Works of Mary Wollstonecraft, Mary Shelley, and Jane Austen. Chicago: University of Chicago Press, 1984.