“I Had Dreaded Worse. I Had Dreaded He Was Mad”: Reading the Intersections of Mental Illness and Masculinity in *Jane Eyre*

By

Avalon Warner-Gonzales

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Department of English and Comparative Literature
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Advised by Dr. Kimberly Stern
Introduction: Discourses of Madness and Mental Illness

Madness has long been an object of fascination in the cultural imagination, constituting the focal point of many works of literature, television, and film. One of the most famous examples of this trend is Charlotte Brontë’s *Jane Eyre*, the 1848 novel that gave us the infamous “madwoman in the attic,” Bertha Mason. As we see exemplified in Brontë’s representation of Bertha, the majority of works representing madness portray it in a negative light. “Madness” as an ideological framework is more overtly couched in cultural assumptions and deep-seated prejudices as compared to our current ideological framework in place of “mental illness,” which relies more on a neutral and clinical stance thanks to advances in neuroscience and psychology in the past century. The shift toward this ostensibly neutral and objective modern psychology has its roots in the nineteenth century, which acted as a transition into the period of advancements that took place in the twentieth century.¹ Thus, as a mid-nineteenth century novel, *Jane Eyre* straddles these two ages, and arguably displays examples of both madness and mental illness.

The most obvious example is Bertha Mason, whose character is entirely based on the conventions and discourses of “madness” from the preceding century. And, as much salient scholarship has indicated, these discourses of madness are inexorably entangled with those of gender, specifically those of femininity. As such, gender becomes another

¹ Despite our best intentions, we carry our prejudices with us, and so modern science and medicine are not free of culturally embedded beliefs. Much of this can be attributed to the field’s roots in madness, which was much more overtly rooted in sociocultural entanglements and was highly sensationalized.
critical lens for the investigations I conduct in this thesis. This brings us to the other side of the coin: that of mental illness. If Bertha Mason represents madness and its intersection with gender through the entanglement of femininity with madness, then our other subject, our main subject, must be her counterpart. For this thesis, I will argue that Edward Rochester can be read as mentally ill, and thus embodies a separate set of discourses as compared to those that influence Bertha’s character. Reading Rochester as mentally ill consequently forces us to consider similar implications that we do for Bertha – that is, how does gender, specifically masculinity, figure into this reading. So, by looking at Jane Eyre through an intersectional lens that takes into account the presence of discourses on mental illness and masculinity, we open ourselves up to a reappraisal of the novel’s treatment of gender politics, for gender politics are intrinsically in play when contrasting these characters.

Existing scholarship on Jane Eyre has primarily focused on femininity (particularly feminine sexuality), madness, and the relationship between the two as displayed through Bertha Mason, mostly commonly in connection to Jane. Bertha is commonly read as a manifestation of Jane’s repressed impulses, which are most frequently read as sexual but also encompass Jane’s rebellious tendencies. For Richard Chase, Bertha represents a possible version of Jane, one of two extremes (the other being St. John Rivers), who “represents the woman who has given herself blindly and uncompromisingly to the principle of sex and intellect.”¹ Helene Moglen, a feminist literary scholar, argues in Charlotte Brontë: The Self Conceived, a psychosexual study of

Charlotte Brontë and her novels, that Bertha functions “as a warning against the consequences of Jane’s desire for emotional release… in the horror of her presence, Berthe [sic] expresses Jane’s fear of marriage as violation… she is the menacing form of Jane’s resistance to male authority, her fear of that sexual surrender which will seal her complete dependence in passion.”\(^3\) Sandra Gilbert and Susan Gubar read Bertha not as Jane’s repressed sexuality but rather “her own imprisoned ‘hunger, rebellion, and rage.’”\(^4\)

These readings all assess Bertha allegorically in conjunction with Jane – Bertha and her madness are rarely taken at face value. Lennard J. Davis eloquently addresses the problem with reading Bertha (and other similar characters) as metaphor first and disabled woman second in *The Madwoman and the Blindman*, a collection of essays done in disability studies on *Jane Eyre*:

> The problem with metaphor and disability is that disability already involves looking away… Before we can leap to the metaphor, we need to know the object. Before we can interpret the semiotics of disability, we need to understand the subjectivity of being disabled. I want to make clear that I am not denigrating these identity-based readings, but I think they need to succeed, not precede, disability studies readings… I also do not want to imply that we can actually see disability as it is… What I am saying, however, is that we need to begin with disability in

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all its complexity as a socially constructed entity that exists, too, in an embodied form.  

A crucial point Davis hits upon here is that disability, whether physical or mental, is similarly a socially constructed identity that can be just as deeply explored as other identity-based readings, such as those relating to gender and race, and that disability is worth reading into and assessing in its own right. While other scholarship reading Bertha as Jane’s double certainly has value, there is still an under-tapped facet of her character we can access. And, if we can read Bertha with this lens, we can also apply it to other characters, and in this way we gain access to a new perspective on how *Jane Eyre* treats identity politics by examining where a disability studies lens intersects with other lenses.

For my purposes, it is critical to make the distinction between “madness,” “mental illness,” and the way these two terms have been constructed. Madness is an omnipresent, leering presence in the social imagination, not just in the nineteenth century but in the centuries preceding it. In his landmark text *Madness and Civilization*, Michel Foucault discusses the cultural construction of madness, specifically in Europe, proposing that madness was used as a tool to enforce existing structures of hierarchy and power. The use of confinement in the historical treatment of the mad is one of the most compelling themes that Foucault identifies:

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Confinement did seek to suppress madness, to eliminate from the social order a figure which did not find its place within it; the essence of confinement was not the exorcism of a danger. Confinement merely manifested what madness, in its essence, was: a manifestation of non-being; and by providing this manifestation, confinement thereby suppressed it, since it restored it to its truth as nothingness. For Foucault, confinement, like madness, is a tool to isolate those who do not conform to what society expects them to be. This “non-being,” an existence outside of social conventions, makes an individual dangerous to social hierarchy. Confinement was never a permanent solution for madness, and it was never meant to be. It was a convenient method of isolating undesirables from the rest of society and pretending that such deviations did not exist. However, over time there was eventually a shift in the ideological approach to madness, and confinement changed. Confinement at first conformed to a model of captivity epitomized in the sordid imagery of straitjackets and chains; but, around the turn of the nineteenth century, there was, as Elaine Showalter describes in *The Female Malady*, in which Showalter traces the phenomenon of feminine madness and treatment of women in psychiatric practices in England through the nineteenth and twentieth centuries, a “domestication” of insanity:

We can define this phenomenon in a variety of ways. In one sense, it involved a taming of the brutish lunatic, a reassimilation of madness into the spectrum of recognizably human experience. In another sense, it referred to Victorian efforts to bring madness into the circle of the familiar and the everyday, and to restructure the systems for its treatment in domestic terms. The public asylums

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were organized on the family model, with the resident medical superintendent and his wife (usually serving as the matron) playing the roles of father and mother, the attendants as elder brothers and sisters, and the patients as children.\textsuperscript{7}

The experience of confinement was tempered by the domestic framework, an attempt to adjust the experience of madness and confinement to a pre-existing social framework. Whether this was truly in order to better the experiences of mad patients during their confinement or to better reeducate and program the patients to better conform to societal expectations is debatable. Regardless, the nineteenth-century represented the beginnings of the move towards a sympathetic approach towards madness, which would eventually transform into psychiatric discourse we are more familiar with today.

Despite this more sympathetic approach, the sense of dread and fear that had long been targeted towards the mad remained a constant. Whether the mad were erratic and volatile individuals in need of confinement or misguided souls in need of carefully planned regimens, there remained a culturally ingrained fear of the unknown and the need to quarantine the perceived threat. As time has progressed, our terminology has shifted from “madness,” which calls to mind images of snarling and violent patients in insane asylums, to “mental illness.” Although there is still a strong stigma attached to being mentally ill, the way that we perceive and treat the mentally ill has significantly changed for the better with the rise of neuroscience and a corresponding attention to pharmaceutical and therapeutic treatments. Accordingly, while “madness” and “mental illness” have essentially occupied the same space in psychiatric dialogue and function in similar ways, in my thesis I will be using them in distinct ways. For the purposes of this

\textsuperscript{7} Elaine Showalter, \textit{The Female Malady} (New York: Pantheon Books, 1985), 28.
thesis, “madness” refers to the socially constructed perception of those who display socially unacceptable or abnormal behavior while “mental illness” will be used with the more modern clinical sensibility. Generally, “madness” and “mad” are much broader and more subjective terms than “mental illness” and “mentally ill,” and while the terms may be used closely in conjunction with one another, they are not interchangeable.

When it comes to Bertha Mason, it is understandable that the scholarship has focused on the contemporary discourse of madness as conceived in Victorian England. Her character is so deeply rooted in the conventions of the period that, unlike some of the other characters of the novel, Bertha cannot be read solely through a lens of mental illness or neurodivergence. There is no way to completely divorce her character from madness, regardless of which analytical lens is applied to her character. We can certainly argue that Bertha may also be mentally ill, but her mental illness is obscured by her madness and thus is difficult to parse out. To the narrative, Bertha being mad is much more significant than her being mentally ill because her madness also connotes her otherness and her inherent feminine irrationality as according to the nineteenth-century conceptions of hysteria in a way that mental illness does not similarly implicate.

However, I will be applying the discourse of mental illness with regards to another central character of the novel who, unlike Bertha, is not constrained by the narrative with the label of madness: Edward Rochester. While masculine madness was certainly a possibility in the Victorian context, as evidenced by other characters mentioned in *Jane Eyre*,⁸ Rochester himself remains out of reach of that taint despite his

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⁸ Namely Bertha Mason’s brothers, see Charlotte Brontë, *Jane Eyre* (Toronto: Broadview Press, 1999), Ch. XXVII, 396.
unusual behavior, which will be detailed at greater length in Chapter 2. However, through an interpretative lens of mental illness rather than madness, we can gain greater insight to Rochester’s character and examine how the relationship between masculinility, mental illness, and madness impact our reading of *Jane Eyre* and of other scholarship concerning madness and *Jane Eyre*. Understanding the historical context of madness is the first step to understanding the difference between it and mental illness as well as the difference in the perception and treatment of Bertha and Rochester as it leads us to the other major analytical lens of this thesis – that of gender, which is integral to understanding the construction of madness in the nineteenth century.

*Jane Eyre* takes place sometime at the cusp of the nineteenth century, which would have been in the midst of the shift in cultural approaches to madness just outlined. Charlotte Brontë would have lived through and, as I shall establish, been keenly aware of these developments. As I mentioned, despite the more sympathetic approach towards the “insane”, there was still an ingrained cultural fear of madness. Part of the Victorian obsession with madness was rooted in the possibility that madness could arise in anyone, regardless of age, gender, race, or socioeconomic class. As Sally Shuttleworth notes in her compelling study of Charlotte Brontë in the context of Victorian psychology, “All individuals (but particularly women) lived under the constant threat of mental derangement. Only the ever-vigilant maintenance of self-control demarcated the
boundaries of insanity.”

Policing one’s own health and behavior – and that of the afflicted – was thus essential to maintain a stable and “sane” domestic life.

In Victorian psychology and medical practice, and for the Brontës especially, the mind and body were intrinsically linked. Shuttleworth traces the impact psychology had on Charlotte back to her father, the Reverend Patrick Brontë. The Brontë children proved to be quite sickly, and throughout their lives they were plagued with various maladies until their respective untimely deaths. As a concerned father, Patrick Brontë was understandably interested in medical and psychiatric discourse and he spent hours poring over the texts in his personal library, his favorite being Thomas John Graham’s *Domestic Medicine*. In the margins of this work, he “records not only his family’s physical ailments and the remedies employed, but also his preoccupation with the threat of nervous disease and insanity.”

While the Brontë children had varying levels of trust or mistrust in medicine, they certainly would have grown up in a household inundated with contemporary medical teachings and discourse. And despite any misgivings the Brontës may have had about medical professionals, their family had repeatedly to rely on their expertise:

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10 Their illnesses were mostly physical ones, due to the combined of poor sanitary practices in Haworth as well as in Cowan Bridge School and a probable genetic component, but there is also evidence to justify the existence of mental conditions as well.

Every symptom, whether of mental or physical ill-health, was closely scrutinized... Virtually every page of the Graham is covered with annotations, noting the success of remedies, disputing interpretations, and recording alternative theories from other medical experts. All the ailments of the family are noted and explored: Anne’s consumption, Patrick’s eye problems and rupture, Branwell’s drinking, Emily’s dog-bite, and Charlotte’s tic douloureux.¹²

All of the Brontë children suffered from serious physical ailments, and due to the contemporary thinking concerning the link between physical and mental health, any physical sicknesses they may have contracted could indicate or lead to a corresponding mental decline. We can see this in Patrick’s concern with Charlotte’s tic douloureux and the correlations made between it and mental conditions: “In the case of [tic douloureux]… Patrick turns to other medical accounts which attributed the complaint less to physical than to mental causes, aligning it with hysteria and insanity. The words, he notes, signify a ‘convulsive fit.’”¹³ While there were explanations tailored to the physical aspects of tic douloureux, it is telling that the Reverend Brontë consulted texts that addressed potential mental causes as well.

The cultural anxiety surrounding madness was so great that even the smallest symptoms could be the first signs of impending doom, and the severe pain of a condition like Charlotte’s without any apparent cause would certainly have triggered that anxiety in Patrick. Later in her life, Charlotte internalized her father’s anxiety; in her

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¹² ibid., 27.

¹³ ibid., 27.
correspondence, we can see her preoccupation with her own health and her specifically linking her physical health with her mental health:

To speak truth I have put on but a poor time of it during this month past – I kept hoping to be better – but was at last obliged to have recourse to medical advice… I am well aware myself that extreme and continuous depression of spirits has had much to do with the origin of the illness – and I know a little cheerful society would do me more good than gallons of medicine.”

Charlotte’s preoccupation with both her physical and mental health demonstrates her belief that the two are linked; her physical decline is directly tied to her mental condition. Despite any misgivings she may have had about doctors and psychologists, her father’s influence obviously had a profound impact upon how Charlotte understood her own physicality as linking with her mental state, and we can see her fascination with this link manifest in all of her works.

However, Charlotte was not the Brontë child most at risk. In the pages of Patrick’s copy of Domestic Medicine, we can see which disorders especially concerned him, and many of them relate more closely to his son, Branwell. Branwell, the only Brontë son, was the golden child of the family in his childhood, the hope upon which the rest of the family pinned their future. However, much of Branwell’s adult life was plagued by his struggles with alcoholism and a gambling addiction, as well as depression induced by a disastrous affair with the wife of his employer. In Rebecca Fraser’s biography of the Brontë family, we can see that these depressive tendencies appeared to

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have been evident since his childhood. As a child, he was reportedly anxious, likely due to the deaths of his mother and sisters early in his life, but some of his eccentricities were explicitly attributed to physical causes: “There is… a rumour that Branwell had to be removed from Haworth Grammar School because of a nervous breakdown, and furthermore that this may have occurred because Branwell had been bitten by a mad dog and never had the wound cauterized.”\textsuperscript{15} While this anecdote cites a single originating event as the cause of Branwell’s instability in this particular incident, the general physical frailty of the Brontës would have been considered a contributing factor. Regardless, it evidences concern for Branwell’s mental health from an early age, to the point of his instability being obvious to those outside of the Brontë family. Much of this behavior was ignored, due to both his privileged position in the family and his innate charm: “Branwell was indeed considered destined for great things by his family, and not merely by his own estimation… It was evidently very hard to resist Branwell’s charm and brilliance. He was extremely precocious [,] boisterous, exuberant, and affectionate; above all, he made life fun.”\textsuperscript{16} It is difficult to attribute to a child, let alone an only son, the descriptors often associated with the mentally ill at this time: “lunatic,” “insane,” “mad.” But, as Branwell grew the family quickly discovered that he was not necessarily the man they had hoped he would become as he experienced a downward spiral and attempted to drown out his discontent with his own lack of success through drinking and, eventually, drug usage.\textsuperscript{17}


\textsuperscript{16} ibid., 57.

\textsuperscript{17} ibid., 91.
Patrick noted Branwell’s symptoms in his copy of *Domestic Medicine* and worked to diagnose and treat his son’s condition. One of his theories was that Branwell’s condition may have been hereditary, which he notes in *Domestic Medicine* under the section “Causes of Insanity.”\(^\text{18}\) For Patrick, this was a viable theory because he himself suffered from nervous complaints. Patrick Brontë’s concern that the hereditary factor lay with him rather than his late wife is an interesting one. Madness and insanity, Showalter proposes in *The Female Malady*, were most closely aligned with females and female heredity: “Brontë’s account echoes the beliefs of Victorian psychiatry about the transmission of madness: since the reproductive system was the source of mental illness in women, women were the prime carriers of madness, twice as likely to transmit as the fathers.”\(^\text{19}\) However, as Maria Brontë, Patrick’s wife, had been dead for many years and, while physically frail, never seemed to complain of the same nervous inclinations, Branwell’s mental disturbances seemed more likely, in the father’s view, to have come from himself. Patrick’s concerns reveal a fear of weakness in the patrilineal line rather than the matrilineal, which deviates from the predominant psychological narrative. This concern of weakness in the male members of the household counters the frequent feminization of madness, providing Charlotte Brontë with insight into the much less sensationalized phenomenon of male “madness.”

Charlotte Brontë’s family provided her with a unique set of circumstances and insights into not only madness but the emergent discourses that would become the discourses of mental illness. Her father’s meticulous accumulation of medical text and

\(^{18}\) Shuttleworth, *Charlotte Brontë and Victorian Psychology*, 32.

\(^{19}\) Showalter, *The Female Malady*, 67.
documentation of any conditions his family members developed, particularly those relating to Branwell, became Brontë’s background knowledge that she then drew upon for the portrayal of both the more classically “mad” Bertha Mason as well as the eccentric and unstable, yet not “mad,” Edward Rochester. The presence of both characters reveals a nuanced approach just as rooted in her familial history as it is in the popular, sensationalized portrayals of madness that inundated much of the literature of the period.

It is vital to begin any analysis of madness and mental illness in Jane Eyre with a close consideration of the “madwoman in the attic,” Bertha Mason. Understanding the Victorian construction of madness provides us the basis to see the holes filled by the lens of mental illness, and Bertha is the touchstone upon which madness in Jane Eyre should be analyzed. By considering how the conflicting discourses of madness and mental illness apply to this character, we can begin to see the limitations of reading the novel solely in terms of “female madness.” Once we have established these limitations, we can contrast Rochester with these conventions and apply a lens of mental illness in lieu of madness to see how that lens allows us to read additional complexity into his character. In the dual readings of madness and mental illness, Bertha and Rochester become foils for one another and in this contrast we thus complicate the gender politics of the novel. The reading of mental illness into what has been predominantly read as a narrative of female madness provides a space in which we can read examples of mental illness that are not exclusively the depictions of wild women confined in attics for years on end, and also permits us to see both the privileges afforded to men as well as the flaws in Victorian conceptions of who and what should be considered mentally unstable.
Chapter One: Diagnosing the Madwoman in the Attic

Bertha Mason is a character who has fascinated readers since the publication of *Jane Eyre* in 1848. Bertha is far from the first or only madwoman portrayed in fiction, but she is arguably the most famous and infamous one. Part of what makes her such an iconic figure is that she represents the most sensationalized aspects of madness. In *Jane Eyre*, Bertha is something less than – and yet sometimes more than – human. She is both an otherworldly monster and an animal, both vampire and hyena. She is the daughter of a wealthy family, but she is abandoned and shunned because of her madness. She is locked away in the sanctity of (what should have been) her own home. Bertha was such a terrifying figure that she haunted the nineteenth-century imagination much like she haunted the halls of Thornfield, both representing and shaping how madness was conceived in the period, and this imaginative impression remains with us today. She is a perfect case study for examining the relationship between women, femininity, and madness in the Victorian context – examining Bertha and the frameworks applied to her

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20 Brontë, *Jane Eyre*, Ch. XXV, 370, and Ch. XXVI, 381.

21 We can see echoes of Bertha’s confinement in other works such as Charlotte Perkins Gilman’s “The Yellow Wallpaper” in which the protagonist is also confined to an attic space. In “The Yellow Wallpaper”, the protagonist suffers from postpartum depression before her confinement, but her confinement aggravates her condition and ultimately destabilizes the protagonist. Arguably, a similar experience may have occurred with Bertha, but the reader is never given enough information to confirm that specific claim.
reveals to us that her constructed identities are inexorably linked due to the culturally
engrained associations between femininity and madness.

While men were certainly known to be susceptible to madness, women were largely deemed irrational, emotional volatile, and thus especially vulnerable. Elaine Showalter addresses this strong cultural tendency in her book The Female Malady, a volume that seeks to uncover the biases against women in historical psychiatric practices. In her chapter on the Victorian period, Showalter addresses the links made between irrationality, femininity, and madness. Showalter treats female insanity in two distinct ways, defining madness simultaneously “as one of the wrongs of woman” and “as the essential feminine nature [that unveils] itself before scientific male rationality.”

What Showalter describes is a familiar binary: a chaotic, irrational femininity versus a well-ordered and rational masculinity. The cultural shift made during the Enlightenment in the previous century, while before Brontë’s time, irrevocably changed the intellectual framework of Western society, and today we still feel the effects of that movement: if Western culture values a particular construction of rationality and scientific spirit, men are considered to be closer to that standard owing to this longstanding ideological binary. By contrast, women have been aligned with irrationality and mental instability.

One need only consider the prevalence of discourses on female hysteria in the nineteenth century to grasp how closely aligned femininity and discourses of madness were at the time. Hysteria is a condition that is representative of how “mad” women were

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22 Showalter, The Female Malady, 3.

23 This belief is an annoyingly persistent one, present even in current discourse in nearly all fields from politics to business to the medical field.
perceived and treated, the language used to discuss madwomen in general, and the emphasis placed on the connections between madness and the female body. Hysteria has a long and storied history in Western culture. It has its roots in Greek scholarship and is commonly attributed to Hippocrates. It originated as a diagnosis of the uterus (the womb) roaming the female body in an unnatural and disorderly fashion, thus leading to a range of irregular behaviors and female health concerns.\textsuperscript{24} By the nineteenth century, the medical community had outgrown the outlandish idea that the uterus was actually just floating about the body, but the link between the uterus (the most essentialist identifier of the female body) and female mental health persisted. By that point, hysteria was so well-established in the medical and cultural imagination that it became a catch-all diagnosis for women. In Foucault’s section on hysteria in \textit{Madness and Civilization}, he quotes Thomas Willis, a seventeenth century English doctor, who notes: “If a disease of unknown nature and hidden origin appears in a woman in such a manner that its cause escapes us... we immediately blame the bad influence of the uterus, which, for the most part, is not responsible, and when we are dealing with an inhabitual symptom, we declare that there is a trace of hysteria hidden beneath it all.”\textsuperscript{25} This frank assessment of the role of hysteria in medicine and psychiatry speaks to the long, silent history of misdiagnosing women’s bodies and minds. Appealing to the diagnosis of hysteria, medical practitioners suggested that the female body was to blame for woman’s lack of reason: female insanity


\textsuperscript{25} Qtd. in Michel Foucault, \textit{Madness and Civilization} (London: Routledge, 2000), 130.
was, in effect, written on the body.\textsuperscript{26} This assumption was not eradicated by the nineteenth century – female insanity was still considered to be something congenital.

While \textit{Jane Eyre} was written and published around the middle of the nineteenth century, the events of the novel are set at the dawn of the nineteenth.\textsuperscript{27} This period marked a shift in how the mad were perceived and treated - whereas “lunatics” were formerly considered as dangerous to themselves and others and thus confined, resulting in iconography such as the straitjacket and padded cells, the “insane” were instead recognized as sick people who, with the right and kind treatment, may be restored to their right minds.\textsuperscript{28} The plot of \textit{Jane Eyre} occurs right at the cusp of this change, which we can see in how Jane and Rochester approach Bertha’s madness. Rochester resorts to the traditional method of confinement as discussed in the introduction with regards to Foucault, which contrasts with Jane who represents the updated and more sympathetic views of the mad which we see in her defense Bertha against Rochester, calling her an

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\textsuperscript{26} Our current society still has not outgrown this: while we may have more sophisticated language to explain this belief (hormones, menstruation, menopause, estrogen, etc.), we have simply dressed up a long-held belief that a woman’s body has a stronger impact on her mental status than a man’s body does on his in order to explain away what is perceived to be irregular or improper behavior for a woman to be displaying.

\textsuperscript{27} Jane references the decorations of an inn that include “a portrait of George the Third, and another of the Prince of Wales, and a representation of the death of Wolfe” (Ch. XI, 160), which indicate the novel took place around the Regency era.

\textsuperscript{28} Showalter, \textit{The Female Malady}, 8.
“unfortunate lady” and reminding him that Bertha “cannot help being mad.”

Although Bertha does terrify her, Jane is still sympathetic to her plight and is disturbed by Rochester’s treatment of her. Jane’s language echoes that of Brontë herself in her correspondence: “It is true that profound pity ought to be the only sentiment elicited by the view of such degradation, and equally true is it that I have no sufficiently dwelt on that feeling; I have erred in making horror too predominant. Mrs. Rochester indeed lived a sinful life before she was insane, but sin is itself a species of insanity: the truly good behold and compassionate it as such.”

Despite Jane’s concern, her sympathy is dismissed by Rochester, who retains absolute control over the treatment of Bertha.

Bertha’s condition is clearly a holdover from the previous century, both in how she is depicted and how Rochester deals with her madness. Rochester’s attitude towards Bertha tends towards the antiquated and we can see these outdated beliefs reflected in the language Brontë uses to describe her and the circumstances in which we find her. Like Showalter’s descriptions of the eighteenth-century lunatic, Bertha is animalistic and savage, labeled as a “clothed hyena” and a “lunatic” by Jane during Rochester’s reveal of Bertha in confinement: “What it was, whether beast or human being, one could not, at first sight, tell: it grovelled, seemingly, on all fours; it snatched and growled like some strange wild animal…”

Even Jane, who pities and strives to sympathize with Bertha, is struck by the ferocity of Bertha in confinement. When Rochester relates his history with Bertha, he represents her as less than human and as vicious and uncontrollable, which is

29 Brontë, *Jane Eyre*, Ch. XXVII, 391.


reinforced by the dehumanizing language of referring to Bertha as “it” and being “like some strange wild animal.” And while her brother, Richard Mason, does appear in the novel, the narrative omits his account of Bertha’s character. Bertha’s voice is thus never incorporated into the novel. The only accounts we get of Bertha are Jane’s fear and sympathy, and Rochester’s hatred and disdain.

Rochester uses a specific set of claims to justify the labeling of Bertha as “mad” and these claims provide us with a view into eighteenth- and nineteenth-century conceptions of the roots of madness and into the nature of madness itself. The condition that most resonates with Rochester’s diagnosis of Bertha is a condition that was introduced into psychiatric terminology in 1835 by James Cowles Prichard called “moral insanity.” Moral insanity makes out madness to be “a morbid perversion of the natural feelings, affections, inclinations, temper, habits, moral dispositions, and natural impulses, without any remarkable disorder or defect of the intellect, or knowing and reasoning faculties, and particularly without any insane illusion or hallucination.”

Moral insanity “redefined madness, not as a loss of reason, but as a deviance from socially accepted behavior.” We know Brontë was aware of this condition and that it influenced her portrayal of Bertha as we see it reflected in some of her correspondence: “I agree… that the character is shocking, but I know that it is but too natural. There is a phase of insanity which may be called moral madness, in which all that is good of even human seems to

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33 Showalter, *The Female Malady*, 29.
disappear from the mind and a fiend-nature replaces it.”

Rochester describes the first four years of their marriage as a torment, and Bertha as someone whose nature is “wholly alien to [his], her tastes obnoxious [ ], her cast of mind common, low, narrow, and singularly incapable of being led to anything higher”, whose temper is “violent and unreasonable”, and who is “intemperate and unchaste.”

Rochester tells Jane that his “wife was mad – her excesses had prematurely developed the germs of insanity.” According to Rochester, Bertha was behaving in a manner unfit for the wife of someone of his station – indeed, in a manner unbecoming of any woman – and he cites that behavior as a contributing factor to Bertha’s eventual mental deterioration. This interpretation of her behavior correlates with Prichard’s moral insanity; both show that Bertha’s diagnosis is based upon her deviation from socially acceptable behaviors. And so, Rochester is then justified in his treatment of Bertha; after his attempted marriage to Jane, Rochester is faulted for trying to commit polygamy, but his imprisonment of Bertha is treated as a matter of practicality. Even Richard Mason, Bertha’s brother, is swayed by Rochester’s narrative after he is attacked by Bertha during his first trip to Thornfield:

“She’s done for me, I fear,” was the faint reply… “She bit me,” he murmured.

“She worried me like a tigress, when Rochester got the knife from her.”

“You should not have yielded: you should have grappled with her at once,” said Mr. Rochester.

34 Smith, The Letters of Charlotte Brontë, 3. To W. S. Williams, 4 January 1848.

35 Brontë, Jane Eyre, Ch. XXVII, 396-397.

36 ibid., Ch. XXVII, 397.
“But under such circumstances, what could one do?” returned Mason. “Oh, it was frightful!” he added, shuddering. “And I did not expect it: she looked so quiet at first.”

Like Jane, Richard Mason refers to Bertha as an animal, likening her to a “tigress” and describing how she bit him as if she were an animal. Before this encounter, he may have believed that there was some opportunity for redemption or treatment for Bertha – he did not expect her to behave the way she did, and she even “looked so quiet at first.” However, any hopes he may have harbored were quickly dashed by Bertha’s sudden assault, and all of Rochester’s assertions are validated. Richard Mason leaves Thornfield after that visit completely disinclined to release his sister.

After all, this is not the first time Richard has seen one of his family members imprisoned for madness. While moral insanity is key to understanding Bertha’s madness, there are also underlying hereditary causes. As I mentioned earlier, Rochester states that Bertha’s moral insanity “prematurely developed the germs of insanity,” which of course implies that the beginnings of insanity were always present in Bertha. Rochester reveals that Bertha’s mother was a “Creole, [] a madwoman and a drunkard” who had been put in a lunatic asylum, and states that “Bertha, like a dutiful child, copied her parent in both points.” Rochester, while completely disdainful of Bertha’s inclinations, attributes Bertha’s ultimate descent into madness to biological inheritance: “Bertha, the true

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37 ibid., Ch. XX, 293-294.

38 ibid., Ch. XXVII, 397.

39 ibid., Ch. XXVII, 379.
daughter of an infamous mother.” Biological factors were important to the diagnosis and treatment of madness, but what is especially key in Bertha’s case is that her madness is inherited down a matrilineal line. Showalter describes Bertha as a “victim of diseased maternal heredity” and tells us that “Brontë’s account echoes the beliefs of Victorian psychiatry about the transmission of madness: since the reproductive system was the source of mental illness in women, women were the prime carriers of madness, twice as likely to transmit it as were fathers.” As we saw with hysteria, associations are made between the female reproductive system and madness, this time through the act of reproduction itself. With this perspective, we can see that Bertha was doomed to madness one way or another, either through a betrayal of her biology or through her own poor behavior. In this context, Rochester’s narrative of Bertha is compelling. All of the other characters in the novel – including Jane, who is warier of Rochester’s treatment of Bertha than others seem to be – accept this narrative. Rochester’s authorial power thus remains unthreatened and is secured by Bertha’s eventual death. Her death ends all possibility of hearing Bertha’s story in her own voice, and all we are left with are accounts of her life that are dominated by lingering cultural fears of madness.

While the novel is mediated by Jane’s perspective as a narrator, we receive no accounts of Bertha that have not already been influenced by Rochester. There is a recursive relationship between Rochester’s narrative and that of Jane; because Jane’s narrative is told retrospectively, it is always already colored by Rochester’s influence, even at moments when Jane seems to be offering her own independent assessment of

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40 ibid., Ch. XXVII, 397.

41 Showalter, *The Female Malady*, 67.
events. There is only one incident in which Jane encounters Bertha independently of Rochester’s presence; however, that incident is one of the most haunting images we get of Bertha, and we do not witness Jane’s interaction with Bertha as it occurs – we witness it through her recounting her experience to Rochester. Jane’s descriptions of Bertha seem to escalate the longer she relates the tale to Rochester: Bertha transforms from a tall woman to someone with a “savage” face, and finally evolves into “the foul German spectre – the Vampyre.”\footnote{Brontë, \textit{Jane Eyre}, Ch. XXV, 371.} During this piece of dialogue, Jane is periodically prompted by Rochester to continue the story, and he conducts the pacing of her tale through his questions and interjections. Jane’s narrative becomes controlled by Rochester’s prompts, and they even reach a point in which Jane asks Rochester’s permission to continue her narration: “‘Shall I tell you of what it reminded me?’ ‘You may.’”\footnote{ibid., Ch. XXV, 371.} Even when Jane has had an independent interaction with Bertha, Rochester still maintains authorial control of the narrative that is put forth about Bertha. Jane’s impressions (and thus our impressions) of Bertha are primarily made within a framework put into place by Rochester. Bertha and her narrative are confined by the discourse of madness – there is no opportunity for the discourse of mental illness to be applied to her. She is confined physically and ideologically, and her character becomes entrenched in the conventions of madness and mad femininity.

Up until now, much of the scholarship on \textit{Jane Eyre} has uncritically accepted that Bertha Mason is mad, or that she is perhaps made “mad” by a repressive patriarchal presence. What the existing scholarship omits is an attention to how Bertha’s character is

\footnote{Brontë, \textit{Jane Eyre}, Ch. XXV, 371.}

\footnote{ibid., Ch. XXV, 371.}
deliberately constructed in terms of conflicting discourses on “madness.” By examining the representation of madness as seen in Bertha, we see that any discussion of madness is impossible without incorporating other constructed identities as Bertha is inextricably linked to madness through her identity as a woman. This linking of constructed identities then informs how we should consider Bertha’s foil: Edward Rochester. If mental instability in a woman is madness, then how do we account for mental instability in men who do not fit the definition of madness as it was conceived in the period? And how does mental instability complicate or affirm masculinity?
Chapter Two: “He Is Not of Their Kind”

As we have accounted for Bertha, madness, and femininity, now we must account for the foil – Rochester, mental illness, and masculinity. By the novel’s account, Bertha is mad – by the same account, Rochester is presented as merely eccentric. However, his behavior forays beyond simple eccentricity. His frequent mood swings, his tendency to sudden dramatic action, his wildly fantastical language – these all compound together to form the outline of a man who deviates from what we expect of a neurotypical man. While the narrative excuses Rochester of madness, reading him with the lens of mental illness permits us similar access to his behaviors without the same cultural implications that accompany that of madness, particularly those that pertain to gender.

Jane spends most of the novel pondering Rochester’s unusual behavior, and even though his eccentricities eventually become attractive rather than repulsive to Jane, she still goes out of her way to remark upon them. Jane is off-put by his ever-shifting moods, as well as his fanciful observations about Jane herself. Jane struggles to pinpoint Rochester’s character, which is reflected in Jane’s first impression of Rochester in a conversation with Mrs. Fairfax:

“Is he liked for himself?”

“I have no cause to do otherwise than like him; and I believe he is considered a just and liberal landlord by his tenants: but he has never lived much amongst them.”

“But has he no peculiarities? What, in short, is his character?”

“Oh! his character is unimpeachable, I suppose. He is rather peculiar, perhaps []”

…
“In what way is he peculiar?”

“I don’t know – it is not easy to describe – nothing striking, but you feel it when he speaks to you; you cannot be always sure whether he is in jest or earnest, whether he is pleased or the contrary; you don’t thoroughly understand him, in short – at least, I don’t: but it is of no consequence, he is a very good master.”

This conversation gives us our first glimpse into Rochester’s character and informs the reader that Rochester is erratic, unpredictable, and itinerant, spending most of his time abroad rather than staying in England. While Mrs. Fairfax cannot put a name to it, there is something near tangibly different about him, so much so that “you feel it when he speaks to you.” He is mercurial to the extreme, and that capriciousness works to obscure any of his true emotions or intentions. And, despite Mrs. Fairfax’s testimony, Rochester’s character is not “impeachable,” as evidenced by the existence of his bastard child. However, despite any flaws or idiosyncrasies, he is well liked by Mrs. Fairfax and the other tenants of Thornfield because he fulfills his role as a gentleman and landlord well. To Mrs. Fairfax, Rochester is “a gentleman, a landed proprietor—nothing more.” His peculiarity has not, up to this point, inhibited his ability to perform his duties as the master of Thornfield.

And so, his aberrant behavior is chalked up to eccentricity, and is regarded as something to simply be tolerated, which we see indicated by Mrs. Fairfax in a discussion with Jane after Jane and Rochester’s first formal interaction at Thornfield:

“You said Mr. Rochester was not strikingly peculiar, Mrs. Fairfax.”

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“Well, is he?”

“I think so: he is very changeful and abrupt.”

“True: no doubt he may appear so to a stranger, but I am so accustomed to his manner, I never think of it; and then, if he has peculiarities of temper, allowance should be made.”

“Why?”

“Partly because it is his nature – and we can none of us help our nature; and partly because he has painful thoughts, no doubt, to harass him, and make his spirits unequal.”*46

Just as Jane said Bertha “cannot help being mad,” Mrs. Fairfax states that Rochester cannot help his nature.47 Both Jane and Mrs. Fairfax utilize this phrasing to indicate that some degree of leniency should be taken because, contrasting with Prichard’s argument in his case for moral insanity, Bertha and Rochester cannot help being how they are—however, whereas Bertha was condemned for madness being her nature, Rochester’s own instabilities are pardoned.

However, Rochester’s “peculiarities of temper” are not solely attributed to his nature. Mrs. Fairfax goes on to relate the deaths of Rochester’s father and brother and his tense relationships with them both, and attributes Rochester’s avoidance of Thornfield to this fraught family history that gives him “painful thoughts.” Of course, we know that the more likely reason is Bertha’s presence, but that does not become apparent to the other characters of the novel or a first-time reader until much later. Regardless, Rochester is

*46 Brontë, Jane Eyre, Ch. XIII, 198.

47 ibid., Ch. XXVII, 391.
afforded more leniency with regard to his behavior than we previously saw with our examination of Bertha in Chapter 1. On one hand, as previously discussed, Bertha’s condition is partly attributed to a congenital weakness she inherited from her mother – her nature – and thus her fate was unavoidable. On the other hand, Rochester echoes the language of moral insanity, in which one’s morally reprehensible actions may induce madness or aggravate pre-existing seeds of madness. Regardless, Bertha is condemned for her “nature” while Rochester is granted clemency. Whether this is due to differing presentations of their respective hypothetical conditions or other factors is up to debate, but the result is the same regardless: Rochester’s behavior is permissible in the eyes of the other characters of the novels.

Mrs. Fairfax’s tolerance rubs off on Jane, and she takes his eccentricities in stride. Soon after the first conversation between Jane and Rochester in Thornfield, she witnesses his characteristic mood swings: “All my acquaintance with him was confined to an occasional rencontre in the hall, on the stairs, or in the gallery, when he would sometimes pass me haughtily and coldly, just acknowledging my presence by a distant nod or a cool glance, and sometimes bow and smile with gentlemanlike affability.” The earliest impressions we have of Rochester, before Jane’s blossoming affection for him and the beginnings of their romance, make Rochester out to be a man of inconsistent mood and attitude, targeted not towards Jane in particular but towards the household as a whole. His mood is so subject to change that within the span of a day he will swing back forth, albeit at a lesser degree:

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48 These factors being socioeconomic status, race, gender, etc.

Mr. Rochester [] looked different to what I had seen him look before; not quite so stern – much less gloomy. There was a smile on his lips, and his eyes sparkled, whether with wine or not, I am not sure; but I think it very probable. He was, in short, in his after-dinner mood; more expanded and genial, and also more self-indulgent than the frigid and rigid temper of the morning; still he looked preciously grim.50

This part of Jane’s acquaintance with Rochester reveals Rochester’s tendency towards melancholy, which could be characteristic of any number of conditions aside from bipolar disorder; however, there is also an emphasis on the capriciousness of Rochester’s mood, and later portions of the novel illustrate Rochester’s manic tendencies. But before the reader is exposed to Rochester’s more outlandish and questionable behaviors, we are conditioned to accept his peculiarities by Jane and Mrs. Fairfax. During this first series of interactions, Jane states, “[Rochester’s] changes of mood did not offend me, because I saw that I had nothing to do with their alteration; the ebb and flow depended on causes quite disconnected with me.”51 Like Mrs. Fairfax, Jane comes to view Rochester’s mood swings as a simple part of his nature; his mood swings are like the ebb and flow of the tides – just as natural and inevitable. She has become more tolerant of this behavior once it becomes normalized for her. After all, these mood swings are relatively mild; Jane considers them perplexing, but she has not caused them, they do her no harm, and they seem to be more of a nuisance than anything else. Like Mrs. Fairfax, Jane attributes Rochester’s moody behavior to outside causes:

50 Ibid., Ch. XIV, 202.

51 Ibid., Ch. XIV, 200.
He was moody, too; unaccountably so; I more than once, when sent for to read to him, found him sitting in his library alone, with his head bent on his folded arms; and, when he looked up, a morose, almost a malignant, scowl blackened his features. But I believed that his moodiness, his harshness, and his former faults or morality… had their source in some cruel cross of fate.\(^5^2\)

Rochester is excused of his behavior based on the presumption that he has suffered a great tragedy, an account that is eventually justified in the narrative by Bertha’s grand reveal. His behavior is reasonable and permissible rather than irrational and a sign of something more sinister. It helps that, at least within the period of time covered in the novel, the household is primarily subjected to Rochester’s manic moods, but his manic state renders him more “genial,” as Jane previously described him, and is not as easily recognizable as aberrant behavior by the other characters.

Although the residents of Thornfield accept Rochester’s idiosyncrasies, his behavior is symptomatic of manic tendencies. In contemporary literature, bipolar disorder is characterized by episodic oscillation between mania and depression, with mania being the characteristic that distinguishes bipolar disorder from depressive disorders. Mania is generally described as accelerated and heightened thought processes that are reflected in hyperactive behavior. Mania is often characterized by “mood disturbance,” typically resulting in irritability or an elevated mood. An episode will start off with elevated mood and decline into irritability as time progresses, but there are likely swings between the two present throughout the manic episode. During a manic episode, an individual is likely to be more sociable but may express impaired social behavior, such as “inattention to

\(^{5^2}\) ibid., Ch. XV, 220.
social cues, inappropriate familiarity with strangers, overconfidence in abilities or opinions, and inability to allow other to speak in the conversation." There is also a distinction to be made between mania and a milder manifestation of mania, which is referred to as hypomania. An individual with bipolar disorder will display elevated mood and hyperactivity in hypomania, but will not express any of the psychotic features that are sometime present in mania.

Certainly, it would be anachronistic to diagnose Rochester as “bipolar,” since these categories did not emerge until well after the novel’s publication. I offer this framework, however, as a useful way of organizing some of the discourses surrounding “mania” that were still nascent in the nineteenth century. While English psychiatric literature of the Victorian period lacked this neatly parceled term and definition, there was certainly at least an awareness of such a condition, both in psychiatric work being produced elsewhere during the same period as well as in older work. One of the earliest scholars that can be traced in the historical discourse of what would come to be known as bipolar disorder is Aretaeus of Cappadocia, who lived in Alexandria around first century or second century CE. Aretaeus described the possibility people having both “mania” and “melancholia” that manifest at different times. Muslim scholars Ishaq Ibn Imran, who

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54 Ibid.

55 Melancholia having the closest parallel in what we understand as clinical depression, and mania being largely the same as is defined today.
lived in the tenth century, and Avicenna, who lived around the turn of the eleventh century, placed mania and melancholia on a spectrum and believed that they would flow from one into the other. In the more modern Western tradition, many credit the beginnings of our current understanding of bipolar disorder to French physician and psychiatrist Jean-Pierre Falret (1794-1870) who lectured on and published about a condition he refers to as *la folie circulaire* (circular insanity). Another French psychiatrist, Jules Baillarger, also describes a similar condition that he refers to as *folie à double forme* (dual-form insanity).

Falret and Baillarger published their major essays and lectures on the subject in the 1850s, but Falret reported having taught lectures on circular insanity at the Pitié-Salpêtrière University Hospital for at least a decade before that, indicating an awareness within the medical and psychiatric fields of a condition akin to bipolar disorder well before Falret’s work was officially presented. Falret has since received most of the credit for developing the beginnings of the definition of bipolar disorder, and we can certainly see how much contemporary definitions echo Falret’s language:

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57 ibid.


By the term “circular insanity” we do not mean any of the illnesses we have so far described… In order to be called circular insanity, depression and excitement must succeed one another for a long time, usually for the whole of the patient’s life, and in a fashion very nearly regular, always in the same order, and with intervals of rationality, which are usually short compared with the lengths of the episodes. Circular insanity… varies in intensity and in duration as a whole and in each of its phases, whether it be among various patients or among various episodes in the same patient… Still, whether the course is slow or rapid, the tempo of the disorder does not alter its essential nature: the disease remains the same in its general features as well as in its principal details. 

Falret’s interpretations of circular insanity are narrower than our current understanding of bipolar disorder, which affords more flexibility and places patients on a spectrum of manifestations for this disorder. Still, Falret’s basic outline correlates neatly with the standard manifestation of bipolar disorder as we conceive of it today. Falret’s work articulated a definition for a condition that had been documented and observed but relegated beneath larger umbrella terms of exclusive mania or melancholia for centuries, and his work still makes it mark on work being produced today. Seeing how closely modern literature on bipolar disorder still parallels Falret’s work reinforces the relevance of the analytical lens of mental illness; while the discourse of madness was the predominant language of the period, we can see the emergence of the new approach that would evolve into our approaches to mental illness.

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60 Ibid., 1130.
Rochester displays manic behavior several times throughout the narrative. One of Rochester’s most notable manic episodes occurs while the Ingrams and other guests are staying at Thornfield. This portion of the novel presents Rochester at his most sociable in what I would argue qualifies as a state of hypomania. The reader is thus presented with a new perspective on Rochester previously unseen by Jane: “Mr. Rochester and – because closely connected with him – Miss Ingram were the life and soul of the party. If he was absent from the room an hour, a perceptible dullness seemed to steal over the spirits of his guests; and his re-entrance was sure to give a fresh impulse to the vivacity of the conversation.”

Jane and other characters in the novel simply consider Rochester to be vivacious and (what is perhaps most surprising of all) an eligible bachelor. While he has had several genial and even flirtatious moments with Jane up to this portion of the novel, he has not previously appeared as a sociable gentleman. This portion of the novel marks a decisive shift in Rochester’s moods and behaviors as he transitions from the moody and antisocial (yet surprisingly endearing, at least to Jane) landlord to the vivacious gentleman bachelor Jane is confronted with in these chapters. Falret makes note of this phase within a manic episode in one of his lectures:

In general, [the manic state] is characterized by simple exaltation of thought and feeling, which at first is recognized merely as a happy moment when the spirits are high, where everything seems easy, and it feels natural to be always smiling. At this point, the patient presents only an abundance of activity in all faculties; he appears to be changed for the better, to the astonishment of those around him.  

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62 Falret, “Memoir on Circular Insanity”, 1130.
This is the Edward Rochester who we can imagine traveling through the Continent and having affairs with beautiful French performers. This Rochester is much more charming and fun to be around than the melancholic Rochester, and this is the Rochester who has so bewitched his house guests and become “the life and soul of the party,” as Jane notes. Unlike the guests, Jane is perturbed by this new Rochester because she resents his popularity (especially with Blanche Ingram). Perhaps more importantly, she feels that this version of Rochester is more façade than truth and that only she is able to understand and appreciate him in his entirety:

“He is not to them what he is to me,” I thought: “he is not of their kind. I believe he is of mine; - I am sure he is – I feel akin to him – I understand the language of his countenance and movements: though rank and wealth sever us widely, I have something in my brain and heart, in my blood and nerves, that assimilates me mentally to him.”

Unlike Rochester’s guests, who are only exposed to this sociable bachelor, Jane has seen his moodier – his melancholic and depressive – state, and has a more holistic grasp on Rochester’s personality because of it. She feels that she has witnessed more facets beyond the genial attitude he presents to his house guests, and she finds that she identifies more closely with the eccentric and moody man she first encountered. She is at first as charmed by this congenial personality as Rochester’s guests are but, as time passes, she finds herself more and more off-put by this “new” Rochester.

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As the narrative progresses, Rochester begins to escalate. He moves from affable, sociable host and eligible bachelor to an excitable state that increases in intensity as the novel progresses. Falret describes this escalation of the manic state:

Progressively and rapidly the condition worsens: the profusion of ideas and prodigious, the feelings are exalted… their movements are rapid and unceasing. It is at this point that, if the patients are left to themselves, they… become mischievous, malicious, and play all sorts of tricks, make plans which they impulsively carry out… This prodigious activity, flowing forth in all directions, is present at night as well as during the day time… The patient happily withstands without the slightest fatigue all the activity and excesses he has indulged in. The face is flushed, the eyes are bright and animated, the countenance is quite labile, and the sense acquire considerable acuity.\(^{64}\)

The most significant portion of this passage concerns the escalation of activity – an individual increases their activity, but the scale of their activity also changes from smaller interactions to larger events. As the escalation occurs the lines between vivacious, hypomanic, and manic can be difficult to spot. For Rochester, it begins with his game of charades – really a series of small, elaborate scenes – with his guests. Rochester and his guests act out exotic, foreign scenes that eventually culminate in Rochester portraying the word “Bridewell” by acting as an imprisoned man.\(^{65}\) While this may be innocuous for

\(^{64}\) Falret, “Memoir on Circular Insanity”, 1130.

\(^{65}\) Brontë, Jane Eyre, Ch. XVIII, 261-263. Rochester playing the part of a confined man is certainly ironic and significant when put in context of him imprisoning his own wife,
most of the characters, this game foreshadows Rochester’s next step in his escalation.

Almost immediately following this scene, Rochester leaves Thornfield and returns in one of the oddest episodes of the novel – his acting out the role of a Romani woman. In this disguise, Rochester appears at Thornfield to tell fortunes and prank his guests and Jane:

Mr. Rochester stepped out of his disguise.

“How, sir, what a strange idea!”

“But well carried out, eh? Don’t you think so?”

“With the ladies you must have managed well.”

“But not with you?”

“You did not act the character of a gipsy with me.”

“What character did I act? My own?”

“No; some unaccountable one. In short, I believe you have been trying to draw me out – or in; you have been talking nonsense to make me talk nonsense. It is scarcely fair, sir.”

As Falret describes, Rochester’s energy is targeted towards tricks and pranks. Jane takes the incident in stride and plays down what a truly odd experience this was for everyone involved, but it is difficult to deny that this episode represents a shift in Rochester’s energy, which we see the consequences of as the novel progresses. While Jane eventually sees through Rochester’s disguise (a feat unaccomplished by any of the other guests) her remark that he has acted as “some unaccountable [character]” does indicate that

and it is also peculiarly loaded considering the history of confinement for the mentally unstable, regardless of gender.

66 ibid., Ch. XIX, 283.
Rochester’s current behavior has extended beyond the scope of his hypomania and has infringed into unknown and potentially dangerous territory. Because Rochester is not, however, discovered by the rest of the party (and Jane becomes quickly distracted by the appearance of Richard Mason) the episode is promptly dismissed. Rochester’s mania, up to this point, has primarily manifested as an elaborate performance – he acts the part of the Romani woman, of the gracious host, of the eligible bachelor. While this strikes Jane as odd, Rochester’s actions up to this point have been relatively harmless. However, while Rochester’s mania has escalated, he has yet to reach the peak of his manic episode, and his behavior continues to escalate.

It is after Rochester and Jane become engaged that Rochester’s mania approaches its peak, and it is in his interactions with Jane that we see his heightened mania. Depending on the individual and the extent of the mania, a manic individual can express psychotic traits at the height of a manic episode – the most common being delusions – which can be induced by preoccupation with religious, political, financial, or romantic thoughts. At the height of his manic episode, Rochester becomes engaged to Jane, and after their engagement is when he is at his most fanciful – fanciful to the point of delusional. His interactions with Jane are markedly odd and fervent, and Rochester persistently speaks of Jane using supernatural language and imagery. Jane and Rochester’s first encounter on the road to Thornfield, an interaction in which they part

without knowing who the other person was, features heavily in Rochester’s incipient delusions. During their second meeting in which they are at Thornfield after their run-in on the road, Rochester tells Jane that “when you came on me in Hay Lane last night, I thought unaccountably of fairy tales, and had half a mind to demand whether you had bewitched my horse: I am not sure yet.”68 He goes on to ask:

“And so you were waiting for your people when you sat on that stile?”

“For whom, sir?”

“For the men in green: it was a proper moonlight evening for them. Did I break through one of your rings, that you spread that damned ice on the causeway?”69

Even early on in their acquaintance, Rochester begins associating Jane with supernatural creatures. His associations echo language from early in the novel when Jane recalls her childhood, specifically during the episode in which she in confined in the attic of the Reeds’ home. She looks at her image in a mirror and sees a “strange little figure there gazing at me, with a white face and arms speckling the gloom, and glittering eyes of fear moving where all else was still, had the effect of a real spirit: I thought it like one of the tiny phantoms, half fairy, half imp.”70 Jane’s self-associations with the supernatural occur in the red room, which is frequently highlighted as the scene that echoes Bertha’s confinement in Thornfield; Bertha is similarly described by Jane using supernatural language (by referring to her as a vampire). For Jane, both her descriptions of Bertha and of herself are sinister, and these are both episodes of overwhelming fear. Rochester


69 ibid., Ch. XIII, 192.

70 ibid., Ch. II, 71-72.
uses similar language to describe Jane, but he uses it more positively (despite some of his word choices, they come across more fond than accusatory and fearful) and takes it to greater extremes. At various points throughout the novel, he refers to her as a “witch” and “sorceress”, an “elf”, a “fairy”, an “almost unearthly thing”, and attributes her with the gift of second sight.\footnote{ibid., Ch. XV, 222; Ch. XXII, 329; Ch. XXII, 330; Ch. XXIII, 339; Ch. XXII, 329.} Rochester continuously conflates Jane with supernatural creatures, and while the habit of pet names and inside jokes is not a worrisome one, his fantastical image of her does begin to bleed over and obscure his perception of reality.

The blurring of fantasy and reality begin innocently enough; in the wake of his engagement to Jane, Rochester appeals to supernatural language as terms of endearment:

“Jane, you look blooming, and smiling, and pretty,” said he: “truly pretty this morning. Is this my pale, little elf? Is this my mustard seed? This little sunny-faced girl with the dimpled cheek and rosy lips; the satin-smooth hazel hair, and the radiant hazel eyes?” (I had green eyes, reader; but you must excuse the mistake: for him they were new-dyed, I suppose.)\footnote{ibid., Ch. XXIV, 343.}

Jane has reminded the reader several times throughout the novel that she is a plain and unassuming in appearance, which we have also previously heard from Rochester. Jane has also been brutally honest with regards to Rochester’s appearance, which he too has acknowledged. However, at this point he begins to romanticize her in a way Jane is not accustomed to, once again using fantastic descriptors for Jane. The above passage deviates from their established pattern, but that is not too much cause for concern. After all, Rochester is a man freshly engaged to his beloved, and he is overcome with
excitement and joy. However, Jane’s last statement is more troubling – Rochester has mistaken the color of Jane’s eyes. Jane is quick to excuse him by saying that her eyes were “new-dyed” to Rochester, but this kind of mistake, one that Rochester makes so confidently, could be the beginnings of a delusional episode. Soon, Rochester’s fantasies about Jane quickly escalate, and his image of Jane continues to be obscured by the proverbial rose-colored glasses:

“Young Mrs. Rochester – Fairfax Rochester’s girl-bride.”

“It can never be, sir; it does not sound likely… to imagine such a lot befalling me is a fairy tale.”

“Which I can and will realise. I shall begin to-day… In a day or two I hope to pour [jewels] into your lap…”

“Oh, sir! – never rain jewels! … Jewels for Jane Eyre sounds unnatural and strange… Don’t address me as if I were a beauty; I am your plain, Quakerish governess.”

“You are a beauty in my eyes, and a beauty just after the desire of my heart… I will make the world acknowledge you a beauty, too,” he went on, while I really became uneasy at the strain he had adopted, because I felt he was either deluding himself or trying to delude me.73

By this point, Jane has grown uncomfortable with Rochester’s fervent praise. In her narration, Jane demonstrates a near brutal practicality and acceptance of her own shortcomings (or at least her perceived shortcomings), and is not overly inclined to romanticizing herself. This exchange goes far outside of Jane’s comfort zone as the

73 ibid., Ch. XXIV, 343-344.
scenario Rochester describes is beyond Jane’s scope of previous experiences, and deviates from her own grasp of herself and her self-image. Rochester’s fantasy differs too strongly from Jane’s reality, and it is in this dissonance that Jane recognizes the potential delusion. What Rochester is imagining is not Jane Eyre, but a Mrs. Edward Fairfax Rochester who does not truly exist.

Despite her doubts and protests, Rochester persists in his wildly romantic and fantastical imaginings of Jane. His fantasies culminate in a long passage in which he recounts his first encounter with Jane on the road to Adèle in which he has completely rewritten the event to sound like a fairytale.\textsuperscript{74} The entire passage is startling in how detailed Rochester’s fantasies have become by this point of the novel. Jane’s earlier concerns that Rochester might be delusional seem well justified in light of this passage. Jane is reduced to “a fairy [] come from Elf-land” whose “errand was to make [Rochester] happy.”\textsuperscript{75} In Rochester’s tale, Rochester and this elven Jane escape the earth to live together in solitude somewhere like the moon, and she becomes bound to him by a wedding ring. In light of Jane’s discomfort and worries about Rochester’s mental state, the passage is less charming and whimsical than it is deeply concerning. Even Adèle, who has repeatedly been described as a relatively empty-headed and shallow child due to her French heritage, does not believe Rochester’s fantasies. Jane remarks:

\begin{quote}
I told her not to mind his badinage; and she, on her part, evinced a fund of genuine French scepticism [sic]: denominating Mr. Rochester “un vrai menteur” [a real liar], and assuring him that she made no account whatever of his “Contes
\end{quote}

\textsuperscript{74} ibid., Ch. XXIV, 352-354.

\textsuperscript{75} ibid., Ch. XXIV, 353.
de fée” [fairy tales], and that “du reste, il n’y avait pas de fées, et quand même il y en avait:” [besides, there were no fairies, and even if there had been] she was sure they would never appear to him, nor ever give him rings, or offer to live with him in the moon.76

Whereas previously Jane seemed to be the only character to make any note of Rochester’s unusual behavior, this passage shows that Rochester has escalated to such a state that the other characters of the novel, previously willing to accept and overlook any abnormalities, have reached a point where they begin to actively take note of his unusual actions.

The manic tone to Rochester’s speech and actions persists through the thwarted wedding and up until Jane’s departure from Thornfield. His fantastic delusions take a back seat to his agitation after Bertha’s reveal, but he still displays a lack of impulse control when he proposes elopement to Jane:

“I have a place to repair to, which will be a secure sanctuary from hateful reminiscences, from unwelcome intrusion… You are to share my solitude. Do you understand?”

I shook my head: it required a degree of courage, excited as he was becoming, even to risk that mute sign of dissent. He had been waking fast about the room, and he stopped, as if suddenly rooted to one spot… He recommenced his walk, but soon again stopped, and this time just before me.

76 ibid., Ch. XXIV, 353-354.
“Jane! will you hear reason? . . . because, if you won’t, I’ll try violence.” His voice was hoarse; his look that of a man who is just about to burst an insufferable bond and plunge headlong into wild license.77

By this point, Rochester’s mania has reached its peak and he is at his most irrational. Rochester still believes that he is in control of himself, as evidenced by his appeal to Jane to hear “reason,” but this is really where we see the most explicit lapse in Rochester’s control. He threatens violence upon Jane and has the look of a “wild” man – this is language more reminiscent of the wild Bertha than of the Rochester we and Jane have come to know up to this point. This is not entirely the result of an internal process; Rochester has undergone two major stressors – marriage and the exposure of his darkest secret – that have wound him up to his breaking point. It is at this moment that Rochester’s narrative itself ruptures. Jane leaves Thornfield and Rochester is drastically altered when we next encounter him.

We do not see Rochester again until after Jane rejects St. John, and when Jane returns to Thornfield Rochester is a man much changed – at least, that is how he has traditionally been read. His new physical impairment, blindness and a missing hand, has been infamously read as a symbolic castration by Richard Chase, and subsequently other authors, that reduces his masculine power and thus makes him more accessible to Jane so that they may have an equal partnership founded upon mutual respect rather than the power imbalance that previously factored into the relationship. However, I would like to propose that this final portion of the novel may also show us Rochester in one of his depressive episodes that would sequentially follow his mania. Rochester is essentially

77 ibid., Ch. XXVII, 392-393.
unchanged by the end of the novel – or rather, he persists in his tendency to change between states of alternating mania and depression. In her reading of *Jane Eyre* through a lens of disability studies, Elizabeth J. Donaldson argues that Rochester, through his physical impairment, represents melancholia as a counterpart to Bertha’s raving madness:

> At her death, Bertha’s disabling mental illness is transferred to the body of her husband as physical impairment and blindness, which, in turn, are deployed by Brontë to depict melancholy madness. Paradoxically, Rochester’s blindness helps to make madness visible. Rochester, because of his blindness, invokes a notion of the inescapable predominance of interior vision, an interiority that threatens to separate the self from the exterior world, just as a severe mental illness might…

> Like an inmate in an asylum yard, Rochester’s folded arms, his mute gestures, and his inability to seek cover from the rain illustrate the self-neglect and social isolation associated with melancholy madness.  

Donaldson reads Rochester’s physical impairments as the transference and transmutation of madness from Bertha. However, Donaldson reads this manifestation of madness as dependent upon his physical impairment, rather than part of a longstanding pattern. She consequently reads Rochester’s madness as temporary: “Despite the continuity between Bertha’s raving madness and Rochester’s melancholy, Rochester’s impairments differ in significant ways. While Bertha’s madness is congenital and chronic, Rochester’s is “coincidental and curable.”

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79. Ibid., 25.
While I find much of Donaldson’s argument in her essay compelling, especially with regards to her analysis of Bertha Mason, I take issue with this particular point. For Donaldson, Rochester’s condition is curable, a point she argues through Rochester’s recovery of partial vision after his reunion with Jane. However, she overlooks his other impairment, that of his arm, which is perhaps the more grotesque, significant, and permanent impairment of the two. His disability is still openly written upon his body, despite his partially recovered eyesight. As I previously mentioned, his impairment – both of his vision and his arm – have traditionally been read as symbolic castration, most prominently by Richard Chase in his work on the Brontës.\textsuperscript{80} While I do not read his impairments as castration, it does serve as a corrective to reading the novel as a traditional romance. Even if Rochester will be improved by his life with Jane, as shown through his partially recovered vision, his severed limb acts as a permanent reminder of his mental illness. His mental illness has been brought – literally – to the surface.

While Rochester’s depression coincides with his maiming, I would argue that Rochester’s melancholy is not simply the byproduct of his impairments (not that this is an invalid reading as someone would likely be depressed after a traumatic event like the kind that results in the loss of limb and vision) but rather part of Rochester’s pre-existing manic-depressive cycle. As I previously mentioned, the Rochester Jane first meets is one who tends towards the melancholic and the moody. However, that Rochester is quickly

\textsuperscript{80} “Rochester's injuries are, I should think, a symbolic castration. The faculty of vision, the analysts have shown, is often identified in the unconscious with the energy of sex.” – Chase, “The Brontës: A Centennial Observance,” 495.
overtaken by the manic Rochester we see for a large portion of Jane’s time in Thornfield. Now we see the phase of depression that consequently follows the manic state:

The state of depression also develops by degrees, especially in circular insanity with long phases, but we do not deny that in certain exceptional cases the onset may be sudden. At the commencement of this phase… the patients begin to withdraw and now speak only rarely… Soon these symptoms become more severe; the patients withdraw, remaining all alone and motionless. If in their earlier state they were demanding, now they are meek, and their humility may go so far as for them to refuse treatment in the belief that they do not deserve it.  

It is difficult to say how suddenly or not suddenly Rochester’s depressive phase began but it is not unreasonable to assume that Jane’s departure may have prompted it, or at least hastened its onset. Surely his injuries would have exacerbated his depression. As Donaldson notes in her essay, Rochester has secluded himself and reverted to a taciturn state, withdrawing completely from society and from his duties. Again, his state of mind accords with Falret’s evaluation of the depressive state. With the reveal of Bertha Mason, Rochester was thrust into depression, the more obvious symptom of some form of mental instability, and Bertha’s death permanently brands evidence of Rochester’s mental instability onto his body. His physical impairment is a reminder that, just as he was unable to hide the shame of his mad wife, Rochester is unable to hide his own mental illness. Bertha, who represented the worst fears of the neurotypical population concerning the “mad”, exposes Rochester’s otherness and keeps it permanently exposed to all who see him.

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81 Falret, “Memoir on Circular Insanity,” 1131.
In scholarship on *Jane Eyre* up to now, the correlation between femininity and madness has been well documented, primarily in scholarship on Bertha Mason and on her relationship to Jane; however, by putting Rochester firmly in the discourse of madness and mental illness, we are put in a position in which we can document the relationship between masculinity and mental illness and contrast how that relationship compares with that between femininity and madness. In order to examine this relationship of mental illness and masculinity, we must examine not only Rochester but also other male characters of the novel in order to have a comprehensive understanding of different modes of masculinity present in the novel and how these masculinities interact with the character’s respective mental health. And – if *Jane Eyre* has been read up to this point as a novel in which the dynamic connection between Jane and the “madwoman in the attic” reflects a new and radical gender politics – then how does this economy of concerns change when we focus on a male subject?
Chapter Three: Manic Masculinities

Although Rochester is the main male figure of the novel, and thus is my primary focal point for the representation of masculinity and mental illness, *Jane Eyre* offers up several other male characters that represent other modes of masculinity. However, while these masculinities are distinct from Rochester’s, these male characters also diverge from the prescribed social model due to manic behaviors. These manic tendencies lead to these characters breaking the cardinal rule of Victorian masculinities – self-discipline – and result in the production of unique “manic” masculinities. By examining these manic masculinities, we can reassess the gender politics of the novel.

The Victorian period witnessed an entire range of masculinities that, so far from being natural or inborn, were carefully cultivated. In *Victorian Masculinities*, Herbert Sussman investigates the cultivation of masculinity and the guiding principles behind different schools of thought on how proper masculinity should be performed. Considering the wide spectrum of masculinities that manifested in the Victorian period, masculinity (or “manhood” as Sussman terms it) was volatile and unstable. There was no one right way to express masculinity, but there were certainly many wrong ways to go about it. As such, the proper expression of masculinity became a great cause of anxiety:

For nineteenth-century men, manhood was conceived as an unstable equilibrium of barely controlled energy that may collapse back into the inchoate flood or fire that limns the innate energy of maleness, into the gender-specific mental

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82 See John Tosh on domestic masculinity, and nineteenth century sources such as Thomas Carlyle, Robert Browning, and Walter Pater.
pathology that the Victorian saw as male hysteria or male madness. For the
Victorians *manhood is not an essence but a plot, a condition whose achievement*
*and whose maintenance forms a narrative over time.* 83 (italics mine)

Sussman hits an important point, which is that Victorian masculinity was highly
performative. 84 Masculinity, or “manhood,” was not considered to be an inherent trait,
but rather something that required careful construction and rigid maintenance.

Sussman suggests that self-discipline was the defining feature of normative
Victorian masculinities, and goes on to state that the degree of self-restraint is how we
can distinguish between different Victorian masculinities: “While psychic discipline
defines what the Victorians term manliness, if such discipline becomes too rigorous the
*extreme constraint of male desire will distort the male psyche and deform the very energy*
*that powers and empowers men* [emphasis mine]. Setting the intensity of discipline, then,
becomes the crucial issue within the practice of the self.” 85 While discipline was key to
performing Victorian masculinities, there was always the threat of too much self-
restraint, which could result in the “distortion” of male energy and cause just as much
damage to the psyche as the loose application of this masculine energy. As such, different
schools of thought debated the correct degree and methods of discipline, thus resulting in

83 Herbert Sussman, *Victorian Masculinities* (Cambridge: Cambridge University Press,

84 Which is not to say that other masculinities are not performative, because masculinity
and femininity are performative by nature, but rarely is a group willing to admit up front
the constructed nature of their presentations of their identities.

85 ibid., 3.
the spectrum of masculinities that Sussman investigates. He specifically links this preoccupation of masculine energy and the proper use of this energy to the middle-class Victorian man, who values “the ability to control male energy and to deploy this power not for sexual but for productive purposes.”86 The focus on bourgeois masculinities is particularly relevant to *Jane Eyre* as the men that I will be examining are of the broad category of the middle class – while actual wealth varies widely between these characters, they all fall roughly within the same socioeconomic class. As such, the value placed upon the appropriate expenditure of innate male energy (i.e. sexual vs. industrious) is pertinent to the discussion of masculinity in *Jane Eyre*.

While the differences between various modes of masculinity – like the debate over appropriate expenditure of masculine energy – are significant, the basic guiding principles for normative masculinities are the same. If one does not properly conduct themselves, they will not only fail in their duty as a man but also induce mental self-harm. Now, this discussion and some of the language Sussman uses should sound familiar; the emphasis on the important of strict maintenance of masculinity and the dire consequences of failure to maintain rigid self-control echoes the language used in the discussion of moral insanity, as previously discussed in Chapter 1. In moral insanity, a degree of blame and accountability is attributed to the mad individual as their insanity was considered to have resulted directly from their immoral behavior. Similarly, masculinity had to be strived for and perfected; if the man incorrectly performed masculinity, his failure could lead to mental deterioration. In this way, rationality,
stoicism, and moral conviction become the guiding principles for both proper masculinity and for proper mental health.

The practice of discipline and restraint, particularly emotional and sexual restraint, is generally where the male characters of *Jane Eyre* display their deviance from typical manifestations of masculinity. For example, Rochester is quite open about his affairs with various women across the years, including Adèle’s mother – Adèle herself is a physical reminder of Rochester’s lack of discipline and his sexual promiscuity, which Gilbert and Gubar address in their discussion of whether Jane and Rochester’s relationship is one of equals and whether Rochester’s sexual experience puts him at some kind of advantage over Jane: “Rochester has specific and “guilty” sexual knowledge… knowledge, that is, of the secret of sex, symbolized both by his doll-like daughter Adèle and by the locked doors of the third story behind which mad Bertha crouches like an animal”.

Now, according to the Victorian mindset this brazen lapse of judgment might have induced madness, just as Rochester argued Bertha’s substance abuse and unladylike behavior induced her madness – the association of Bertha with Rochester’s sexuality may support this reading. The unruly reveling in one’s own emotions could induce madness – or it could be the symptom of a pre-existing condition. The question becomes one of how mental illness complicates normative Victorian notions of masculinity, especially considering how the proper or improper performance of these masculinities were considered to impact mental health.

Rochester is the most prominent example of alternative masculinity, especially because the other characters of the novel specifically go out of their way to reinforce how

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differently he behaves in comparison to other men. Early in the novel, Mrs. Fairfax describes Rochester as “peculiar,” which Jane reinforces in her representation of Rochester in her narration and seems to be the running impression for the rest of the novel. This “peculiarity” is often conveyed through a juxtaposition of Rochester to the other men Jane encounters. Oftentimes these differences indicate some kind of deviation on Rochester’s part, albeit Jane tends to weigh in favorably with respect to Rochester’s difference. We can see Jane establishing Rochester’s difference in her first encounter with him:

I felt no fear of him, and but little shyness. Had he been a handsome, heroic-looking young gentleman, I should not have dared to stand thus questioning him against his will, and offering my services unasked. I had hardly ever seen a handsome youth; never in my life spoken to one. I had a theoretical reverence and homage for beauty, elegance, gallantry, fascination; but had I met those qualities incarnate in masculine shape, I should have known instinctively that they neither had nor could have sympathy with anything in me, and should have shunned them… if he had put off my offer of assistance gaily and with thanks, I should have gone on my way and not felt any vocation to renew inquiries: the frown, the roughness of the traveller, set me at ease.  

Jane explicitly places Rochester beyond how an ideal Victorian gentleman should appear and behave. While most would be enamored of the romanticized image of a young, handsome, and gallant gentleman, Rochester is older, rough-hewn, belligerent, and rude; however, rather than being off-put by his standoffish behavior and lack of genteel

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manners, Jane is relieved. Jane herself is a character who often strays from societal expectations of how she should behave, and values fairness and honesty over false courtesy. She also tends to portray herself in a pragmatic and uninflated manner: she is critical of her flaws, particularly her physical ones, and is quick to juxtapose herself with other women in the novel to showcase how she herself deviates from ideal femininity.

To Jane, she can interact with Rochester on more equal footing than she can with other people despite the power imbalance between them because they both deviate from standard behavior: “I sat down quite disembar- rassed. A reception of finished politeness would probably have confused me: I could not have returned or repaid it by answering

89 Rochester to Jane during their early acquaintance: “I mentally shake hands with you for your answer… and as much for the manner in which it was said, as for the substance of the speech; the manner was frank and sincere; one does not often see such a manner… Not three in three thousand raw school-girl governesses would have answered me as you have just done.” Ch. XIV, 206-207.

90 “I sometimes regretted I was not handsomer; I sometimes wished to have rosy cheeks, a straight nose, and small cherry mouth; I desired to be tall, stately, and finely developed in figure; I felt it a misfortune that I was so little, so pale, and had features so irregular and so marked.” Ch. XI, 165-166.

“I said… “To-morrow, place the glass before you, and draw in chalk your own picture, faithfully, without softening one defect; omit no harsh line, smooth away no displeasing irregularity; write under it, ‘Portrait of a Governess, disconnected, poor, and plain. Afterwards…delineate carefully the loveliest face you can imagine… call it ‘Blanche, an accomplished lady of rank.” Ch. XVI, 237-238.
grace and elegance on my part; but harsh caprice laid me under no obligation; on the contrary, a decent quiescence, under the freak of manner, gave me the advantage.”\textsuperscript{91} As Jane herself deviates from societal expectations, she is more at ease with Rochester’s similar deviancies and through her narration his behavior is normalized, which is the perspective we receive as readers. In comparison, the stereotypical Victorian English gentleman is rendered bizarre and hollow through Jane’s eyes. We can see this reflected not only in the passage above, in which she expressly states she “could not have sympathy” with an ideal gentleman, but also in her observation of more classic Victorian gentleman:

I compared him with his guests. What was the gallant grace of the Lynns, the languid elegance of Lord Ingram, – even the military distinction of Colonel Dent, contrasted with his look of native pith and genuine power? I had no sympathy in their appearance, their expression: yet I could imagine that most observers would call them attractive, handsome, imposing; while they would pronounce Mr. Rochester at once harsh-featured and melancholy-looking.\textsuperscript{92}

Jane is able to acknowledge the objectively attractive qualities of the other men present at Thornfield, but, when comparing them with Rochester, she contrasts their qualities with Rochester’s “native pith and genuine power,” implying that Rochester’s good qualities are natural in comparison to the implicitly disingenuous nature of the other men. In this way, Rochester is made out by Jane to be superior to these more common men, and his aberrations are justified, forgiven, and perhaps even lauded. His initial lack of social

\textsuperscript{91} ibid., Ch. XIII, 190.

\textsuperscript{92} ibid., Ch. XVII, 252-253.
grace is portrayed as a refreshing honesty. His social aptitude is eventually revealed to the reader during the extended stay of guests at Thornfield, but he retains enough of his forthrightness with Jane for us to still see that honesty shine through.

However, while this trait can be seen as admirable, it does not conform to normative middle-class Victorian masculinity. Rochester does not display the self-control Sussman ascribes to the spectrum of Victorian masculinities; he is prone to emotional outbursts and tends toward impulsive actions, which is more commonly characterized as feminine rather than masculine behavior. Indeed, at times Rochester’s deviation from the normative scripts of masculinity render him almost effeminate. One of the most obvious examples is the gypsy incident mentioned in Chapter 2, in which Rochester disguises himself as a Romani woman who has come to Thornfield to tell fortunes to the women present at the estate. This episode centers around Rochester essentially performing drag and explicitly adopting a form of femininity during what I argue is a manic episode. In this incident, Rochester is rendered as far from what he as a white, wealthy, English gentleman should represent. He is transformed, if only temporarily, into an impoverished woman of color, which is nearly as Other as he could get. His mania prompts him to adopt a persona that more would more “accurately” fit his behavior by Victorian standards. On one hand, we can interpret this event as an example of Rochester’s poor impulse control. On the other hand, this act is an impressive display of control, or at least of cultivation and manipulation; Rochester is able to adopt this persona so convincingly.

93 The only category he does not hit is that of sexuality, but even that could arguably be present if we interpret desire on Rochester’s end (as a Romani woman) into the scene.
that no one, not even Jane, recognizes him until he allows Jane to see him, and that kind of performance requires a tremendous amount of control.

However, I would argue that this incident, while indicative of Rochester’s skill at controlling and manipulating others, still represents a loss of self-control on his part, or at least the risk of it: “That will do. I think I rave in a kind of exquisite delirium… So far I have governed myself thoroughly. I have acted as I inwardly swore I would act; but further might try me beyond my strength… the play is played out.”

Rochester himself, while proud of his commitment to his role and the self-control required for him to have played it straight, recognizes the riskiness of such an activity as it has led him to a point where he feared losing his self-control. He becomes – to borrow a phrase Jane uses early in the novel – outside of himself.

Rochester is conscious enough to recognize that he has entered a head space that is, to an extent, no longer his true self. The performance threatens to become more than mere performance. It is significant that this risk of loss of self-control coincides with the adoption of the exoticized female identity and his surrounding himself with women while he has taken on that identity. The feminine, whether authentic or artificial, is closely associated with this moment of lost control.

The novel also implements a subtler form of feminizing Rochester through his physical impairment at the end of the novel. As previously mentioned in Chapter 2,

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94 ibid., Ch. XIX, 282.

95 “The fact is, I was a trifle beside myself; or rather out of myself, as the French would say.” Ch. II, 69.

96 It also comes uncomfortably close to his dirty not-so-little secret, Bertha Mason, who is herself a woman likely of mixed racial descent.
Rochester’s blinding and loss of his arm have traditionally been interpreted in the scholarship on *Jane Eyre* as a metaphorical castration. The “castration” is not successful in a traditional sense – Jane is still attracted to him in his “mutilated” state and they eventually conceive a child together – but it is effective enough that, in Richard Chase’s (in)famous interpretation, Rochester remains emasculated by Jane: “Rochester's injuries are, I should think, a symbolic castration… They settle down to a mild married life; they have a child; Rochester partly, but only partly, regains his eyesight. The tempo and energy of the universe can be quelled, we see, by a patient, practical woman.” By marrying Rochester on her own terms, Jane is interpreted as to have dominated Rochester and reasserted themselves as spiritual equals without masculine sexual drives getting in the way.

The other male characters of the novel who receive actual time and characterization, like Rochester, tend towards alternative manifestations of masculinity. There are men in the novel who in many respects conform to traditional masculinity, but the narrative dedicates almost no time to them. Instead, we are exposed to several examples of men who, in one form or another, seem to reflect echoes of Rochester’s “manic masculinity.” The first prominent male character the reader is introduced to is John Reed, Jane’s cousin and childhood tormentor. While we don’t learn much about John Reed beyond what an odious child he was, we are privy to certain details beyond his bullying of Jane that are certainly damning:

John no one thwarted, much less punished; though he twisted the necks of the pigeons, killed the little pea-chicks, se the dogs at the sheep, stripped the hothouse

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vines of their fruit, and broke the buds off the choicest plants in the conservatory: he called his mother “old girl,” too; sometimes reviled her for her dark skin, similar to his own; bluntly disregarded her wishes; not unfrequently tore and spoiled her silk attire; and he was still “her own darling.”98

We are presented with a laundry list of John’s deviant behaviors, the most worrisome being his tendency to kill and harass animals.99 Additionally, he resists his mother’s authority without apology, which ordinarily would incur at least some degree of parental wrath. However, by virtue of being his mother’s only son and heir to the Reed’s estate, he is granted leniency and privilege over his siblings and especially over Jane. Like Rochester, John’s status allows his friends and family to overlook his erratic behavior.

John’s moral failings as detailed above are reflected in his physical appearance:

[John was] large and stout for his age, with a dingy and unwholesome skin; thick lineaments in a spacious visage, heavy limbs and large extremities. He gorged himself habitually at table, which make him bilious, and gave him a dim and bleared eye and flabby cheeks. He ought now to have been at school; but his mama had taken him home for a month or two, “on account of his delicate health.”100

The spacious visage, heavy limbs, large extremities, and flabby cheeks all reflect John’s gluttony, which in turn reveals a lack of self-discipline as he is unwilling or unwilling to curb his physical appetites. His lack of discipline eventually escalates into addictions to

98 Brontë, Jane Eyre, Ch. II, 72.
99 One of the commonly cited first signs of psychopathy.
100 ibid., Ch. I, 66.
alcohol and gambling once he goes off to school, which in turn culminate in his early
death: “He ruined his health and his estate amongst the worst men and the worst women.
He got into debt and into jail: his mother helped him out twice, but as soon as he was free
he returned to his old companions and habits… How he died, God knows! – they say he
killed himself.”\textsuperscript{101} John Reed’s tale has several similarities to Bertha, but it perhaps more
closely echoes that of Branwell Brontë’s. Like Branwell, John is the only son on whom
the family has pinned their hopes and dreams, but once left on his own he spirals and
engages in self-destructive behaviors as the cost of his own health and happiness, and his
gambling addiction additionally damages his family’s resources. Both the above passage
and the previous reference John’s “delicate” and “ruined” health; chronic illness and
fragile health were often the hallmarks of the weak man, which John appears to transform
into due to his lack of self-control. Interestingly, John’s physical appearance resembles
the language used to describe Bertha Mason\textsuperscript{102} and, like Bertha, John Reed’s lack of self-
control and resulting self-destructive and morally repugnant behavior lead to his downfall
and eventually, it is suggested, his suicide. However, unlike Bertha, who is punished and
imprisoned for displaying improper behavior without any possibility of redemption, John
Reed is not punished by external forces. But, his likely suicide and downward spiral
preceding his suicide could be interpreted as a form of self-inflicted punishment, and he

\textsuperscript{101} ibid., Ch. XXI, 304.

\textsuperscript{102} “At that moment I saw the reflection of the visage and features quite distinctly in the
dark oblong glass… [They were] fearful and ghastly to me… It was a discoloured face –
it was a savage face. I wish I could forget the roll of the red eyes and the fearful
blackened inflation of the lineaments.” Ch. XXV, 371.
inadvertently performs the act of self-discipline. Like Rochester, John Reed’s fate is a byproduct of his own actions, but John’s deviation from traditional masculinity, unlike Rochester’s, is treated as something monstrous.

The example of St. John Rivers, however, suggests that it is difficult to rely on anyone one indicator to diagnosis mental illness, mania, or aberrant masculinity. Of the male characters that receive screen time in the novel, St. John is the closest we get to the ideal Victorian gentleman – at least upon first inspection. Unlike Rochester and John, St. John is the epitome of self-control. He holds himself with such rigidity to his ideals and plans that he sacrifices his opportunity for marriage to the woman he loves, Rosamond Oliver, who is a local heiress and thus also an advantageous match. While this does not conform to expectations placed upon a young English man, which is to marry well and procreate for the sake of his family and his country, he does fulfill a new kind of ideal: the ideal of muscular Christianity.

Muscular Christianity was the hybridization of a kind of Victorian masculinity with religious devotion, which culminated in a distinct form of masculinity in mid-century Victorian England. This form of masculinity was popularized by Charles Kingsley, an influential novelist known for the heavily religious themes of his novels, and the term “muscular Christianity” was coined in a review of Kingsley’s Two Years Ago by T. C. Sanders:

We all know by this time what is the task that Mr. Kingsley has made specially of his own – it is that of spreading the knowledge and fostering the love of a muscular Christianity. His ideal is a man who fears God and can walk a thousand miles in a thousand hours – who, in the language which Mr. Kingsley has made
popular, breathes God’s free air on God’s rich earth, and at the same time can hit a woodcock, doctor a horse, and twist a poker around his fingers.\textsuperscript{103}

In his introduction to *Muscular Christianity: Embodying the Victorian Age*, Donald E. Hall elaborates on this quote: “Sandars [sic] highlights a central, even defining, characteristic of muscular Christianity: an association between physical strength, religious certainty, and the ability to shape and control the world around oneself.”\textsuperscript{104} Hall articulates the core of muscular Christianity: control, whether it is off oneself or the world around oneself, is paramount. This brand of aggressive Christianity was well-suited to the Victorian imperialist agenda and persistent missionary practices, and this is the tradition in which we place St. John.

St. John in many ways embodies Kingsley’s notion of muscular Christianity, as well as its possible limitations. At first impression, St. John is another suitor in the contest for Jane’s hand in marriage. And, as far as Jane’s preferences are concerned, any description of St. John would paint him out to be one of those classically handsome men who Jane previously had stated she “could have [no] sympathy with”: “Had he been a statue instead of a man, he could not have been easier… His face riveted the eye; it was like a Greek face… It is seldom, indeed, an English face comes so near the antique models as did his. He might well be a little shocked at the irregularity of my lineaments, his own being so harmonious.”\textsuperscript{105} Jane’s fixation on St. John’s classical features

\textsuperscript{103} T. C. Sanders, “Two Years Ago,” *The Saturday Review* (1857), 176.

\textsuperscript{104} Donald E. Hall, “Muscular Christianity: reading and writing the male social body” (Cambridge: Cambridge University Press, 2010), 7.

\textsuperscript{105} Brontë, *Jane Eyre*, Ch. XXIX, 438-439.
objectifies him, rendering him more art figure rather than human being. Additionally, St. John had swooped in just in time to save Jane from her period of vagrancy and starvation, acting as a heroic figure. Superficially, St. John makes for a good suitor because he appears to hit many of the right notes; he is handsome, heroic, and genteel. There is no fear of St. John ever losing his grip on his self-control, and he is perfectly positioned to carry out the rest of his duty, either with Rosamond or with Jane. However, he is so perfectly restrained and so perfectly constructed that he, as someone who is more statue than man, fails to actually fulfill the role of the conventional suitor, and thus fails to fulfill some of the most important duties of a young man.

The reader quickly realizes that, as a suitor, St. John is quite lacking. He is all too disciplined and repressed to the point of being cold and distant, which hinders his relationships with other people, as seen in his failure to follow through with his feelings for Rosamond. Jane tells the reader, upon having examined St. John’s features in one of their earliest interactions, that “his nostril, his mouth, his brow… indicated elements within either restless, or hard, or eager.”106 The key descriptor of this line is “hard,” as it echoes Jane’s assessment of St. John in the previous paragraph in which she describes him as appearing more like statue than a man. St. John is so repressed and restrained in his behavior and actions that he is rendered nearly inhuman. St. John adheres so closely to the Victorian virtue of self-discipline that he inadvertently prevents himself from fulfilling his other crucial duties as a young man, that of marriage and consequently procreation. St. John, in his enthusiasm and dedication, takes this virtue too far, and ultimately fails in performing domestic Victorian masculinity just as Rochester and John

106 ibid, Ch. XXIX, 439.
Reed are incapable of performing normative masculinities – St. John’s fervent dedication to discipline reaches manic levels. He is unable to recognize the line between self-restraint and self-flagellation.

St. John, despite his stony exterior, is ultimately a young and physically able young man after all, and we are told that, beneath his stony exterior, he has all of the fire and energy of youth. However, St. John initially chooses to dedicate his life to the church, which he regrets for a while, until he comes upon a solution – that of missionary work:

A year ago I was myself intensely miserable, because I thought I had made a mistake in entering the ministry: its uniform duties wearied me to death. I burnt for the more active life of the world… After a season of darkness and struggling, light broke and relief fell… God had an errand for me; to bear which afar, to deliver it well, skill and strength, courage and eloquence, the best qualifications of soldier, statesman, and orator, were all needed: for these all centre in the good missionary.\textsuperscript{107}

In this passage, we see that St. John is filled with what I would argue is a manic energy that is more suited to the “exciting toils of a literary career,” or a political career, or that of the military. In \textit{Modern Domestic Medicine}, Patrick Brontë’s go-to medical text, Thomas John Graham describes someone in a manic state as something with “an unrestrained behavior; [] an irritability which urges on the patient in an extravagant pursuit of something real or imaginary, to the ruin of himself, or annoyance of his friends; and ultimately leads him, if opposed in his disordered wishes, to acts of extreme

\textsuperscript{107} ibid., Ch. XXXI, 457-458.
While St. John is the epitome of self-restraint, his chafing at the boundaries of life as a clergyman and subsequent pursuit of the missionary life style closely echoes Graham’s description of the “irritability which urges on the patient in an extravagant pursuit.” After all, St. John does give up all of his duties in England, teaches himself Hindostanee, and runs off to India in order to become a missionary. While he is methodical in his methods, it is still a drastic move to make, especially considering the risks involved, particularly for his health. However, when he tried to repress that manic urge, it resulted in a deep depression.

Although St. John is the best example in the novel of the Victorian virtue of self-discipline and repression, it is reasonable to speculate that this does not come naturally to him and is cultivated at great cost, as evidenced by his deep depression before he committed to a life of missionary work. This would follow along with Sussman’s thoughts on Victorian manhood and his emphasis on the performative aspect of masculinity. St. John’s entire image and reputation is built on the careful and meticulous performance of the missionary – the perfect outlet for his various interests and for his burning energy. Missionary culture is the ideal manifestation of Kingley’s muscular Christianity: the virile and able-bodied Englishman is able to suitably balance his rough-and-tumble masculinity by using missionary work as an outlet for all of his masculine energy, and this is clearly the conclusion that St. John comes to. And this, at least at first, seems like a great idea. Muscular Christianity provides another acceptable form of masculinity for men to assume, and provides other options for men who do not wish to

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assume the mantle of domestic masculinity. However, St. John ultimately takes muscular Christianity too far, which proves to be his downfall.

*Jane Eyre* ends not with the eponymous Jane but with her thoughts on St. John, who has traveled to India to complete his missionary work. By the end of the novel, Jane has successfully completed her transition into adulthood through her marriage to Rochester and subsequent motherhood, thus completing the traditional journey of the *bildungsroman* and conforming to the traditional feminine role, despite all of her other deviations and passionate soliloquies on the constraining nature of traditional Victorian femininity. However, Jane’s successful transition into adulthood is juxtaposed with St. John’s fate, which is much unhappier than Jane’s.

According to Jane, there is no hope of St. John’s survival, and no hope of his returning to England. By the end of the novel, when we have caught up with the present Jane, ten years have passed since her reunion with Rochester, and St. John has been in India for about the same amount of time. According to Jane, he has pursued missionary work with the same singular focus we have come to expect of him:

He entered on the path he had marked for himself; he pursues it still. A more resolute, indefatigable pioneer never wrought amidst rocks and dangers. Firm, faith, and devoted, full of energy, and zeal, and truth… He may be stern; he may be exacting; he maybe ambitious yet… His is the ambition of the high master-spirit, which aims to fill a place in the first rank of those who are redeemed from the earth.

We are reminded of St. John’s ambitions, which he previously discussed when he first told Jane of his decision to become a missionary, and his singular focus that he applies to everything he does. Jane is utterly captivated by St. John’s dedication because she reads it
as complete faith and dedication to God. St. John is so committed to the path he has chosen that he refuses to quit it even once his health deteriorates:

Himself has hitherto sufficed to the toil, and the toil draws near its close: his glorious sun hastens to its setting. The last letter I received from him drew from my eyes human tears, and yet filled my heart with divine joy: he anticipated his sure reward, his incorruptible crown. I know that a stranger’s hand will write to me next, to say that the good and faithful servant has been called at length into the joy of his Lord.109

As Jane once predicted she would succumb to India’s climate if she went due to her delicate constitution, St. John has similarly succumbed. Despite all of his preparations and his physical ability, St. John proves to be unequal to the toil of missionary work and to India’s climate; but, he continues to pursue his passion despite the consequences. Like Graham stated in the passage previously cited, St. John engaged in an “extravagant pursuit... to the ruin of himself,” and nearly to “the annoyance of his friends” in his attempts to recruit Jane to his cause. St. John has demonstrated the utmost commitment to his choice, even when it sentenced him to an early death. Because of that choice, and because of his evident faith, St. John is rendered as nearly a martyr in Jane’s eyes and his endeavor is portrayed as ultimately laudable. However, the fact that St. John, like John Reed and Bertha Mason and Branwell Brontë, willingly put himself into a state in which he knew his health would deteriorate and likely result in his death displays an obsessive quality, similar to that of Rochester as discussed in Chapter 2. St. John is so filled with

109 Brontë, Jane Eyre, Ch. XXXVIII, 556.
manic energy that he cannot stop himself from fulfilling his desires and is compelled to continue in the path he has set for himself.

Rochester is not the only character who fails to adequately perform masculinity due to his mental health status – due to their manic tendencies, John Reed and St. John Rivers also fail to perform normative Victorian masculinities. St. John’s tendency towards obsession causes him to take his performances of masculinity beyond their logical conclusions and twists them into something different from what they were intended to be. If John Reed represents the dangers of completely lacking discipline, St. John represents the dangers of not having the self-awareness and control to moderate his discipline. We are presented with the two extremes of a spectrum motivated by a similar problem, and Sussman’s assertions are reinforced:

Manhood was conceived as an unstable equilibrium of barely controlled energy that may collapse back into the inchoate flood or fire that limns the innate energy of maleness, into the gender-specific mental pathology that the Victorian saw as male hysteria or male madness… [but] if such discipline becomes too rigorous the extreme constraint of male desire will distort the male psyche and deform the very energy that powers and empowers men.¹¹⁰

John Reed and St. John both fail to perform normative masculinity, albeit in distinct ways, and as consequence would have been considered as to have put their mental health at risk. In the Victorian mindset, their failure to adequately conform to societal expectations would be the cause of their “madness” rather than a symptom; but, reading

¹¹⁰ Sussman, *Victorian Masculinities*, 13, 3.
Rochester with a lens of mental illness allows us to similarly expand how we read the other male characters of the novel.

While the scholarship on *Jane Eyre* thus far has extensively examined the intersection of madness and gender, it has primarily focused on femininity, which is understandable – we have been conditioned to assume that if madness is culturally constructed then it must be more closely associated with women. The examination of this intersection in work such as feminist literary criticisms has resulted in invaluable work to which I, and other scholars, owe a debt. However, there is something to be gained in taking a similarly critical stance in examining where the discourses of madness intersect with those of masculinity, and by expanding to a more contemporary framework of mental illness, we can more clearly see how these discourses can be applied to masculinity. By examining both sides of this binary, we as readers and scholars can form a more nuanced understanding of the function of gender as it interacts with mental health in the narrative. Looking at these intersections side by side reveals how the novel reinforces gender norms of the period while simultaneously complicating cultural assumptions about gender by revealing the fragility of the construction of normative Victorian masculinity. And while this thesis primarily considers the male characters of the novel, particularly with regard to how mental illness, madness, and gender interact in the Victorian historical context, this lens can be applied to other analytical frameworks, such as those pertaining to race, imperialism, and postcolonialism. There are unanswered questions to address – for example, how do we consider the implications of St. John’s involvement in enacting empire through his missionary work? How do we account for Bertha’s racial and ethnic status as well as her being a colonized subject? How do these
dynamics interact with some of the frameworks discussed in this thesis? Such an analysis would further expand our understanding of how these frameworks intersect with one another and the opportunities present in those intersections. Mental illness provides flexibility in these analyses that would allow us to re-interrogate certain sets of politics just the lens of mental illness allowed us to re-interrogate the gender politics of *Jane Eyre*. Acknowledging mental illness as another constructed identity puts us in a position in which we can more holistically read into literature.
Bibliography


