# Borderlands Of Insanity In Dickens, Trollope, And Braddon.

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# Borderlands of Insanity

# in Dickens, Trollope, and Braddon

by

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## Abstract

In 1874 Henry Maudsley described "a borderland between crime and insanity, near one boundary of which we meet something of madness but more of sin, and near the other boundary of which something of sin but more of madness" (*RMD* 36). This interdisciplinary study links fictional representations of madness to professional discussions of melancholia, monomania, and puerperal insanity. Focusing on *Tom Tiddler's Ground, Great Expectations, Little Dorrit, He Knew He Was Right, The Last Chronicle of Barset,* and *Lady Audley's Secret*, I investigate the boundaries each author imposes on the borderland, the position each novelist assigns his or her characters within the borderland, and the ways these representations participate in contemporary debates about the nature of insanity and its problematic relationship to moral and legal views of culpability.

Mr. Mopes, Miss Havisham, Mrs. Clennam, Louis Trevelyan, Josiah Crawley, and Lady Audley inhabit the borderland between insanity and culpability because their behavior resists simplistic categories. Their sins and crimes are mitigated by the presence of mad impulses and obsessive delusions, but their madness is called into question by their ability to act rationally and strategically. Thus, judgments of their behavior require not only medical distinctions between sanity and insanity but also political distinctions

between legal and illegal acts and philosophical distinctions between moral and immoral acts.

My study also explores the individual interests and priorities of each author. Dickens examines several ways that excessive pride and self-imposed isolation prompt self-justifying obsessions that destroy mental and physical health. Like Dickens, Trollope is interested in the relationship between pride and depression, but his narratives include a more complex view of madness as relatives and neighbors are called upon to negotiate definitions of insanity and culpability. Braddon also asks her readers to consider the criteria for distinguishing acceptable and unacceptable behavior, specifically challenging alienist assumptions regarding female physiology and misogynist attitudes embedded in Victorian culture.

The study concludes with a discussion of the ways these fictional borderlands convey the subjective experience of madness and serve as catalysts for discussion of borderland issues regarding insanity and culpability.

## Competing Assessments: Moral and Biological Factors

> There is perhaps no great social question so imperfectly understood among us at present day as that which refers to the line which divides sanity from insanity. (Trollope, *HKHWR*, 1.299)

It is not surprising that in the midst of the cultural changes, scientific discoveries, and industrial advances during the nineteenth century that Anthony Trollope and other Victorians would identify the ambiguous boundaries between sanity and insanity as a central problem for British society. Many of the questions Victorians asked about the problematic relationship between insanity and culpability stemmed from the anxiety caused by the collision between science and religion. As Peter Wright and Andrew Treacher have noted in *The Problem of Medical Knowledge: Examining the Social Construction of Medicine,* today, at the end of the twentieth century, we live in a world in which "[t]he precepts of religion and ethics . . . are seen as contestable, but those of science as inconvertible" (6). In earlier times the reverse was true: religion was inconvertible and science was contestable. Although the shift that granted science technical status as "the accurate reading of Nature's book with eyes undistorted by social interest or cultural prejudice" occurred over a long period of time (Wright and Treacher 4), in the narrow context of insanity and culpability the shift from moral conceptions of

insanity to physiological conceptions of insanity occurred during the nineteenth century when voluntarist discourse, with its assumptions of free will, individual responsibility, and self-discipline, collided with determinist discourse, with its assumption of inevitable and impersonal causality.

This collision created a space where judgments of human behavior were fraught with shifting definitions, conflicting assumptions, and contradictory priorities. In his 1874 treatise *Responsibility in Mental Disease,* Henry Maudsley describes this space as "a borderland between crime and insanity, near one boundary of which we meet something of madness but more of sin, and near the other boundary of which something of sin but more of madness" (36). In this borderland judgments of insanity involve not only medical distinctions between sanity and insanity but also political distinctions between legal and illegal acts, and philosophical distinctions between moral and immoral acts. Negotiating the boundaries of this borderland became a cultural project for the Victorians. Physicians, lawyers, politicians, reformers, poets, novelists, and the public participated in the project, sometimes working in harmony and sometimes in contention. As they considered individual circumstances and suggested guidelines for responding to the borderland behaviors they observed in their midst, a greater understanding of insanity was achieved, along with a greater sympathy for the insane.

This study begins with a discussion of the philosophical, medical, and legal assumptions that shaped the perimeter of the borderland between insanity and culpability. Within this broad plane, boundaries inevitably shifted as individual circumstances demanded new or revised priorities. Numerous lay observers explored the borderland

and considered the implications of the boundaries asserted by the medical and legal professions. Charles Dickens, Anthony Trollope, and Mary Elizabeth Braddon are three novelists who participated in this cultural project. The fictional characters they created, most notably, Mr. Mopes, Mrs. Clennam, Miss Havisham, Josiah Crawley, Louis Trevelyan, and Lady Audley, exist in the borderland because their behavior resists simplistic categories: their good intentions are undermined by pride, ambition, and greed; their wicked deeds are mitigated by the presence of mad impulses and obsessive delusions; and their mad behavior is mitigated by their ability to act rationally and strategically. Through these characters and their individual circumstances, Dickens, Trollope, and Braddon both reiterate and challenge many contemporary attitudes and responses toward insanity.

Each of these novelists shapes a fictional borderland according to his or her individual interests, priorities, and purposes. Dickens focuses on the connection between irresponsibility and self-created depression and obsessions. His characters abdicate their personal and social responsibilities, withdraw from relatives and neighbors, and perpetually re-experience their emotional wounds. The narratives Dickens constructs admonish these characters (and real people who exhibit similar tendencies) to leave their self-imposed isolation and rejoin the human community where they will find useful work and healing relationships. Trollope is also interested in the consequences of isolation, but he delves more deeply into the communal consequences an individual's "mad" behavior has on others. Trollope's fictional communities are charged with negotiating complex relationships between family loyalties, political institutions, religious

obligations, and social values. The narratives he constructs allow readers to experience overwhelming depression vicariously. The readers gain a greater understanding and sympathy for Trollope's seriously depressed characters as they witness the complex negotiations enacted in the novels. Braddon, also recognizing the complex nature of negotiating assessments of insanity, specifically challenges the misogyny of Victorian society. The narrative she constructs asks Victorian readers to re-evaluate the limitations placed upon women in Victorian society so that women will not be forced into "mad" behavior. Even though Dickens, Trollope, and Braddon express individual purposes in their fictional borderlands, all three novelists place their characters in borderlands characterized by "something of madness but more of sin," where moral responsibility, healthy social integration, and communal values have precedence over somatic factors such as heredity and physiological impulses.

## "something of madness but more of sin"

According to Victorian moralists, such as John Abercrombie (1780-1844) and John Barlow (1799-1869), the borderland behaviors judged to be "something of madness but more of sin" stemmed from a lack of moral training and self-discipline. They considered this cause-and-effect relationship between immorality and madness in voluntarist terms, drawn from theological conceptions of free will and sin, philosophical conceptions of mind and body, and legal conceptions of *mens rea,* criminal intention. and knowledge of right and wrong. In many of these voluntarist discussions, two concepts were conflated in the term *moral*: mental conditions rather than somatic conditions, on

the one hand, and ethical judgments of behavior, on the other. This mingling of definitions was not accidental. As Vieda Skultans argues, "[T]here is a systematic ambiguity in the use of the term, whereby the second meaning is contained and sometimes hidden within the first" (*MM* 10). For example, when Dr. John Abercrombie, Reverend John Barlow, and other nineteenth-century moralists use phrases like "moral development" or "moral training," they mean that an individual's intellectual abilities need to be strengthened and developed not only by mental exercise but also by proper instruction in morality. Thus, the term *moral* suggests both mental and ethical implications.

In his 1833 *The Philosophy of the Moral Feelings,* John Abercrombie connects mental disorders with moral development. Abercrombie, a fellow of the Royal College of Physicians of Edinburgh and First Physician to the King in Scotland, explains that because men and women are endowed with intelligence and a moral conscience, they must cultivate a "well regulated mind" and "moral habit" (128-29). Neglecting to do so eventually leads to "deficiency in the emotions," "derangement of the moral condition," and "a morbid influence . . . in the mental economy, which tended gradually to gain strength, until it became a ruling principle in the whole character" (159). In a related work, *The Culture and Discipline of the Mind* (1839), Abercrombie explains that "the distorted mind" and "the vitiated and corrupted mind" cause "permanent and irremediable" damage to mental and spiritual health (111-112). Although Abercrombie does not use the words *madness* or *insanity* in these passages, he clearly believes men and women are responsible not only for their actions but also for their mental health.

Reverend John Barlow explains this same principle of self-regulation with specific reference to insanity in his 1849 *On Man's Power over Himself to Prevent or Control Insanity.* Barlow acknowledges that insanity may be caused by structural damage to the brain and nervous system, but he argues that less than one third of the cases can be attributed to physiological causes. On the final page of his treatise, he emphasizes, "it is calculated that less than three hundred in one thousand are the result of disease, or of unavoidable circumstances, thus leaving above seven hundred resulting from bodily excess or mental misgovernment," that is, immorality or inadequate moral education (76). Confident of the moral nature of insanity, Barlow explains that most cases of insanity are caused by "inefficiency" or "misdirection." *Inefficiency* occurs when "the brain, unaccustomed to direction from the intellectual force, rebels against it; and if this latter fails to assert its sway, it may justly be termed inefficient" (49). He believes *inefficiency* afflicts primarily "the poor and uneducated" (53) because they have never had the opportunity to develop mental discipline. *Misdirection,* on the other hand, is associated primarily with the "higher ranks" because they are more likely to "become prepossessed with some irrational notion" (54). These obsessive thoughts "weary the brain," and, unless the afflicted individuals find "relief" for the oppression they suffer, "the weariness may end in disease" (56).

Thus, according to Barlow's moral perspective, disease is most often a consequence of madness rather than a cause of it. Unless reason and will, which normally function as regulators of human passions, are completely incapacitated by an "annihilating" disease, a suffering individual has the power to control base desires,

thoughts, and actions through mental exercise and self-discipline. As Barlow asserts, "Nothing then but an extent of disease which destroys at once all possibility of reasoning, by annihilating, or entirely changing the structure of the organ [brain], can make a man necessarily mad" (27-28). Even if a severe disease does exist, Barlow argues, the sufferer may still possess sufficient reason and will to resist harmful behavior or to seek help from others:

> [*D*]*iseases of the brain and nervous system, however distressing, may and do, where the mind has been duly cultivated, leave the individual capable of knowing right from wrong, and of seeking exterior aid to combat the effects of mental derangement consequent on disease*—a derangement of which he is either conscious at the time, or has an anticipatory knowledge of, which enables him rationally to provide against violence. (47, Barlow's emphasis)

Barlow insists that, in order for a disease to mitigate an individual's responsibility, it must be so severe that the individual is completely incapable of rational thought and self-awareness.[1]

Barlow cites a number of case histories publicized by Philippe Pinel (1745-1826), Jean Etienne Esquirol (1772-1840), and John Conolly (1794-1866) to support his argument.[2] After a lengthy quotation from Conolly's *An Inquiry Concerning the Indications of Insanity* regarding a printer and a physician, Barlow focuses on Conolly's discussion of the faculty of comparison and its relationship to madness. According to Conolly,

> The printer of Berlin and the physician of London, retained the power of comparison . . . they compared the visual objects of delusion with the impressions of other senses, of hearing, and of touch, and acquired further evidence, that the whole was deception. This is exactly what madmen cannot do. One form of madness consists in this very illusion of

> sense, but it is *conjoined* with the loss or defect of the comparing power, and the madman concludes that what is only illusion is a reality. (113)[3]

The point that Conolly makes and that Barlow reiterates is that madness stems from a "loss of comparison," an inability to evaluate sense impressions properly. When the intellect is unable to distinguish between what is real and what is illusory, delusions develop and madness erupts. Barlow regards this inability to reason as a moral (both mental and ethical) problem rather than a physical one. In other words, it stems from inadequate education, an undisciplined will, and a lack of faith, rather than from abnormalities in the brain or nervous system.

Barlow emphasizes this moral foundation when he writes, "Thus, according to the opinion of this very able judge [Conolly], the affection of the brain which causes these delusions, *is not* madness, but *the want of power or resolution to examine them, is*" (27). "Want of power" is a phrase that alienists like Henry Maudsley or John Charles Bucknill might have used to refer to irresistible somatic impulses, but Barlow defines this power as "resolution," a consequence of will, not physiology. Because Reverend Barlow considers the resolution and resistance that enable an individual to forestall or overcome insanity as natural consequences of faith, it is not surprising that he would quote a comment from one of Esquirol's patients, which is reminiscent of Romans 7:15-24[4]: "'I know what I ought to do, and would do it,' said one of his patients to M. Esquirol, 'but give me the power, the ability which is wanting, and you will have cured me'" (39). It is clear that Barlow interprets this patient's lack of power as a lack of spiritual power rather than a lack of physical ability or capacity. Barlow's confidence in

the power of faith is also evident in his description of the "Christian philosopher" who is strengthened by an assurance of salvation:

> The wild whirl of passion which unsettles the brain of the ungoverned man, has no place in the mind of the Christian philosopher—fortune is lost or won with equanimity; for he has the self-sustaining power within which riches cannot give or take away—friends are removed from him by death,—he awaits only the hour of a happy reunion;—his character is calumniated; what is the opinion of the world to him? he can still look with confidence to the approbation of the ONE who cannot be deceived; and while pursuing his course of duty unmoved by obloquy, anticipates the hour when the sentence of "Well done, good and faithful servant, enter thou into the joy of thy Lord" will be the rich reward of his labours. Such a man may suffer, but he will not be mad. (40)

From Barlow's Christian perspective, faith and assurance of salvation promise peace of mind in the midst of worldly trials and tribulations. Suffering is an inevitable part of life, but madness is not. Madness afflicts individuals who have not found the peace that God grants believers.

At the end of his treatise, Barlow emphasizes the connection between sanity and regulation of one's thoughts. He cites a case involving "religious melancholy" from Conolly's treatise to support his argument. One of Conolly's patients at Glasgow Lunatic Asylum attempted suicide several times, but these attempts ceased after the patient was told that "no murderer hath eternal life." Barlow concludes, "This man then had the power to restrain himself; yet had those words never been spoken, and had he committed suicide, he would have been held insane and incapable of doing otherwise" (73).[5] The possibility of being excluded from heaven apparently motivated the patient to discipline his thoughts and actions. If he had not been challenged to do so, though, Barlow believes that the physicians and attendants at the asylum would have assumed

that he was incapable of such resolution and would have judged him an incurable melancholic.

Barlow concludes his discussion with the following quotation from a physician's letter: "'What is now fashionably termed *monomania* is more often owing to a want of moral control over the mind than to any unsoundness of the intellectual faculties; so that in fact it ought to be viewed as moral depravity rather than mental disorder'" (73-74). By juxtaposing *depravity,* with its connotation of immoral choices, and *disorder*, with its connotation of physiological defects, Barlow succinctly identifies the opposing discourses at the center of the nineteenth-century debates over insanity and culpability. Barlow clearly identifies his position in these debates with the term *moral depravity,* which belongs to voluntarist discourse and discussions of human agency rather than determinist discourse and discussions of heredity and physiology.

Barlow's discussion of self-discipline as a preventative for insanity illustrates the voluntarist assumptions underlying the approach to treatment known as moral management. Three years after Pinel ordered the chains removed from the patients of Bicêtre in 1793, a British tea merchant named William Tuke (1732-1822) opened the York Retreat and established a form of moral management that stemmed from his Quaker faith, specifically the "belief in the dignity of all people and the power of kindness to cure" (Bendiner 146). Tuke replaced "subjection of a brute force" with "gentle persuasion of a wayward or perverted part of the self" (Skultans, *EM* 59). At the retreat men and women patients spent their days completing useful chores like gardening and laundry rather than enduring physical restraints and forced idleness. In

addition, the superintendent, matron, and physician acted like parents in charge of undisciplined but trainable children.[6] For Pinel, Tuke, and other nineteenth-century reformers, "the lunatic . . . remained in essence a man, a man lacking in self-restraint and order, but a man for all that. Moreover, the qualities he lacked might and must be restored to him, so that he could once more function as a sober rational citizen" (Scull, *MSA* 93). As Foucault notes, this new interest in the humanity of the insane transformed the "gaze" of physicians and asylum superintendents: "The gaze is no longer reductive, it is, rather, that which establishes the individual in his irreducible quality" (*BC* xiv).

The most prominent moral manager of the Victorian period was John Conolly, who gained national attention when he abolished all mechanical restraints at Hanwell Asylum after becoming superintendent in 1839. Conolly stresses the importance of addressing a patient's thoughts and emotions in his treatise *An Inquiry Concerning the Indications of Insanity.* He compared moral therapy to the physical therapy required to heal a paralyzed arm:

> [W]e find that nothing aids our medicinal applications more, than the efforts of the patient to move his paralyzed limb. It is the same with the mind: the organ of its manifestation is impaired; but a careful solicitation and direction of the functions of which it remains capable, and of those which convalescence enlarges to us, may contribute most powerfully to its cure. (24)

As this analogy suggests, both mental exercise and moral discipline are essential if impaired brain functions are to be strengthened and healed. A good education, then, is essential in the prevention of insanity: "To educate a man, in the full and proper sense of the word, is to supply him with the power of controlling his feelings, and his thoughts,

and his actions" (*Inquiry* 191). The key phrase here is "the power of controlling." Conolly's conception of self-control echoes Abercrombie's discussion of the "well regulated mind" and "moral habit" in *The Philosophy of the Moral Feelings* (128-29).

Even though the moral managers expressed a voluntarist view of human nature, it would be misleading to suggest that Abercrombie, Barlow, Conolly, and other moralists were hostile to science. In fact, they actively integrated scientific discoveries about the brain and the nervous system into their moral framework. For example, Barlow begins his treatise on the prevention of insanity with an overview of contemporary understanding of the brain and the nervous system. With an even greater understanding of physiology, John Abercrombie wrote an 1828 treatise, *Pathological and practical researches on diseases of the brain and the spinal cord,* which Hunter and Macalpine credit as "the largest collection of neurological case material published at that time" (801). Even though they were interested in brain functions, Abercrombie and Barlow are considered moralists because they stressed spiritual influences upon physical and mental processes. From their perspective, spirit, mind, and body are intertwined and directly affect the wholesomeness of each other. As Barlow writes, most forms of "mental derangement" may be prevented "by a well-regulated education, by the consolations and restraints of religion, and by the observance of those moral rules which Christianity calls on all to practice. Fearfully indeed has man scourged himself for his neglect of them" (16). Similarly, Johann Christian Heinroth (1773-1843), medical professor at the University of Leipzig, argues, in his 1818 *Textbook of Disturbances of Mental Life,* that insanity or "disturbances of the soul" are caused by sin: "Although he is

not aware of it, man is dedicated to the Deity as soon as he enters this world; and his consciousness, his reason, lead him towards the Deity. That this so rarely happens is his own fault; and this guilt gives rise to all evils that beset him, including the disturbances of the soul" (104). According to Heinroth, "[T]he common source of all soul disturbances, however, different they are, is selfishness or sin" (428). Heinroth, Conolly, Barlow, Abercrombie, and other moral managers were thus convinced that there was a cause-and-effect relationship between insanity, immorality, and inadequate moral education. They were further convinced that insane behavior could be prevented and controlled by instilling moral discipline in their patients.

## "something of sin but more of madness"

According to Victorian alienists, physicians specializing in "mental alienation," the borderland behaviors judged to be "something of sin but more of madness" stemmed from irresistible impulses caused by lesions or other abnormalities in the nervous system. John Cowles Prichard (1786-1848), Isaac Ray (1807-1881), John Charles Bucknill (1817-1897), Daniel Hack Tuke (1827-1895), and Henry Maudsley (1835-1918) all asserted that insanity was primarily a somatic condition. The most adamant spokesman for a determinist, physiological interpretation of insanity was Henry Maudsley, professor of medical jurisprudence at University College of London and editor of the *Journal of Mental Science* from 1863 to 1878. Maudsley received professional acclaim when his book *The Physiology and Pathology of Mind* was published in 1867, and he attracted international attention when he joined Wilhelm Griesinger and Benedict Morel in a

consultation to "assess the mental state" of Archduchess Charlotta, Hapsburg Empress to Mexico (Turner 551).

Throughout his career, Maudsley, a "positivist, to whom metaphysics was anathema" (Lewis 34), emphasized hereditary predisposition and other physiological causes for insanity. Twenty-five years after Reverend Barlow's treatise *On Man's Power over Himself to Prevent or Control Insanity*, Maudsley criticizes theological discussions of insanity in *Responsibility in Mental Disease* (1874): "In sad truth may it be said that, so far as a knowledge of the nature of mental disease and of the proper mode of its treatment is concerned, mankind owe no thanks, but, on the contrary, much error and infinite human suffering, to theology and metaphysics" (14). Confident that scientific inquiry had recently established evolution as a fact rather than a theory, Maudsley condemns theologians for being "prone to square the order of nature to their notions of what should be" and asserts that they "will in the end find it impossible in this matter [of insanity], as they have in other matters, to contend against the facts" (*RMD* 31).[7]

Maudsley stresses that insanity is a physiological disease centered in the brain and the nervous system: "Insanity is, in fact, disorder of the brain producing disorder of the mind; or, to define its nature in greater detail, it is a disorder of the supreme nerve-centres of the brain—the special organs of mind—producing derangement of thought, feeling, and action, together or separately, of such degree or kind as to incapacitate the individual for the relations of life" (*RMD* 16). To clarify the somatic nature of insanity, Maudsley compares several attributes of insanity to common physical experiences. In a

discussion of impulsive insanity, a disorder characterized by impulses that overpower an individual's reason and will, Maudsley emphasizes the irresistibility of these impulses by comparing them to muscle coordination:

> [J]ust as a deranged state of the motor centres destroys co-ordination of movements and occasions spasmodic or convulsive muscular action, so a deranged state of the mind-centres destroys the healthy co-ordination of ideas, and occasions a spasmodic or convulsive mental action. In the one case the man is unable to perform his movements correctly, in the other case he is unable to perform his ideas correctly—in both cases they play him evil tricks against his will, through his consciousness. (*RMD* 162)

Because Maudsley equates insane impulses with involuntary reflexes, he believes that the conscious mind may be fully aware of the wrongness of a certain action and still be unable to resist the action. He is convinced that the central issue is one's ability (or inability) to resist chemical reactions and physical impulses, not one's intentions, motives, or knowledge. Using another physical analogy to describe insane delusions, Maudsley compares the degenerative mental process to cancer :

> Its foundations are not laid in reason, but in disease; and it holds its ground in the mind just as a cancer or other morbid growth holds its ground in the body,—by drawing to its own use and converting to its own nature the nutriment which should support healthy activity, and so render its existence impossible. . . . In like manner an insane delusion . . . persists by perverting to its own use and maintenance the reasoning which should render its existence impossible. (218)

Maudsley also draws upon evolutionary processes to assert his determinist views of hereditary predisposition:

> [N]o mortal can transcend his nature; and it will be very impossible to raise a stable superstructure of intellect and character on bad natural foundations. Education can plainly act only, first, within the conditions imposed by the species, and, secondly, within the conditions imposed by the individual organization. . . . There is a destiny made for a man by his ancestors, and no one can elude, were he able to attempt it, the tyranny of his organization. (21, 23)

The phrase "tyranny of organization" creates an image of an individual bound by heredity and physiology. The tyranny advances with each succeeding generation as evolutionary processes provoke degeneration. Maudsley acknowledges that education and discipline can reduce an individual's anti-social behavior up to a point, but he emphasizes that the individual's inherited nature will remain unchanged and will reassert itself in time. As he comments in a discussion of hereditary predisposition in the criminal class, "A true reformation would be the *re*-forming of the individual nature; and how can that which has been forming through generations be *re*-formed within the term of a single life?" Maudsley's conclusion is adamant. Like the proverbial leopard and Ethiopian who cannot change their essential natures, criminals and others predisposed toward insanity cannot escape the tyranny of their organization (*RMD* 35).

As biographer Michael Collie notes, Maudsley's confidence in scientific inquiry led to a

> successful campaign to liberate the study of mental disease from the moralists, theologians, philosophers, and metaphysicians, who had rather monopolized all talk about it. Metaphysical speculation, he thought, was a severe impediment to scientific study. . . . Physiology, then, must replace metaphysics for anyone who wanted to understand human beings; neurology not theology encompassed all. (8)

Yet, while Maudsley and other Victorian alienists were staunch advocates of impersonal somatic causes for mental disorders, they also acknowledged the impact of morality, character, and will on mental health. In this regard, they believed that they had an obligation to assist in the moral improvement of their patients.[8] For example, in *Responsibility in Mental Disease* Maudsley equates holy living with healthy living:

"Were men with one consent to give up alcohol and other excesses—were they to live temperately, soberly, and chastely, or what is fundamentally the same thing, holily, that is healthily—there can be no doubt that there would soon be a vast diminution in the amount of insanity in the world" (308). Furthermore, Maudsley adds that a better system of education is needed to curb the "insanity [caused] from lack of self-denial" (308). He concludes,

> It is to the perfecting of mankind by this thorough application of a true system of education that we must look for the development of the knowledge and the power of self-restraint which shall enable them, not only to protect themselves from much insanity in one generation, but to check the propagation of it from generation to generation. (309)

While these comments reveal that Maudsley recognizes the important role moral education and healthy living play in forestalling the degenerative hereditary process of insanity, he remained convinced that insanity was first and foremost a physiological condition and that scientific research would soon prove this fact.

## Borderland Disorders

Like the men and women of other centuries and cultures, Victorians attempted to understand insanity and its problematic relationship with culpability. Total insanity was fairly easy to understand and recognize, but partial insanity, with its variable degrees of irrationality and compulsion, was rather difficult to diagnose. As we shall see, the process of diagnosis was often controversial because competing values and priorities led to contradictory assessments. To understand the difficulty Victorians confronted as they examined borderland conditions, we must understand the terms most often used in the

nineteenth century to identify and categorize depression, delusion, and obsession. Although there were numerous variations to identify specific combinations of symptoms, four broad categories were common in Victorian discussions of insanity: *melancholia*, *monomania, moral insanity*, and *puerperal mania*.

For several centuries the term *melancholia* was used for all forms of partial insanity, but in the nineteenth century several physicians attempted to distinguish between depressive and manic forms of partial insanity.[9] Jean Etienne Esquirol wrote in *Mental Maladies* (1838), "In lypemania [Esquirol's term for melancholia], ideas contrary to reason, are fixed and sustained by a depressing passion, as well as a vicious association of ideas" (203). According to Esquirol, the hallmark symptoms of melancholia were depression, delusion, and obsession. In an article for the *Dictionaire des sciences médicales* (1819), Esquirol defined monomania, as "the type intermediate between mania and lypemania; it shares with lypemania the fixity of concentration of ideas and with mania the exaltation of ideas and the physical and mental activity" (34:115). Unlike maniacs, who suffered a total loss of reason, monomaniacs experienced periods of lucidity, and, unlike melancholics, who were passive and withdrawn, monomaniacs exhibited outbursts of energy that could be provoked by either excited or depressed emotions and ideas (Goldstein 157). In his 1842 treatise *On the Different Forms of Insanity in Relation to Jurisprudence*, James Cowles Prichard (1786-1848) narrowed Esquirol's definition of *monomania* to "a disorder of the mind in which a single false notion is impressed upon the understanding, which is otherwise unclouded, so that the insane person is capable of reasoning correctly on all subjects unconnected

with a particular train of thought, and even on topics connected with his illusion, if the erroneous conviction be conceded as truth and matter of fact" (67).

Monomania quickly achieved "the status of a general cultural category" and, in France particularly, the status of *mal du demi-siècle* (Goldstein 153, 162). Monomania was soon co-opted by the public and became a synonym for a variety of obsessions and compulsions, both serious and lighthearted. For example, when Alexis de Tocqueville was absorbed with writing his *Democracy in America,* he failed to meet a deadline for the *London and Westminster Review* and wrote an apology to John Stuart Mill, saying, "I have at this moment *la monomania de la Democratie"* (qtd. in Goldstein 152). In contrast to this lighthearted jab, Charles Dickens used the term *monomania* to criticize eighteenth-century physicians and nineteenth-century evangelicals who seemed to be obsessed with cruelty. In "A Curious Dance Round a Curious Tree," an article published in *Household Words* in 1852, Dickens identified several of the inhuman conditions and treatments allowed in eighteenth-century asylums and concluded, "[N]othing was too wildly extravagant, nothing too monstrously cruel to be prescribed by mad-doctors. It was there monomania" (383). In "The Great Baby," another article for *Household Words* in 1855, Dickens adopted a sarcastic tone as he labeled sabbatarians and temperance reformers as "Monomaniacs" and condemned them for sponsoring bills restricting the Sunday hours of public houses and beer shops. Dickens's sarcasm is also evident in his caricature of George Cruikshank, who testified before the Select Committee, as "the volunteer testifier, Mr. Monomaniacal Patriarch" (3).

Monomania was an especially rich concept for novelists because, unlike many of the previous terms assigned to mental disorders, it was a term that laypersons could easily grasp: a single mania, characterized by irrational thinking regarding one idea or situation. Consequently, it was a term that could be applied to a variety of anti-social behaviors without accounting for individual symptoms. For example, in Emily Brontë's *Wuthering Heights* (1847) Nelly Dean comments that Heathcliff "might have had a monomania on the subject of his departed idol; but on every other point his wits were as sound as mine" (354). Monomania also gave sensation novelists "a set of ready-made conventions for villainy" (Taylor 48). Because of its association with notorious figures like Henriette Cornier and Daniel M'Naghten, allusions to monomania could have a menacing effect, a suggestion of irrationality and danger lurking below the surface.[10] This is certainly what Lady Audley, in Mary Elizabeth Braddon's *Lady Audley's Secret* (1862), implies when she discredits her accuser Robert Audley by describing him as a monomaniac:

> "[T]he perpetual reflection upon one subject resolves itself into monomania. Robert Audley is a monomaniac. The disappearance of his friend, George Talboys, grieved and bewildered him. He dwelt upon this one idea until he lost the power of thinking of anything else. The one idea looked at perpetually became distorted to his mental vision. . . . the one idea has done its fatal and unhealthy work. He looks at a common event with a vision that is diseased, and he distorts it into a gloomy horror engendered of his own monomania. If you do not want to see me as mad as he is, you must never let me see him again." (190)

In this passage Braddon focuses on one of the hallmark symptom of monomania: "perpetual reflection on one subject," which then performs a "fatal and unhealthy work" upon the mind and personality of the afflicted individual.

Although monomania remained in the public imagination for quite some time, its status as a serious diagnostic category declined in the last third of the century, especially in France.[11] In England the term *monomania* was still used, but Maudsley preferred the terms *moral insanity* and *impulsive insanity* in his 1863 article "Homicidal Insanity" and his 1874 book *Responsibility in Mental Disease.* The term *moral insanity* was coined by James Cowles Prichard in his 1835 *A Treatise on Insanity and Other Disorders Affecting the Mind.* According to Prichard, moral insanity was "a morbid perversion of the feelings, affections, and active powers, without any illusion or erroneous conviction impressed upon the understanding: it sometimes co-exists with an apparently unimpaired state of the intellectual faculties" (12).[12] Prichard's conception of moral insanity rested upon "the view that each faculty of the mind [intellect, imagination, will, emotion, memory, etc.] is anchored to a particular locality in the brain. If the relevant portion of the brain is damaged or unsound then the corresponding faculty will be defective or absent" (Skultans, *MM* 6). By de-emphasizing the faculty of intellect and concentrating on the affections and will, Prichard and other alienists shifted the focus from intellectual delusions to immoral and anti-social behavior prompted by physiological impulses. This "pathology of structure rather than content" (lesions and irresistible impulses rather than faulty reasoning), created a space in the borderland where "to appear normal no longer meant to be sane" (During 86). Consequently, moral insanity and monomania were "*essentially* unfathomable" (During 87) because neither professional nor lay observers could resolve the incongruity between hidden dysfunction and outer calm and reason.

Another type of moral insanity characterized by irresistible impulse during the Victorian period was *puerperal mania*, which involved disruptions in a woman's reproductive system.[13] Charles Mercier expressed a common Victorian assumption about women in *Sanity and Insanity* when he suggested that the female nervous system, which included the reproductive system, was "inherently faulty" (242). Thomas S. Clouston warned in *Clinical Lectures on Mental Diseases* that the stress of reproductive processes could lead to brain instability:

> The risks to the mental functions of the brain from the exhausting calls of menstruation, maternity, and lactation, from the nervous reflex influences of ovulation, conception and parturition, are often enormous if there is much original predisposition to derangement, and the normally profound influences on all the brain functions of the great eras of puberty and the climacteric period are too apt, in these circumstances, to upset the brain stability. (581-582)

Many Victorians believed this instability could lead to violence, especially infanticide and suicide. Because women accused of infanticide and other crimes often complained of menstrual disorders (*amenorrhoea*), Havelock Ellis suggested, "[W]henever a woman has committed any offence against the law, it is essential that the relation of the act to her monthly cycle should be ascertained as a matter of routine" (293).

The widespread assumption that women were inferior beings controlled by their reproductive systems meshed with alienist conceptions of irresistible impulse and created an insanity defense for infanticidal women. The infanticide trial of Mrs. Law serves as an example. In 1862 Mrs. Law, after suffering from "morbid delusions" and a serious loss of blood during her confinement, killed both her baby and her husband. In court her lawyers argued that she was a victim of violent impulses that overpowered her natural

nurturing instincts. These impulses were so strong and so irresistible that she managed to overcome her weakness and not only to kill her baby and husband but also to *dismember* them. Her jury accepted the defense's argument of irresistible impulse and found her insane (Smith, *TBM* 153).

Outbursts of violence like Mrs. Law's destruction of her family forced Victorian experts and laypersons to confront conflicting views of women. Victorian ideals of motherhood and the "angel in the house" made infanticide a particularly shocking crime, "a mother's perverse rejection of her natural function" (Smith, *TBM* 144). Puerperal insanity, with its overpowering impulses, provided an explanation for this rejection of maternity. Specifically, puerperal insanity explained infanticide as "a natural maternal violence, whose origin is in female physiology and whose intensity cannot be subjugated to the usual legal restraints governing violence between social subjects" (Allen, *JD* 28). Even though Victorian attempts to reconcile maternal violence with maternal affection led to an insanity defense that saved the lives of numerous women, at the base of the defense was the concept that women were controlled by their reproductive system, and this concept kept alive the belief that women were not reasoning, responsible individuals.[14]

In the early years of the nineteenth century, physicians exerted time and energy identifying dozens of disorders and classifying them according to the primary symptoms they observed. Because melancholia, monomania, moral insanity, and puerperal mania shared several common symptoms and behaviors—delusions, obsessions, depression, withdrawal, and sudden acts of violence—individual circumstances determined which

label seemed most appropriate. If the individual was depressed because of broken relationships, financial difficulties, lost loved ones, etc., the diagnosis would begin with melancholia. If the individual began to exhibit obsessions or delusions, the diagnosis would move to monomania. If the individual's behavior became anti-social, erratic, or impulsive, the diagnosis would be moral insanity and would include assertions of irresistible impulse. If the afflicted individual were a woman, especially a woman of childbearing years, all of these symptoms would usually be attributed to a dysfunctional reproductive system, and the condition would be labeled puerperal mania. In the second half of the century, alienists described insanity as a progressive disease with identifiable stages.[15] The depression associated with melancholia marked the first stage; delusions and obsessions associated with monomania and mania marked the second; and complete loss of reason associated with dementia marked the final stage. This simplification of the categories made madness a more accessible concept to laymen, allowing discussions about the nature of insanity and its problematic relationship with moral concepts of culpability to become public discussions. Thus, many participants—physicians, lawyers, novelists, and the reading public—were drawn into the task of defining insanity and devising consistent guidelines for responding to outbursts of insanity.

## Borderland Disputes

Because individuals afflicted with melancholia, monomania, moral insanity, and puerperal mania often committed immoral or illegal deeds, it was necessary to look beyond the symptoms to the underlying causes in order to assess the individual's

culpability. In addition, it was necessary for both the legal and medical professions, along with concerned individuals and communities, to determine appropriate guidelines for controlling the irrational and sometimes brutally violent behavior that seemingly rational individuals committed suddenly in the midst of everyday activities. This mixture of rationality and irrationality, of willfulness and compulsion, made judgments of culpability difficult to attain. Traditional assessments of culpability involved determinations of the individual's intention, motive, and awareness of right and wrong. By 1800 legal precedents regarding these concepts were directly challenged in the courts.[16] In 1825 Etienne Jean Georget (1795-1828) asserted that physiological abnormalities prompted insanity. As Jan Goldstein observes in *Console and Classify,* in the mid-1820's, Georget "had the temerity to engage the legal profession in a boundary dispute," and before long he succeeded in establishing *médecin des aliénés* as expert witnesses in court (169).[17] This argument led alienists (most notably Isaac Ray in America, and Henry Maudsley, John Charles Bucknill, and Daniel Hack Tuke in England) to insist that only medical experts were qualified to assess a defendant's behavior and mental state. They argued that lawyers and lay jurors lacked the expert training needed to distinguish monomaniacal impulses from common (understandable, predictable, or legitimate) outbursts of passion. They asked, in effect, "Given the fact that monomaniacs talk and act rationally in everyday life but suddenly commit violent, irrational acts like infanticide, do we dare trust untrained laymen to discern the existence of unseen lesions of the will or moral affections?"

This alienist argument could not have succeeded, however, without the help of several skilled lawyers, who were willing to challenge traditional legal definitions and precedents. In England Thomas Erskine, who defended James Hadfield in 1800, and Alexander Cockburn, who defended Daniel M'Naghten in 1843, realized that they could defend their clients by asserting an insanity defense and boldly challenging legal standards of insanity. By asserting that their clients qualified for an acquittal on the grounds of partial insanity, Erskine and Cockburn won victories both for their clients and alienist discourse. Both men argued that traditional views of culpability were inadequate. They also challenged the concept of *mens rea,* that is, a mind that knows the difference between right and wrong but intentionally chooses wrong.[18] According to long-standing legal precedents, a defendant who exhibited criminal intention and an understanding of the Law and general concepts of morality was judged guilty, but a defendant who exhibited neither a rational motive nor an intelligible understanding of right and wrong was judged insane.[19]

The Hadfield trial in 1800 challenged this legal perspective and set a new precedent for attributing religious delusion to irresistible impulse. Hadfield, who had suffered serious head injuries in the Napoleonic wars, believed that the Second Coming of Christ was imminent. He believed that ridding the world of corruption, including an inadequate King, would prepare the world for the Second Coming. His assassination attempt on George III was undeniably premeditated, and Hadfield clearly knew that the act was wrong. He even requested execution because he thought that he could forestall the end of the world if he sacrificed his own life. Because Hadfield's delusion did not

completely diminish his intellectual capacity, he did not qualify for an acquittal based upon traditional legal tests of insanity.

Hadfield's lawyer Thomas Erskine, who had gained fame by defending Lord Gordon and Thomas Paine, argued that the legal requirement for a *total* loss of reason was itself unreasonable. Pushed to its logical conclusion, this requirement would demand that a man not know his own name or where he lived. Erskine argued that in Hadfield's case "reason is not driven from her seat, but distraction sits down upon it along with her, holds her, trembling upon it, and frightens her from her propriety." In addition, Erskine argued that Hadfield's false reasoning was "not false from any defect of knowledge of judgment, but because a delusive image, the inseparable companion of real insanity, is thrust upon the subjugated understanding, incapable of resistance because unconscious of attack" (qtd. in Walker 77). In other words, Hadfield was not totally insane; he was capable of rational judgment, but his delusion about the King and the Second Coming interfered with his reasoning. The jury agreed with Erskine's redefinition of delusion, and Hadfield was acquitted. Recognizing that it would be unwise to release Hadfield, the authorities pressured Parliament to draft the *Insane Offenders Bill,* which stipulated mandatory confinement for persons acquitted on the grounds of insanity.[20]

Hadfield's trial marks a significant development in legal discourse because, as Joel Eigen notes, "Erskine successfully introduced into English jurisprudence the notion that a cool and calculated act could still be the act of a mad person" (50). Hadfield knew that the deed was *legally* wrong, but he did not believe it was *morally* wrong. His

delusion about being an instrument of God made his action a moral imperative. By challenging the jury to look at the world through Hadfield's eyes before pronouncing him culpable for the assassination attempt, Erskine succeeded in setting an important precedent for alienist theories of partial insanity and delusion (Eigen 51).

Although the Hadfield trial challenged the legal requirement for total insanity, the "demise" of the requirement did not occur until 1843 during the M'Naghten trial (Finkel 16). On January 20, 1843, Daniel M'Naghten shot Edward Drummond in an attempt to assassinate the prime minister, Sir Robert Peele. M'Naghten, a Chartist sympathizer, claimed that Peele's Tory agents persecuted him. He told the police that the Tories "have entirely destroyed my peace of mind. . . . I cannot sleep nor get no rest from them in consequence of the course they pursue towards me. . . . they do everything in their power to harass and persecute me; in fact, they wish to murder me" (qtd. in Walker 91). The police and prosecution dismissed M'Naghten's charges as evidence of delusion, but Norman Finkel suggests that "M'Naghten may have been speaking the truth—and that the murder was a political act taken in self-defense, rather than an insane assassination attempt (17). Finkel goes on to explain that although M'Naghten was eligible to vote, a Tory agent named Robert Lamond, harassed him and "made it difficult for M'Naghten to exercise his right" (18). Because neither the prosecution nor the defense investigated M'Naghten's charges, though, the trial became a debate about partial insanity instead of political persecution.[21]

The prosecutor Sir William Follett argued that M'Naghten did not qualify for an acquittal because he knew right from wrong and because the assassination attempt was

clearly premeditated. To counter Follett's argument, M'Naghten's lawyer, Alexander Cockburn, who later became Attorney-General and Lord Chief Justice, needed first to establish the legitimacy of partial insanity in a murder trial, second to prove that M'Naghten was partially insane, and third to prove that this condition excused M'Naghten. Cockburn argued that M'Naghten's insanity deprived him of "all power of self-control." Summoned to testify for the defense, Edward T. Monro and Sir Alexander Morison, both physicians for Bethlem Asylum, emphasized M'Naghten's lack of control and restraint. When Forbes Winslow was called to testify (even though he had never personally interviewed M'Naghten) declared M'Naghten insane and asserted that M'Naghten "committed the offence in question whilst afflicted with a delusion, under which he appears to have been labouring for a considerable time." Cockburn also quoted Isaac Ray's discussion of "the disease in which the mind, without being wholly driven from its propriety, pertinaciously clings to some absurd delusion" as refutation of the requirement of total insanity (Ray 21). Furthermore, Cockburn reiterated Erskine's discussion of unconscious, irresistible impulses and concluded, "I trust that I have satisfied you by these authorities that the disease of partial insanity can exist—that it can lead to a partial or total aberration of the moral senses and affections, which may render the wretched patient incapable of resisting the delusion, and lead him to commit crimes for which morally he cannot be held responsible" (qtd. in Walker 94).

Cockburn's successful defense of M'Naghten, with its description of insanity as a lesion of moral affections rather than a lesion of the intellect, forced a re-examination not only of the legal criteria for an insanity defense but also sentencing procedures. Many

people were concerned about the consequences society would suffer if criminal insanity were not clearly defined and laws penalizing criminal activity were not rigorously enforced. The following poem appeared in several newspapers after M'Naghten's acquittal in 1843:

> Ye people of England exult and be glad
> For ye're now at the will of the merciless mad.
> Why say ye that but three authorities reign—
> Crown, Commons, and Lords!—You omit the insane!
> They're a privilg'd class, whom no statutes controls,
> And their murderous charter exists in their souls.
> Do they wish to spill blood—they have only to play
> A few pranks—get asylum'd a month and a day—
> Then heigh! to escape from the mad-doctor's keys,
> And to pistol or stab whomsoever they please.
> Now the dog has a human-like wit—in creation
> He resembles most nearly our own generation:
> Then if madness for murder escapes with impunity,
> Why deny a poor dog the same immunity?
> So if dog or man bit you, beware being nettled,
> For crime is no crime—when the mind is unsettled.
> (qtd. in Finkel x)

According to the poet, acquittals due to insanity were a threat to public safety because dangerous criminals would be free "to pistol or stab whomsoever they please." It was also feared that crimes would go unpunished because criminals would realize that all they had to do to win acquittals was claim (either before or after their crimes) that they suffered delusions or irresistible impulses. Even Queen Victoria objected to M'Naghten's acquittal in a letter to Prime Minister Peele:

> We have seen the trials of Oxford and MacNaghten[22] conducted by the ablest lawyers of the day . . . and *they allow* and *advise* the Jury to pronounce the verdict of *Not Guilty* on account of *Insanity*—whilst *everybody* is morally *convinced* that both malefactors were perfectly conscious and aware of what they did! (Benson 1:587)

Public disapproval of M'Naghten's acquittal and commitment to Bethlem Asylum as a monomaniac prompted the *Times* to comment on March 6, 1843,

> . . . still we would, not captiously nor querulously, but in a spirit of humble and honest earnestness, of hesitating and admiring uncertainty, and of almost painful dubitation, ask those learned and philosophic gentlemen to define, for the edification of common-place people like ourselves, where sanity ends and madness begins, and what are the outward and palpable signs of the one and the other . . . (qtd. in Walker 95)

The House of Lords soon demanded an official response from the Justices. After three months of deliberation on five specific questions concerning insanity pleas, the Justices presented the House with a set of guidelines, known as the M'Naghten Rules, which stipulated

> to establish a defence on the ground of insanity, it must be clearly proved that, at the time of the committing of the act, the party accused was labouring under such a defect of reason, from disease of the mind, as not to know the nature and quality of the act he was doing; or, if he did know it, that he did not know he was doing what was wrong.[23]

The Rules replaced the requirement for a total loss of reason with a "defect of reason." While this modification did not eliminate the knowledge test, it reduced the comprehensiveness of the test. It was no longer a test of the individual's general knowledge and awareness of right and wrong, but a test focusing specifically on the "time of the committing of the act." If the evidence and testimony indicated that the defendant was unable to distinguish between right and wrong during the commission of the crime, an insanity defense could be asserted. Thus, the Rules made the insanity defense somewhat easier to assert, but, as Nigel Walker concludes from his study of court statistics during the nineteenth century, insanity defenses were successful only

about 50% of the time.[24] Acquittals and convictions seemed to depend less on legal definitions and precedents than the jurors' common sense and their emotional response to the defendant.[25] As jurist James Fitzjames Stephen observed in 1883, that the jury's "decision between madness and crime turns much more upon particular circumstances of the case and the common meaning of words, than upon the theories, legal, or medical, which are put before them" (2.186).

The boundaries between insanity and culpability remained ambiguous and continued to shift. Thirteen years after the M'Naghten Rules were established, jurors still found it difficult to judge what constituted insanity and what qualified as an exculpable condition. In 1856 Charles Westron, a crippled man who had exhibited symptoms of hereditary insanity, stood trial for murdering a solicitor named Mr. Waugh. At the conclusion of the trial, the jury stated, "We find the prisoner guilty of wilful murder. We do not think he ought to be acquitted on the ground of insanity, but we recommend him to mercy because in his case there were strong predispositions to insanity" (302). The incongruity of declaring Westron guilty of willful murder and then adding that evidence of insanity suggested the need for mercy elicited laughter in the courtroom and provoked the *Times* to write that the verdict was "a mockery of the solemnities of justice" (qtd. in "Criminal Jurisprudence of Insanity" 391). Historian Roger Smith explains, "Available ways of seeing either attributed responsibility or excluded it, and in finding a practical way through this, the jury showed that society's cognitive schemes were incoherent at this point" ("Boundary" 370). Faced with the realization that human behavior frequently defies simplistic categories of guilt,

innocence, sanity, and insanity, the jury attempted to reconcile opposing priorities and assumptions by pronouncing Westron guilty and then recommending him to mercy. Ten years after the Westron trial, Dr. Daniel Hack Tuke commended the jury's "attempt to recognize different degrees of moral responsibility" ("Insanity" 302).

Even though the M'Naghten verdict was a victory for alienist discourse,[26] alienists were not satisfied with the guidelines established in the Rules. They argued that awareness of one's actions, including the wrongness of the actions, did not mean that the individual had control over the actions. The central issue, according to alienists, was power, not knowledge. They argued that lesions of the will, hereditary predisposition, dysfunctions of the nervous system, and brain diseases diminished one's power to act freely. Maudsley, Prichard, Bucknill, and Ray all asserted that any test that rested on the defendant's knowledge of right and wrong was insufficient.[27] Bucknill challenged the legal test of knowledge in his 1854 *Unsoundness of Mind in Relation to Criminal Insanity*:

> *Responsibility depends upon power, not upon knowledge, still less upon feeling. A man is responsible to do that which he can do, not that which he feels or knows it right to do.* If a man is reduced under thraldom to passion by disease of the brain, he loses moral freedom and responsibility, although his knowledge of right and wrong may remain intact. (60, Bucknill's emphasis)

Maudsley also condemned the legal test. In his 1863 article "Homicidal Insanity," he asserted that irresistible impulses counteract the will. To emphasize his point, he described a woman who repeatedly attempted to strangle her daughter as "an organic machine set in destructive motion by the morbid cause" (337).

This assertion that insanity was primarily a somatic affliction caused by abnormalities in the nervous system diametrically opposed the moralist position that insanity was a result of improper moral training and a lack of discipline. Although alienist theories of the mind and responsibility were recognized as legitimate, scientific views by the middle of the nineteenth century, public disapproval of insanity verdicts suggests that many Victorians were troubled by alienist assertions about human physiology. As Janet Oppenheim notes, "The Victorian public did not want to hear that neural impulses or chemical reactions, operating according to predictable laws, could alone explain the complex behavior of individual people" (44).

## Crossing the Boundaries Between Clinical Observation and Fiction

As we have seen, nineteenth-century physicians, jurists, and reformers attempted to define insanity and to establish consistent guidelines for responding to the irrational and often dangerous behavior of men and women afflicted with insanity. While these concerned citizens negotiated conflicting assumptions and priorities in their attempts to help afflicted individuals and protect communities, Victorian novelists explored a variety of insanity issues, including the conflict between moral and somatic causes, certification and commitment procedures, and asylum conditions. In their literary representations of the borderland, Dickens, Trollope, and Braddon mingled personal observations, philosophical assumptions, and scientific assertions as they examined borderland disorders. Like their contemporaries, they sometimes asserted credible mitigating factors and expressed a sympathetic attitude toward their characters, while at other times they

condemned their mad characters for arrogantly dismissing social conventions, moral codes, and laws. As they negotiated contemporary concerns, prejudices, and practices regarding insanity, they became "gifted creators of variations upon received themes" (Greenblatt 229), and in the process created individual characters and situations that invited the reading public to consider the internal struggles insane men and women suffered.

The fictional lives represented in literature also provided a professional service; they could be discussed and debated by physicians, who were often hampered by Victorian concepts of privacy, manliness, and respectability when they tried to obtain detailed information about insane behavior. These "case studies" offered physicians inexperienced with insanity opportunities to test their diagnostic skills.[28] In 1859 John Charles Bucknill recognized the value of literary representations of "the transition from mental ease to disease" (Hunter and Macalpine 1064) and wrote several articles for the *Journal of Mental Science* on Tennyson's *Maud and Other Poems* and Shakespeare's *Macbeth, Hamlet,* and *King Lear.* In addition, he published *The psychology of Shakespeare,* which was reprinted in 1867 as *The mad folk of Shakespeare.* In 1862 G. G. Gervinus wrote a psychological study titled *Shakespeare,* and in 1863 John Conolly wrote *A Study of Hamlet.* In 1865 Henry Maudsley challenged Gervinus's and Conolly's interpretations in an article titled "Hamlet" for *Westminster Review.* Maudsley was so sure of his interpretation that he later reprinted his article in the second edition of his treatise *Body and Mind* (1873) and wrote his own *Shakespeare* in 1905. In 1860 he analyzed Edgar Allan Poe's life in light of hereditary degeneration (Turner 360-361).

Collie notes that Maudsley's article on Tennyson's "Lucretius," demonstrates "that a physician might have something to say about a poem and that a poet might choose to be scrupulously scientific" (58). Summarizing Maudsley's interest in literature, Collie writes that Maudsley

> continued to be fascinated by imaginative literature, accepting the idea, *faute de mieux,* that a poet or dramatist might provide in a portrait the psychological detail that could not be obtained from the patient or asylum inmate. In the case of a dramatist of acknowledged reputation, like Shakespeare, Maudsley thought a play's enduring qualities represented something like a universal, folk truth . . . so that for anyone interested in the human condition a play might well provide more reliable information that [*sic*] any system of metaphysics. . . . He was similarly impressed by Goethe, where his interest was reinforced by George Lewes' biography. Literature and medicine were for Maudsley not in opposition to each other. Both writers and psychiatrists aspired to deep knowledge of people and of the human race. (17)

Although Maudsley appreciated Shakespeare, Goethe, and Tennyson, it seems that he ignored British novelists, apparently deeming them unworthy of serious consideration.

Although Maudsley did not discuss the psychology of popular novels, they served the same function for the public that the literature of Shakespeare, Goethe, and Tennyson served for men like Maudsley, Bucknill, and Conolly. The reading public could "get to know" fictional characters in a way that they could not know asylum inmates or criminals standing trial. Some of the novels allowed the reading public close, even intimate, acquaintance with characters who exhibited obsessions, delusions, and mad impulses: Monks in *Oliver Twist*, Mr. Dick in *David Copperfield*, Bradley Headstone in *Bleak House*, Miss Havisham in *Great Expectations,* Mrs. Clennam in *Little Dorrit,* Lucy Snowe in *Villette*, Bertha Rochester in *Jane Eyre*, Countess Lovel in

*Lady Anna,* Robert Kennedy in *Phineas Redux,* Louis Trevelyan in *He Knew He Was Right,* Josiah Crawley in *The Last Chronicle of Barset,* and Lady Audley in *Lady Audley's Secret.*

Fictional situations also allowed the readers to grapple with the complex cultural network of assumptions, fears, and priorities inevitably attached to judgments of insanity and culpability. For example, Francis Trollope attacked contemporary assumptions about puerperal insanity, illegitimacy, and infanticide in *Jessie Phillips* (1844). Both Wilkie Collins and Charles Reade tapped into Victorian fears of illegal certification and confinement in their novels *The Woman in White* (1860), *Armadale* (1864-66), and *Hard Cash* (1863). Thus, Victorian novels provided valuable representations of contemporary views of the individual human mind and personality, along with representations of a variety of sociopolitical issues related to insanity.

Although the literary representations included unsympathetic characters like Bertha Rochester, who recalled images of brutes in asylums and exotic exhibits in freak shows, characters like Miss Havisham and Louis Trevelyan, who were misled by foolish expectations and then overwhelmed by identifiable passions, frequently invited the reader's sympathy, even though their actions merited moral condemnation. This mixture of sympathy and condemnation on the reader's part mirrored the complex responses Victorian society exhibited toward men and women deemed insane, especially those who stood trial for violent crimes. In *Melancholia and Depression,* Stanley Jackson writes that people respond to depressed individuals in a variety of ways, ranging "from

sympathetic comfortings and concerned efforts to provide care to irritated, rejecting responses and harsh exhortations" (402). He then adds,

> Whether the response has been instinctive or considered, tutored or untutored, respondents have often tried to understand, sometimes wittingly and sometimes unwittingly, what the sufferer was trying to "say." If the meaning of the distress was not made clear by the sufferer, what was being expressed? Might there have been a message in the distressed behavior? If so, what was the sufferer trying to communicate? (402)

Hearing the sufferer's voice and understanding his/her story was not a priority during most of the nineteenth century. During psychology's pre-professional years in the first half of the century, physicians began to pay close attention to their patients' behavior, but it was not until the end of century that physicians and psychologists like Freud actually began to *listen* to their patients' autobiographical stories and private thoughts. Consequently, few Victorians were exposed to the subjective worlds that depressed, deluded, and obsessed individuals inhabited.

Novelists like Dickens, Trollope, and Braddon, along with poets like Coleridge and Tennyson, helped "to bridge the gap of understanding, to draw the reader at least vicariously into the troubling subjective world of such a sufferer" (Jackson 396). They could explore psychological distress without getting mired in the complicated nosologies and terminology that accompanied philosophical and scientific treatments of insanity in the nineteenth century. A novelist like Anthony Trollope, who had observed serious depression in his father,[29] could recreate the irrational thoughts and mood swings associated with melancholia and monomania from a sympathetic perspective. A novelist like Mary Elizabeth Braddon could use a sensational plot to subvert traditional

assumptions about fictional heroines and real Victorian women. A novelist like Charles Dickens could create memorable images of self-inflicted suffering and provoke questions about moral responsibility and social obligations.

The novels that I have selected—*Great Expectations, Little Dorrit, He Knew He Was Right, The Last Chronicle of Barset,* and *Lady Audley's Secret*—specifically draw upon contemporary conceptions of madness and explore the ramifications of judgments of insanity and culpability on individuals and communities. In Dickens's world melancholia and monomania are usually the consequences of excessive pride, isolation, and neglected social responsibilities. Dickens does not explore the development of these conditions, but he creates vivid portraits in Miss Havisham, Mrs. Clennam, and Mr. Mopes. In addition, Dickens creates background communities that not only tolerate eccentricity and madness but actually find them entertaining; however, Dickens suggests that this indulgent response is irresponsible and harmful. Trollope also addresses the relationship between pride, isolation, and madness, but he digs more deeply into causes and outcomes than Dickens does. Trollope recreates in detail the development of melancholia and monomania in Louis Trevelyan and Josiah Crawley and explores the multilayered consequences of their behavior on relatives and neighbors. Trollope provides numerous characters who comment on the madness in their midst and who participate in the public responsibility of resolving the disruptive situation that has developed because of the mad behavior. Their responses represent the complex motives, doubts, and priorities that people negotiate as they grapple with questions of insanity and culpability. Like Trollope and Dickens, Braddon constructs a narrative that addresses

contemporary conceptions of melancholia, monomania, and puerperal mania. Unlike Trollope and Dickens, though, Braddon focuses on gender and hereditary factors in *Lady Audley's Secret.* Braddon uses Lady Audley's claim of puerperal insanity to explore the implications of the medicolegal debates between determinist and voluntarist views of insanity and expose the prejudices of a determinist view of female physiology. Lady Audley's "wickedness" is juxtaposed to several sympathetic glimpses of her character and a judgment of society's misogynist values. Thus, Braddon's concern extends beyond an examination of individual actions and community responses to a critique of Victorian society.

While alienists analyzed symptoms and asserted theories about physiological causes and while jurists and reformers analyzed social obligations and asserted theories about justice and deterrence, Dickens, Trollope, and Braddon explored the subjective experience of insanity itself. They created characters who talked about their sufferings in ways that the reading public could begin to comprehend. No literary representation or clinical case history could ever explain all the variables associated with insanity, but the novelists offered opportunities to consider factors that often led to irrational obsessions or sudden outbursts of violence. The fictional borderlands these authors created allowed their readers to experience vicariously the subjective world of madness and, thereby, temper their judgment of the afflicted characters (and possibly real men and women) with compassion.

## Notes

[1] This argument is reminiscent of traditional legal arguments that only *total* insanity could exculpate a criminal for his/her illegal deeds. As we shall see, this requirement for total loss of reason was based on juridical comments by Justice Hale in the seventeenth century and Justice Tracy in the eighteenth century. By the nineteenth-century, alienists in France, Britain, and America repeatedly challenged this legal requirement for total insanity.

[2] Barlow quotes passages from Pinel's *A Treatise on Insanity* (1801, English translation 1806), Esquirol's *Mental Maladies* (1838, English translation 1845), and Conolly's *An Inquiry Concerning the Indications of Insanity* (1830). All three physicians advocated "moral management," which focused on the patient's mind and attempted to curb irrational behavior by internalizing moral standards through self-discipline, rational thinking, and a more direct doctor-patient relationship.

[3] I have quoted the passage from Conolly's original discussion in *An Inquiry Concerning the Indications of Insanity,* 105-114. For Barlow's commentary, see *On Man's Power Over Himself to Prevent or Control Insanity,* 19-31.

[4] "For that which I am doing, I do not understand; for I am not practicing what I would like to do, but I am doing the very thing I hate. . . . For the very good that I wish, I do not do; but practice the very evil that I do not wish. . . . Wretched man that I am! Who will set me free from the body of this death?" (Romans 7:15-24).

[5] For Conolly's original discussion, see *An Inquiry Concerning the Indications of Insanity,* 25.

[6] As alienist discourse regarding irresistible impulse and hereditary predisposition gained acceptance in mid-Victorian years, the hope of cure dwindled. Asylums once again became containment facilities. They never reverted to the deplorable conditions that eighteenth-century inmates suffered, but the domestic model of the moral managers was replaced by mammoth asylums that housed hundreds of patients. Colney Hatch Asylum, for example, opened in 1851 during the Great Exhibition and housed over 1200 patients. No matter how pleasant the mammoth asylums appeared to visitors, individual treatment was impossible. For more detailed discussions of moral management, private asylums of the early nineteenth century, and mammoth asylums of the Victorian years, see Michel Foucault's *Madness and Civilization* and *The Birth of the Clinic*; Roy Porter's *Mind Forg'd Manacles*; Elaine Showalter's *The Female Malady*; Andrew Scull's *Museums of Madness*; William Parry-Jones's *The Trade in Lunacy*; Anita Levy's *Other Women,* and Dora Weiner's "Mind and Body in the Clinic: Philippe Pinel, Alexander Crichton, Dominique Esquirol, and the Birth of Psychiatry."

[7] Not all alienists agreed with Maudsley's materialism. Phrenologist Daniel Noble, for example, did not find it necessary to adopt a materialist position. In his 1853 *Elements of Psychological Medicine,* Noble emphasizes that scientific discoveries in physiology need not be regarded as proof of a materialistic world view:

> There is nothing in the physiological study of the brain and nervous system which *ought* to suggest the approaches even of materialism. Whilst here below, the actions of the spirit occur through organic

> intervention. . . . Yet it is no more the case that the material brain is the thinking principle, and the separate parts divisions of the soul, than it is true that the music of the lyre inheres in the instrument, and that the melodies which art can elicit from it, are self-produced by the particular strings. (82-83)

Biographer Michael Collie notes that Maudsley was often criticized by his colleagues for his cynicism and agnosticism:

> [W]hen it came to matters of belief or doctrine, many medical superintendents believed it correct to run their asylums on Christian principles. . . . Equally, those who still gave credence to the idea of moral insanity naturally felt that Christian habits and values were relevant when it came to treatment. During Maudsley's editorship direct, explicit discussion in the *Journal of Medical Science* of the conflict between religion and science had been avoided, but Maudsley's own work was too directly irreligious for its "Materialism" or "Positivism" to be ignored. (34).

Collie specifically notes that Harrington Tuke objected to Maudsley's editorship of the *JMS*. Tuke did not specify the "certain doctrines" and "certain tenets" that he found "repugnant," but Collie attributes Tuke's objections to his disapproval of Maudsley's positivism (33). For additional discussions of Maudsley's life and writings, see Trevor Turner's, "Henry Maudsley—psychiatrist, philosopher and entrepreneur," 575-581; and Alexander Walk's, "Medico-Psychologists, Maudsley and the Maudsley," 19-30.

[8] Roger Cooter's study "Phrenology and British Alienists, ca. 1825-1845" explains that phrenology, with its emphasis on the organs of the brain and their corresponding mental faculties, helped bridge the philosophical gap between moral and somatic views of insanity. Both phrenologists and moralists agreed that the lack of mental exercise, as well as the excess of it, was a predisposing cause of insanity. Consequently, they shared an interest in moral instruction and in designing asylums,

along with prisons and schools, as moral institutions, "whose special environment could be manipulated for redirecting, training, and strengthening specific mental organs" (78). Cooter argues that the phrenologist participation in social reform helped to reconcile morality and science: "No longer was morality to be the exclusive province of theology; the laws of physiology were now to share that administration and with an even greater indisputability" (79). For a more detailed discussion of phrenology and its influence, see Cooter's essay in *Madhouses, Mad-Doctors, and Madmen: The Social History of Psychiatry in the Victorian Era,* ed. Andrew Scull (Philadelphia: U of PA, 1981). 58-104.

[9] One of the most famous studies of melancholia/melancholy is Robert Burton's 1621 *Anatomy of Melancholy.* Burton and subsequent writers primarily associated *melancholia* with gloomy, sad passions accompanied by delusions or delirium, but the term was also used to identify various forms of partial insanity, including both depressed and excited states. By the end of the eighteenth century, the confusion surrounding the term *melancholia* prompted several physicians to devise more descriptive labels. For example, in 1812 Benjamin Rush introduced the term *tristimania* to describe the depressive passions of melancholia and *amenomania* to describe the excited passions of melancholia. A few years later, Esquirol introduced two more terms, hoping to eliminate the confusion that still existed and to prompt a distinction between clinical and poetic observations of melancholy. Esquirol suggested the term *monomania* for "that form of insanity, in which the delirium is partial, permanent, gay or sad" and the term *lypemania*

in place of Rush's *tristimania* (200). Johann Christian Heinroth added several labels by creating a new term for each additional symptom, such as *melancholia aboyle* (with apathy) *melancholia furens* (with quiet fury). The confusing array of terms describing these forms of partial insanity, led phrenologist Andrew Combe to write in 1831 that the tradition of naming mental disorders according to individual symptoms rather than functional disorders confused and hampered scientific study. Combe recommended simplifying the classifications: "Accordingly 'Monomania or Melancholia' were no longer to be regarded as diagnoses 'indicative of a specific disease' but as names given to a 'combination of symptoms' denoting 'those cases in which only one or a few of the mental powers are deranged, the others remaining entire'" (Hunter and Macalpine 813).

[10] *Monomanie homicide,* a condition Etienne Jean Georget, one of Esquirol's students, discussed in an 1825 brochure, was first used during Henriette Cornier's murder trial in 1826. This trial seized the public's attention, not only in France but also in America and England.

> On 4 November 1825 in Paris, Henriette Cornier, a twenty-seven-year-old servant, was sent to buy some cheese. Mme. Belon, the shopkeeper, had a nineteen-month-old daughter, Fanny, of whom Henriette was fond. On this occasion she was allowed to take the child for a walk. Instead Henriette led Fanny home, where she severed her head with a kitchen knife. Two hours later the mother called for her daughter. From the top of the stairs, Henriette shouted, "she is dead," and threw the head into the street. Questioned soon after, covered with blood, she answered apathetically, first, "C'est une idée qui m'a pris!" (The idea came to me!), and then, "J'ai voulu la tuer" (I intended to kill her). (During 86).

The unresolvable incongruity of the case—the obvious wrongness of her deed and the equally obvious common sense judgment that her act was insane—led the court to

appoint a commission of medical experts to determine if Cornier could stand trial. The experts, including Esquirol, found that they were unable to come to a conclusion without more time for clinical observations. The court granted the commission another four months to observe Cornier at Salpêtrière, but they again returned with an inconclusive report, this time stating that they were unsure of the impact her arrest and confinement had on her mental state. Without more specific guidance from the commission, the jury found Cornier guilty of murder, but sentenced her to hard labor rather than execution because the deed was not premeditated (During 88). Daniel M'Naghten's trial and the impact it had on legal criteria for an insanity defense will be discussed later in "Borderland Disputes."

[11] The turning point occurred in France in the early 1850's when Falret, Morel, and Bariod began to challenge its legitimacy. Jan Goldstein explains in *Console and Classify* that the concept of monomania had served the alienists well, but once they were accepted as professional specialists and had secured a place for forensic psychiatry, they "were willing to consider seriously the internal weaknesses of the monomania doctrine, weaknesses they had overlooked decades earlier, or had denied or studiously ignored when outsiders called them to their attention" (195). As evidence of this re-evaluation, Goldstein cites declining statistics for admissions at Salpêtrière and concludes, "newly diagnosed monomaniacs had all but vanished by 1870" (155).

[12] Unlike Prichard, Maudsley emphasized that the mind could not remain unimpaired: "In vain do men pretend that the mind of the monomaniac is sound apart

from his delusion" (*PPM* 372). He believed that delusions and obsessions had a global impact on the brain and thus rendered all delusions and obsessions dangerous, even if they did not appear to be homicidal or suicidal.

[13] For more detailed discussions of female madness, see Elaine Showalter's *The Female Malady: Women, Madness, and Culture, 1830-1980*; Jane Ussher's *Women's Madness: Misogyny or Mental Illness?*; and Anita Levy's *Other Women: The Writing of Class, Race, and Gender, 1832-1898.*

[14] I will discuss ways that Mary Elizabeth Braddon challenges the implications of this assumption in her 1862 novel *Lady Audley's Secret* in chapter four. For a discussion of philosophical perspectives on women and moral agency, see Kathryn Pauly Morgan, "Women and Moral Madness," 146-167.

[15] The theory of unitary psychosis enabled physicians to view insanity as a degenerative process with identifiable stages rather than as numerous diseases separated by a host of symptoms. Wilhelm Griesinger (1817-1868) explains this theory of *Einheitspsychose* in his influential 1845 treatise *Mental Pathology and Therapeutics*:

> Observation shows, further, that in a great majority of cases, those conditions which form the first leading group [melancholia, monomania, and mania] precede those of the second group [chronic mania and dementia]. . . . There is, moreover, again presented within the first group, in a great proportion of cases, a certain definite succession of the various forms of emotional states, whence there results a method of viewing insanity which recognizes in the different forms, different stages of one morbid process; which may, indeed, be modified, interrupted, or transformed by the most varied intercurrent pathological circumstances, but which, on the whole, pursues a constantly progressive course, which may proceed even to complete destruction of mental life. (207)

[16] For a detailed discussion of insanity trials and the development of medical testimony prior to 1800, see Joel Eigen's *Witnessing Insanity: Madness and Mad-Doctors in the English Court.*

[17] Articles 43 and 44 of the Napoleonic Code granted the courts the power to commission a panel of medical experts to perform autopsies and then report their findings to the court. While these "medico-legal consultations" also allowed for deliberations on the mental state of the defendant, clinical observations and detailed deliberations were not commissioned because of "the judicial belief that laymen could readily identify insanity in their fellows and could provide the court with entirely adequate testimony concerning the mental status of the accused person" (Goldstein 162-63). In his 1837 *A Treatise on the Medical Jurisprudence of Insanity,* Isaac Ray (1807-1881), founder of the American Psychiatric Association, picked up Georget's argument and condemned American courts for failing to recognize the importance of expert testimony and specialized training:

> Insanity is a disease, and, as is the case with all other diseases, the fact of its existence is never established by a single diagnostic symptom, but by the whole body of symptoms, no particular one of which is present in every case. To distinguish the manifestations of health from those of disease requires the exercise of learning and judgment; and, if no one doubts this proposition when stated in reference to the bowels, the lungs, the heart, the liver, the kidneys, &c., what sufficient or even plausible reason is there why it should be doubted when predicated of the brain? (45)

In addition to emphasizing the importance of medical testimony provided by practitioners trained in diagnosing mental disorders, Ray advocated replacing the American tradition

of calling witnesses to testify specifically for either the defense or the prosecution with the French system of impartial, court-appointed experts.

[18] The concept of *mens rea* was originally an ecclesiastical concept. It was absorbed by the secular law gradually as the limitations of the Saxon system of strict liability became evident. In a liability system, only the outer circumstances of crimes were considered. The concept of *mens rea,* however, allowed the courts to consider thoughts, motives, emotions, and desires as mitigating factors and thus to distinguish between intentional wrong and accidental wrong.

[19] In the tenth century, the laws of Æthelred distinguished between an individual who "commits a misdeed involuntarily" and "one who offends of his own free will." This distinction between voluntary and involuntary actions led to a requirement that a wicked intention must be present for an act to be prosecuted as a crime. In the thirteenth century, the Statute on the King's Prerogative distinguished between *idiocy,* a permanent retardation usually existing since birth, and *madness,* a temporary or periodic irrationality that could alternate with what Henry de Bracton (d. 1268) called "lucid intervals" (Walker 28). Nineteenth-century studies of criminal insanity often begin with Chief Justice Hale's *History of the Pleas of the Crown* (written in the 1670's but not published until 1736). Like previous jurists, Hale believed that individuals completely overtaken by madness should not be held accountable for their actions; however, individuals still capable of rational judgment, those who could distinguish right from wrong, should be held accountable:

> [S]ome persons, that have a competent use of reason in respect of some subjects, are yet under a particular dementia in respect of some particular discourses, subjects, or applications; or else it is partial in respect of degrees; and this is the condition of very many, especially melancholy persons, who for the most part discover their defect in excessive fears and griefs, and yet are not wholly destitute of the use of their reason; and this partial insanity seems not to excuse them in the committing of any offence for its matter capital. (30)

In this passage Hale distinguishes two forms of partial insanity: first, diminished reason characterized by alternating states of lucidity and lunacy; second, melancholia characterized by varying degrees of excessive passions. Hale discounts melancholia as an exculpable condition because he believes that sadness and depression do not necessarily diminish one's understanding of right and wrong. Periodic lunacy, on the other hand, does qualify as an exculpatory condition because moments of clear understanding alternate with moments of complete confusion. While crimes committed during lucid moments render the perpetrators "subject to the same punishment, as if they had no such deficiency," Hale stresses that crimes committed "[i]n the heights of distemper" render the perpetrator "not guilty, as if he were mad without intermission" (31). Hale's argument led to a requirement for total lunacy that was labeled the Wild Beast Test in 1724 when Justice Tracy explained in his summation for *Rex v. Arnold* that "it must be [for legal exemption] a man that is totally deprived of his understanding and memory, and doth not know what he is doing, no more than an infant, than a brute or a wild beast." For further discussion of the Wild Beast Test, see Finkel, *Insanity on Trial,* 12-16; and Walker, *Crime and Insanity in England,* 52-57.

[20] For Hadfield's trial records, see Howell's *State Trials.* n.s. 27: 1281-1356.

[21] For M'Naghten's trial records, see *State Trials.* n.s. 4:847-934, and *English Reports,* 8:718.

[22] For a summary of the various spellings of M'Naghten's name, see Maeder 24.

[23] For the complete text of the M'Naghten Rules, see *Clark and Finnelly's Reports.* 10:200. For more detailed discussions of the continuing debate over the definitions and conceptual boundaries inherent in the M'Naghten Rules and subsequent guidelines, see Norman J. Finkel's *Insanity on Trial*; Thomas Maeder's *Crime and Madness: The Origins and Evolution of the Insanity Defense*; Roger Smith's *Trial by Medicine: Insanity and Responsibility in Victorian Trials*; and Nigel Walker's *Crime and Insanity in England.*

[24] In *Crime and Insanity in England,* Walker provides several charts compiling court statistics between 1740 and 1945. See pages 67, 85-89, and 264-267.

[25] Writers with a good eye for inconsistency and a knack for satire commented on the incongruent judgments pronounced by Victorian men and women every day. For example, in 1868 Anthony Trollope observed in *He Knew He Was Right* :

> We know that the sane man is responsible for what he does, and that the insane man is irresponsible; but we do not know,—we only guess wildly, at the state of mind of those, who now and again act like madmen, though no court or council of experts had declared them to be mad. The bias of the mind is to press heavily on such men till the law attempts to touch them, as though they were thoroughly responsible; and then, when the law interferes, to screen them as though they were altogether irresponsible. The same juryman who would find a man mad who has murdered a young woman, would in private life express a desire that the same young man should be hung, crucified, or skinned alive, if he had moodily and without reason broken his faith to the young woman in lieu of killing her. (1.299-300)

As Trollope suggests, common sense dictates that insanity excludes culpability, but he recognizes that people are not always guided by common sense, and even when common sense does serve as a guide, it is difficult to sort out the complexities tied to judgments of insanity and culpability.

[26] During M'Naghten's trial the Solicitor General asked Edward Thomas Monro, a physician for Bethlem Hospital,

> "Is it now an established principle in the pathology of insanity that there may exist a partial delusion sufficient to overcome a man's moral sense and self-control, and render him irresponsible for his actions, exciting a partial insanity only, although the rest of the faculties of the mind may remain in all their ordinary state of operation?"

The directness and comprehensiveness of the question is itself indicative of the ground alienist discourse was gaining. Monro responded confidently, "'Yes, it is quite recognized . . .'" (*OBSP* 756).

[27] See Maudsley's *Responsibility in Mental Disease* 95-96; Prichard's *On the Different Forms of Insanity* 162-64; Bucknill's *Unsoundness of Mind in Relation to Criminal Insanity* 58-60, and Ray's *A Treatise on the Medical Jurisprudence of Insanity* 20-21.

[28] In a lecture delivered at London University in 1830, John Conolly described the inadequate preparation physicians received at British medical colleges regarding mental disorders:

> The interests of the public greatly require that medical men, to whom alone the insane can ever properly be entrusted, should have opportunities of studying the forms of insanity, and of preparing themselves for its treatment, in the same manner in which they prepare themselves for the treatment of other disorders. They have at present no such opportunities.

> During the term allotted for medical study, the student never sees a case of insanity, except by some rare accident. (qtd. in Hunter and Macalpine 806-807)

Because young physicians did not have many opportunities to study insane personalities directly, they studied disordered personalities that were available to them in print, that is, in medical treatises, in literature, and in press accounts of contemporary criminals standing trial. As Michael Collie explains, trial reports gave "accessible detail, of the kind which during the period in question (1859-79) could only with difficulty be obtained from patients" (38). He goes on to explain,

> In a court of law, people were questioned by counsel in probing sequences of questions of which there was scarcely an equivalent in medical practice. Furthermore, the law report was in the public domain, whereas the questions a physician put to a patient were private and privileged. Even if a London doctor in the 1870's had developed a technique which allowed a patient to talk freely about him or himself [*sic*], being frank about personal matters in a way many Victorians discreetly avoided, the doctor would not have felt at liberty to reveal the information he had obtained in this way. The law report, like the work of literature, permitted discussion of motives, compulsions, family relationships and states of mind generally, and for some time, though to a limited extent, compensated for the lack of case documentation. (38)

These public cases allowed novelists and other lay men and women to participate in the social task of defining insanity and devising guidelines for responding to insanity.

[29] Trollope's father suffered from severe headaches, depression, and an uncontrollable temper. In his autobiography *What I Remember,* Thomas Adolphus, Trollope's brother, describes his father's "terrible irritability . . . which sometimes in his later years reached a pitch that made one fear his reason was, or would become, unhinged" (205).

## Self-Created Madness in Dickens

> [M]oral management can also be seen as one among a number of attempts to combat the forces of disorder so threatening to the Victorians. In abandoning the methods of the eighteenth century, nineteenth-century physicians were not abandoning their role as guardians of the moral order and agents of social control. Physical restraint, coercion and exile are replaced by a philosophy of the self which emphasizes the dual nature of man, the power of the will to prevent and control insanity and which elaborated the arts of self-government. (Skultans, *MM* 9)

The moral managers whom Vieda Skultans describes are physicians and superintendents of nineteenth-century asylums, but her comment also serves as a useful introduction for my discussion of Charles Dickens's view of insanity. Like John Abercrombie, John Barlow, John Conolly, and other moral managers, Dickens subscribes to a theory of insanity that focuses on the positive effects of mental exercise and self-discipline and the negative effects of vanity, self-indulgence, and immorality. Like the moral managers, Dickens believes that moral instruction and social interaction provide more effective incentives and controls than the physical coercion and punishment practiced in many nineteenth-century asylums, prisons, and workhouses.[1]

Skultans's description of the moral managers as "guardians of the moral order" seems appropriate for Dickens also. As a keen observer and reprover of Victorian society, Dickens used his fiction and non-fiction to express his opinions on various

controversial issues regarding the borderland of partial insanity (conditions characterized by either temporary or periodic irrationality or compulsion). Unlike Trollope and Braddon, who present conflicting viewpoints within their narratives and then invite their readers to draw conclusions which may or may not coincide with the author's judgment, Dickens is more inclined to assert his judgments boldly, in effect telling his readers what their response should be. Dickens does not *recreate* the controversies within his narratives as Trollope does in *The Last Chronicle of Barset,* for example, when the residents of Barsetshire must evaluate the legal and ecclesiastical implications of Crawley's "peculiarities" or as Braddon does in *Lady Audley's Secret* when Robert Audley must weigh the evidence of Lady Audley's crimes, along with her claim of puerperal insanity and his uncle's request to treat Lady Audley compassionately. Dickens sees less ambiguity in the conflict between insanity and culpability. The presence of excessive pride, irresponsibility, malice, and other vices suggests to Dickens a degree of willfulness that should not be excused. Like the moral managers, he believes behavior can be changed through education and self-discipline. Consequently, he holds people accountable when they reject the counsel of others and neglect to discipline themselves. He sees self-absorption and self-indulgence as precursors of madness, and, although he expresses sympathy for physical suffering and mental anguish, he is not inclined to exempt men and women from their moral responsibility unless they are incapable of thinking rationally or caring for their basic needs.

Throughout his novels, Dickens demonstrates a particular interest in the relationship between sin and madness and the consequences of faulty reasoning. In *Tom*

*Tiddler's Ground, Little Dorrit,* and *Great Expectations* Dickens asserts a voluntarist view of melancholia and monomania, two borderland conditions familiar to Victorians.[2] He presents melancholia and monomania as volitional conditions stemming from excessive pride, irresponsibility, self-righteousness, malice, and other vices rather than as physiological conditions stemming from faulty reproductive organs, brain lesions, irresistible impulses, or hereditary predisposition. Willfulness is a root cause of the irrational behavior Mr. Mopes, Mrs. Clennam, and Miss Havisham exhibit after they deliberately withdraw from society, indulge their egos, and dwell on their emotional wounds. They inhabit a borderland where their self-created madness suggests "something of madness but more of sin."

## Dickens's Judgment of Borderland Inhabitants

As noted in Chapter 1, the borderland metaphor was used throughout the nineteenth century to acknowledge the ambiguous nature of partial insanity. As Maudsley suggested in *Responsibility in Mental Disease,* the boundaries could be adjusted according to the degree of sin and culpability associated with the mad behavior. Whether the assessments were conducted in a public courtroom, in a home, on the street, or in the media, the "prosecutors" and "defenders" constructed narratives to account for the individual's life. These alternate interpretations reflected not only the circumstances of the individual case but also the evaluators' assumptions and priorities. Like other evaluators, Dickens drew conclusions from his observations of behavior and then asserted interpretations that reflected his own values.

In "Where We Stopped Growing," an article written for *Household Words* in 1853, Dickens recalls two women who wandered through the streets of London during his childhood. Both women apparently suffered emotional breakdowns after losing a loved one, but Dickens pities one and condemns the other. The first woman Dickens describes is *Rouge et Noire,* "a poor demented woman . . . dressed all in black with cheeks staringly painted" (362). Dickens's sentimental response to her is evident throughout the sketch:

> The story went that her only brother, a Bank-clerk, was left for death for forgery; and that she, broken-hearted creature, lost her wits on the morning of his execution, and ever afterwards, while her confused dream of life lasted, flitted thus among the busy money-changers. A story, alas! all likely enough. . . . It is then she passes our boyish figure in the street, with that strange air of vanity upon her, in which, the comfortable self-sustainment of sane vanity (God help us all!) is wanting, and with her wildly-seeking, never resting eyes. So she returns to his old Bank office, asking "Is he come yet?" Not yet, poor soul! So she goes home, leaving word that indeed she wonders he has been away from her so long, and that he must come to her however late at night he may arrive. He will come to thee, O stricken sister, with thy best friend—foe to the prosperous and happy—not to such as thou! (362)

The epithets "broken-hearted creature," "poor soul," and "stricken sister" convey Dickens's sympathy, and his final allusion to Christ stresses that *Rouge et Noire* is an unfortunate woman who deserves pity rather than social ostracism.

In contrast to this sympathetic description of *Rouge et Noire,* Dickens expresses a harsh judgment of the White Woman of Berners Street:

> [W]hether she was constantly on parade in that street only, or was ever to be seen elsewhere, we are unable to say. The White Woman is her name. She is dressed entirely in white, with a ghastly white plaiting round her head and face, inside her white bonnet. She even carries (we hope) a white umbrella. With white boots, we know she picks her way through the winter dirt. She is a conceited, old creature, cold and formal in

> manner, and evidently went simpering mad on personal grounds alone—no doubt because a wealthy Quaker wouldn't marry her. This is her bridal dress. She is always walking up here, on her way to church to marry the false Quaker. We observe in her mincing step and fishy eye that she intends to lead him a sharp life. We stopped growing when we got at the conclusion that the Quaker had had a happy escape of the White Woman. (363)

Dickens alludes to the White Woman's self-absorption and vanity when he notes that "she was constantly on parade" and "pick[ed] her way through the winter dirt." He attributes her "mincing step and fishy eye" to an unpleasant personality and congratulates her former fiancé for perceiving her cold, proud personality before the wedding and thus avoiding a "sharp" life with a shrewish wife (362-63).

Why would Dickens pity *Rouge et Noire* and condemn the White Woman? Martin Meisel notes that Dickens's lack of sympathy for the White Woman is contrary to nineteenth-century sentiments, which usually "favor[ed] a virgin gone mad through a disappointment in love" (282). It seems, however, that the White Woman crossed the line between acceptable behavior and unacceptable behavior, or at least what Dickens considered acceptable. Dickens saw evidence of conceit and vanity in the White Woman that he did not see in *Rouge et Noire.* Although there was a "a strange air of vanity" about *Rouge et Noire,* she lacked "the comfortable self-sustainment of sane vanity." This observation, with its implication of acceptable levels of self-worth and self-respect, suggests that *Rouge et Noire* lost her sense of self. Her life became an all-encompassing "confused dream" as she searched for her brother day after day. She ceased to be an independent personality when her identity was displaced by her brother's tragedy. The White Woman, on the other hand, exhibited the same conceited personality that she had

before she was jilted. In fact, Dickens suggests that the vanity that he observed in her as she paraded through the streets is the same vanity that drove her fiancé away. Furthermore, unlike *Rouge et Noire* who "lost her wits," the White Woman "went simpering mad on personal grounds alone." This suggests a self-conscious self-pity. Her attention was focused on her own ego rather than on her lost lover or, as in *Rouge et Noire*'s case, on a lost brother. Because of the "evidence" of vain conceit Dickens sees in the White Woman, he considers her madness self-created and less deserving of pity or forbearance

Not all Londoners agreed with Dickens's judgment of the White Woman, though. Charles Mathews included representations of the White Woman and *Rouge et Noire* in his 1831 theatrical revue named Miss Mildew and Mrs. Bankington Bombasin, respectively. The reviewer for the *Morning Post* alludes to the two women as "objects of sympathy" and observes that Mathews's audience expressed "considerable displeasure" at his caricature of them (qtd. in Meisel 279-280). Evidently, the London playgoers either failed to recognize the signs of pride that Dickens noted in the White Woman, or they deemed them irrelevant. Consequently, their response to her was more sympathetic and protective than his.[3]

These contrasting judgments suggest that the criteria used to distinguish acceptable behavior from unacceptable behavior, normal from abnormal, and sane from insane are social constructions based on a mixture of individual and communal values. The fact that other Londoners did not arrive at the same conclusions that Dickens did regarding the White Woman and *Rouge et Noire* suggests that Dickens imposed a more

restrictive standard than the one applied by the larger community. A similar conflict in interpretation occurs between Dickens and more sympathetic Victorians regarding James Lucas. The boundaries that Dickens fixes between sin and madness inform his fictional representations of Mr. Mopes, Mrs. Clennam, and Miss Havisham, but he does not explore the ambiguous and variable nature of these boundaries within the narratives themselves. As we shall see in the next chapter, however, Trollope brings the problem of socially constructed definitions of insanity into the foreground of his narratives and invites his readers to examine the public standards and individual interests that influence assessments of insanity.

Like the White Woman of Berners Street, James Lucas, popularly known as the Mad Hermit of Hertfordshire, was criticized by Dickens for vanity and irresponsibility. Lucas (1813-1874) presented quite a spectacle for his many visitors as he sat upon a pile of dirt in his barricaded kitchen. The blanket he fastened around his naked body was "not partially or temporarily dirty, but dirty comprehensively and permanently," and his long hair was "so glued together in places by dirt, that it [hung] about in seeming strips as of rope yarn, or clotted ringlet" (Copping 307-308). Lucas's biographer Richard Whitmore suggests that Lucas's emotional problems began after he suffered the painful remedies used in the 1820's for *tinea capitis,* a form of ringworm "in which fungus attacks the roots of the hair, causing inflammation and severe scabbing" (Whitmore 12). The "cures" included the application of setons, pitch caps, and ointments made of whale oil and sulfuric acid. After Lucas survived these "cures," he refused to cut his hair and rebelled against all forms of restraint. He became a "self-willed and obstinate" boy and grew into

a man who flouted Victorian conventions in dress, religion, politics, and love (Whitmore 15).

At the age of thirty-five, he fell in love with Margaret Isabella Amos, a young girl no more than twelve years old. Rejected by the Amos family, Lucas began to depend upon his mother's affection entirely. When she died in 1849, he was inconsolable: "[W]hen the Hitchen undertaker Mr Isaac Newton called to collect the deceased lady to convey her to London for burial in the Hackney cemetery, James Lucas refused to let the undertaker take her. That was in 24 October 1849. Mr Newton eventually got his hands on the coffin 13 weeks later" (Whitmore 24). After the authorities forced Lucas to relinquish his mother's coffin, he withdrew into the house permanently. Fearing that his younger brother planned to kill him, Lucas barricaded the windows and doors with heavy timbers and iron. In addition, he refused to remove any of his mother's belongings. Twenty-five years after her death, investigators discovered that Lucas had kept his mother's bedroom just as she left it. Her clothing, toiletries, jewelry, and books were still neatly arranged, and "the four-poster bed was neatly made with the bedspread folded back as though awaiting her return" (Whitmore 69).[4]

While many people were fascinated by Lucas and some expressed compassion for him, Dickens judged him as a poseur and lambasted him in *Tom Tiddler's Ground,* a collection of seven stories published in 1861 in *All the Year Round.*[5] In "Picking up Soot and Cinders," the first chapter of *Tom Tiddler's Ground,* Mr. Traveller has heard of a hermit named Mr. Mopes and decides to see the "'slothful, unsavoury, nasty reversal of human nature'" for himself (589). Mr. Traveller finds a "sooty object in a blanket and

skewer . . . with matted hair and staring eyes" (593). He is appalled that curiosity-seekers continually indulge the hermit's perverse desire for attention by conversing with him through a barred kitchen window. He denounces Mr. Mopes as a "Nuisance" and tells him that it is impossible "'for a human creature to quarrel with his social nature . . . [to] separate himself from his kind and the habits of his kind, without becoming a deteriorated spectacle" (595-596).

In the chapter "Picking up Miss Kimmeens," Mr. Traveller uses the experience of one of the hermit's visitors to reproach Mr. Mopes and to emphasize that "'all mankind are made dependent on one another'" for mutual health and well-being (597). Miss Kimmeens explains that one day, when she was left alone at school, she was unnerved by "oppressive" silence. The "great want of human company" prompted her to imagine distorted faces in the furniture (605). Her imagination then latched onto memories about her classmates and teachers. She began "to brood and be suspicious" and concluded that "they all planned and plotted" and that "nobody" cared for her (605-606). Suddenly, though, she realized the error of her brooding and exclaimed, "'O those envious thoughts are not mine. O this wicked creature isn't me! Help me, somebody! I go wrong alone by my weak self! Help me, anybody!'" (607).

The moral of Miss Kimmeens's story is obvious: the solitude of the day allowed Miss Kimmeens to indulge her fears and suspicions and led her into an unhealthy state of mind. As Mr. Traveller explains, without healthy interactions with others and worthwhile activities to occupy her time, Miss Kimmeens brooded on exaggerated injustices and began to think irrationally. Mr. Traveller praises Miss Kimmeens for "'emerg[ing] from

her unnatural solitude, and look[ing] abroad for wholesome sympathy, to bestow and to receive'" and then exhorts Mr. Mopes "to come out too—from that very demoralizing hutch'" and seek positive social interactions that would lead to more healthy thinking and living (607). Neither Mr. Mopes nor his living counterpart James Lucas chooses to rejoin society, but Mr. Traveller's strong reproach indicates Dickens's assumption that the hermit could change his behavior if he were sufficiently motivated. Furthermore, Dickens's construction of Mr. Traveller's argument recalls an important presupposition of nineteenth-century associationism: "For association psychologists, a decision to return to human society was one of the strongest indications of renewed mental health, because it indicated the individual's decision to seek out sanative associations" (Kearns 123).

In "Picking up the Tinker," the epilogue to *Tom Tiddler's Ground*, a tinker, who shares Mr. Traveller's judgment of Mr. Mopes, asserts that the hermit's willful squalor is especially disgusting and shameful when so many hard-working people are unable to improve their living conditions. Comparing the hermit to useless metal, the tinker remarks, "[M]etal that rotted for want of use, had better be left to rot, and couldn't rot too soon, considering how much true metal rotted from over-use and hard service" (610). The tinker's dismissal of the hermit reiterates Mr. Traveller's comment that "only the idiot and the palsied" are exempt from social obligations (*TTG* 300), and that the community should turn its attention and sympathy toward the honest poor who are worn down by continual labor and ill-treatment. This harsh judgment may surprise readers familiar with Dickens's sympathetic appeals on behalf of asylum inmates and mental

deficients, but it is important to realize that neither Mr. Mopes nor James Lucas lacks the intelligence or capacity to care for himself.[6]

As in the case of the White Woman of Berners Street, not all Londoners shared Dickens's disapprobation of Lucas. Thousands of adults and children, both vagrants and notable personages, were fascinated by Lucas. Postcards, pottery, and china bearing Lucas's image were sold by local businessmen, especially after Lucas's death. In addition, Whitmore notes that the night train from Peterborough to London was nicknamed "The Lucas Train" because the crew would frequently stop the train so that they could jog over to Lucas's yard to share a drink with him (36). Recognizing the public interest in Lucas, a reporter for *London Society* named Edward Copping visited Lucas in 1862, a few months after *Tom Tiddler's Ground* was published. After suggesting that Dickens's readers might appreciate a factual report of Lucas's environment, appearance, and conversation, Copping writes that Lucas "is not a wholesome sight to look upon. . . . [Yet,] there is a good deal of intelligence and strength of will indicated" (307-308). Copping further notes that Lucas enjoyed demonstrating his knowledge of religion and politics:

> He is particularly anxious to impress upon me that I am puffed out with intellectual pride. . . . He overturns my opinions with ruthless energy. . . . I admit I am vanquished, and meekly lay down my arms. That I do so evidently gratifies the hermit, for it is his desire to be regarded as a conqueror over all kinds of opponents. It is easy to see, indeed, that he likes to be thought superior to the common run of mankind, and that he strives to show he has a vast amount of wisdom stowed away under his dirt and blanket, and that though he has abandoned the world, the world cannot well afford to abandon him. (308, 311, 312).

Even though Copping observes the same filthy living conditions and arrogant attitude that Dickens observed, Copping judges Lucas less harshly:

> Here is a man who is still young—he is scarcely middle-aged—who, if not a profound scholar, is at least well educated; who is conversant with good society, and can express himself in well-chosen and thoughtful language. . . . It is impossible not to feel that here are rich gifts rendered profitless, and a life that might be fruitful in results utterly running to waste.
>
> Let us be charitable in our judgment, however. Whether the man would delude others, or is himself deluded, he is equally worthy of our pity. (313)

Unlike Dickens, Copping apparently does not feel obligated to judge Lucas's history or wasted life. Dickens interviews Lucas from the stance of "a literary giant" who wishes to instruct not only Lucas but the reading public (Whitmore 40). Copping, on the other hand, is less interested in teaching a lesson than reporting the curious inconsistencies of Lucas's personality. Consequently, instead of condemning Lucas's mental state, he encourages his readers to pity the hermit.

In addition to the non-medical judgments expressed by Copping and Dickens, the Lunacy Commission and several physicians assessed Lucas's mental state. In 1838 when Lucas was twenty-five years old, Sarah Lucas, frustrated by her son's fluctuating moods and obstinate rebellion, consulted Dr. Sutherland, who judged Lucas to be of unsound mind and recommended that a male nurse be hired as a constant attendant (Whitmore 17). Mrs. Lucas followed the doctor's recommendation, but later dismissed the attendant because she "could not bear to see her son restrained in such a fashion" (Whitmore 19). Years later after Lucas barricaded his house, his younger brother George applied to the Lunacy Commission for official certification to transfer control of the estate to a trustee.

The Lunacy Commission evaluated Lucas's case in 1851 and again in 1872, but both times the Commission voted not to certify Lucas as insane. In 1851 the Commission reported "that the result of the inquiry was to satisfy the Commissioners that Mr. Lucas's case at present was not one in which they could with propriety interfere." In 1872 John Forster, one of the Commissioners, reported that they could not certify Lucas as insane because Lucas was "singularly acute and without the least trace of aberration of intellect" (qtd. in Whitmore 30, 62).[7]

Richard Whitmore suggests that one of the reasons for the conflicting judgments of Lucas's condition was an insufficient understanding of insanity. The argument that Victorians "had still not reached the idea that a person can be logical and at the same time insane" (22) may apply to Dickens but not to the majority of mid-century alienists. Long before James Lucas's sanity became an issue, Esquirol emphasized that "there are monomaniacs who are not irrational, whose ideas maintain their natural connection, whose reasonings are logical, and whose discourses are connected, often spirited and intellectual" (*MM* 342). Similarly, British alienist James Cowles Prichard described moral insanity in 1842 as a "state of the feelings, affections, temper, and in the habits and conduct of the individual" and added a few pages later:

> Persons labouring under this disorder are capable of reasoning or supporting an argument upon any subject within the sphere of knowledge that may be presented to them; and they often display great ingenuity in giving reasons for the eccentricities of their conduct, and in accounting for, and justifying the state of moral feeling under which they appear to exist. (31, 36)

Observations of this sort are not scarce in alienist writings. Many Victorian alienists and laity recognized the co-existence of intelligence, delusion, and insane behavior. Only two years before the Lunacy Commission's first review of Lucas's case, John Conolly admitted, "There are patients who, although even incurably insane as to their actions, and as to delusions, continue to be so shrewd, acute, and witty in words and conversations, that no prudent medical man can advise their being presented before a commission *de lunatico inquirendo*" (*CL* 3).

The Commissioners' refusal to intervene in Lucas's case must be attributed to considerations other than Whitmore's suggestion that Lucas's interviewers were unaware that many insane individuals exhibited both intelligence and irrationality. In keeping with common Victorian biases regarding human nature and socioeconomic classes, the Commissioners were apparently unwilling to displace human intelligence from its traditional position of supremacy and unwilling to interfere with a wealthy, educated man. Possibly the Commissioners were influenced by the type of social distinctions psychiatrist Pierre Janet notes often affected diagnosis and treatment in the nineteenth century: "If a patient is poor, he is committed to a public hospital as 'psychotic'; if he can afford the luxury of a private sanitarium, he is put there with the diagnosis of 'neurasthenia'; if he is wealthy enough to be isolated in his own home under the constant watch of nurses and physicians, he is simply an indisposed eccentric" (qtd. in Whitmore 5). Victorian biases of this sort probably led many people to consider Lucas eccentric instead of mentally ill. He was not attended by nurses and physicians, but he owned a large home, possessed

sufficient money to pay for the necessities he required, and was surrounded by neighbors who willingly "bent the rules just a little to help the hermit continue his existence without breaking any of his principles" (Whitmore 31). The Commissioners may have also been influenced by the fact that Lucas did not harm anyone but himself. Whitmore notes that Lucas was actually rather generous, distributing gin and "as a much as £300 a year in copper and small silver" to his visitors (32). Given these circumstances, it does not seem too surprising that the Lunacy Commission would choose not to interfere in a competency dispute between a wealthy man and his younger brother.

Dickens, on the other hand, had no qualms about pronouncing his judgment of Lucas. Conolly's observation that intelligence and cunning sometimes mask insanity suggests a reason for Dickens's conclusion that Lucas was not sufficiently irrational to warrant the forbearance granted the insane. Dickens attempted to reason with Lucas and shame him into changing his lifestyle, but the more that Lucas resisted Dickens's arguments and asserted his own positions, the more Dickens was convinced of Lucas's willfulness. As Susan Shatto has suggested, "Lucas's condescending manner and deluded, reactionary opinions offended Dickens's narcissism" (83). While Shatto's suggestion is certainly possible, even likely, it is also likely that Dickens's voluntarist presuppositions regarding insanity and culpability kept him from recognizing the possibility that Lucas suffered from a physiological condition that damaged his will without damaging his intellect. Like the Commissioners, Dickens did not see any "aberration of intellect" and concluded that Lucas was an intelligent man capable of controlling himself but unmotivated to do so.

As we have seen, though, by mid-century many alienists no longer considered intelligence and reasoning ability to be touchstones for assessments of insanity. Daniel Hack Tuke, for example, concluded that Lucas suffered from a "a state of degraded feeling rather than intellectual incapacity" and that Lucas's "diseased mental condition" had been triggered by childhood experiences and "a brain in all probability predisposed to mental disease" (qtd. in Whitmore 71). Dickens resisted physiological explanations for borderland behavior like Lucas's because the determinist implications that inevitably followed were unacceptable to him. Because he was unwilling to release Lucas from his responsibilities, the hermit's wasted life and resources prompted impatience and disapprobation from Dickens rather than forbearance and pity. Concerning Lucas, Dickens probably would have agreed with John Barlow's conclusion in *On Man's Power over Himself to Prevent or Control Insanity*, "What is now fashionably termed monomania is more often owing to a want of moral control over the mind than to any unsoundness of the intellectual faculties; so that in fact it ought to be viewed as moral depravity rather than mental disorder" (73-74).

Although the narrative of *Tom Tiddler's Ground* includes a debate of sorts between Mr. Traveller and Mr. Mopes, Dickens does not present Lucas's situation to his readers in the form of a controversy or debate as Trollope and Braddon do in their narratives. Nor does Dickens invite his readers to consider the "facts" and draw their own conclusions. Quite the opposite. Dickens expects his readers to trust his judgment and follow his example of dismissing the hermit—both the caricature and the living man. It would be unfair to suggest, however, that Dickens treats all of his "mad" characters so

reductively. Mrs. Clennam and Miss Havisham, for example, are much more complex. After being betrayed by the men they love, they allow their hurt feelings and wounded egos to dominate their thoughts and dictate their actions. This "*misdirection* of the intellectual force" (Barlow 56) leads to melancholia and monomania. Although Dickens expresses some sympathy for their suffering in the narratives, he holds them accountable for the misdirection of the minds.

## Mrs. Clennam and Religious Monomania

As noted in Chapter 1, religious monomania gained prominence as a borderland disorder in 1800 when James Hadfield attempted to assassinate King George III. Thomas Erskine, Hadfield's lawyer, successfully argued that his client's reasoning was not impaired by a "defect of knowledge of judgment" but by "a delusive image" that became irresistible (qtd. in Walker 77). In the years following Hadfield's trial, alienists asserted a determinist connection between delusions, physiological lesions, and irresistible impulses, and this connection led to many acquittals on the grounds of insanity. In contrast to this medicolegal identification of monomania with somatic causes, Dickens's representations of monomania are clearly informed by voluntarist discourse and a conception of monomania as an intellectual weakness rather than physiological malfunction. In *Little Dorrit* (1855-57), self-exaltation, self-justifying interpretations of Scripture, and a desire to punish those who have hurt her are the root causes of Mrs. Clennam's religious monomania. Consequently, the narrative judges her self-imposed isolation, delusions, and obsessions "something of madness but more of sin."

*Little Dorrit* also exemplifies Dickens's participation in the Victorian struggle to distinguish, as Dickens writes in *The Pickwick Papers*, "between religion and religious cant, piety and pretence of piety, a humble reverence for the great truths of Scripture and an audacious and offensive obtrusion of its letter and not its spirit in the commonest dissensions and meanest affairs of life" (45-46).[8] Dickens's suspicion of private interpretations of Scripture echoes Andrew Combe's 1831 *Observation on Mental Derangement,* in which Combe emphasizes the community's obligation to intervene when a religious melancholic clings to spurious convictions:

> When insanity attacks the latter, it is obviously not religion that is its cause, it is only the abuse of certain feelings, the regulated activity of which is necessary to the right exercise of religion; and against such abuse, a sense of true religion would in fact have been the most powerful protection. And the great benefit to be derived in knowing this, is, that whenever we shall meet with such a blind or misdirected excess of our best feelings in a constitutionally nervous or hereditarily predisposed subject . . . we shall use every effort to temper the excess, to inculcate sounder views, and to point out the inseparable connection which the Creator has established between the true dictates of religion, and the practical duties of life. (191)

Combe does not blame religion itself for the melancholia he has observed; he finds fault with the individual and society for not exercising proper judgment and regulating "certain feelings." Because Combe believes that religious melancholics frequently misread Scripture and misapply its principles, he believes "every effort" for intervention is necessary "to inculcate sounder views." This is Dickens's position also, and one of his purposes for *Little Dorrit* is to expose the religious distortions he sees threatening society. Through Mrs. Clennam, Dickens demonstrates how false reasoning, delusion,

and religious severity can smother Christian virtues such as charity, forgiveness, and humility.

Because Mrs. Clennam's severe perceptions of God's judgment are left unchecked, she begins to believe that she is "'an instrument of severity against sin'" (860), specifically the sin committed by her husband and his mistress. After Mrs. Clennam raises their child (Arthur) as her own son, she coldly asserts that the woman's death in an asylum was God's will: "'If the presence of Arthur was a daily reproach to his father, and if the absence of Arthur was a daily agony to his mother, that was the just dispensation of Jehovah'" (846). She continues to justify her judgment of Arthur's father and mother even after she asks for forgiveness: "'I have done . . . what it was given to me to do. I have set myself against evil; not against good" (860). Mrs. Clennam's ability to justify her actions and judgments recalls the tenacity Esquirol observed in many monomaniacs:

> The patients seize upon a false principle, which they pursue without deviating from logical reasonings, and from which they deduce legitimate consequences, which modify their affections, and the acts of their will. . . . By plausible motives, by very reasonable explanations, they justify the actual condition of their sentiments, and excuse the strangeness and inconsistency of their conduct. (320)

Mrs. Clennam repeatedly excuses her conduct by quoting biblical passages that speak of God's wrath and judgment. She convinces herself that it is her duty to punish Arthur's parents, but in reality she is simply an executioner who derives pleasure in wielding the ax. She wants people to believe that the fire of judgment and the powerful hand are God's, but her words merely offer lip service because the God she has constructed has no

existence beyond her own hatred and desire for revenge. When Arthur explains his decision to give up his share of the family business and looks to his mother for understanding, the narrator notes her lack of compassion: "Forgive us our debts as we forgive our debtors, was a prayer too poor in spirit for her. Smite Thou my debtors, Lord, wither them, crush them; do Thou as I would do, and Thou shalt have my worship: this was the impious tower of stone she built up to scale heaven" (86). Equating forgiveness with weakness and impotence, Mrs. Clennam demands that God merit her worship by casting off His weak interest in forgiving sinners.

Mrs. Clennam's distorted beliefs stem from a severe, unforgiving nature, which is not unlike the "disturbed soul" Heinroth describes in his *Textbook of Disturbances of Mental Life*: "Religious melancholia is caused by a disturbed soul dwelling in a disturbed body . . . the air of religious sensations is spurious. They are in fact not religious sensations at all but are upheavals of the tortured imagination of an impure heart sunk into worldly life and into self-life" (2:363). Mrs. Clennam's "tortured imagination" and "impure heart" have led her to pervert biblical language and teachings. She interprets God and the Bible according to her own rigid views: "stern of face and unrelenting of heart, [she] would sit all day behind a Bible—bound, like her own construction of it, in the hardest, barest, straitest boards" (69). There is no compassion or mercy in Mrs. Clennam's heart or the Bible she has constructed. There is a rigid form, but no provision for understanding or solace. In constructing her own interpretation of the Bible, she "reversed the order of Creation, and breathed her own breath into a clay image of her

Creator" (844). She sees God as a lifeless object that she brings to life, rather than the Creator who gives her life.

By adhering to an illusion of her own creation, Mrs. Clennam experiences the same type of spiritual estrangement that Andrew Combe observed in religious melancholics, though she does not recognize her condition as estrangement:

> If the best Christian be he, who in meekness, humility, and sincerity, places his trust in God, and seeks to fulfil all His commandments; then he who exhausts his soul in devotion and in prayer, and at the same time finds no leisure, or no inclination for attending to the active duties of his station, and who so far from arriving at happiness or peace of mind here, becomes every day the further estranged from them, and finds himself at last involved in disease and despair, cannot be held as a follower of Christ, but must rather be regarded as the follower of a phantom assuming the aspect of religion. (191)

According to Combe, religious melancholics fulfill the duties of religion but lack the spirit and life that transform cold duties into joyful devotion. Because exhaustion and estrangement replace happiness and peace, Combe concludes that these unfortunate souls follow a mere "phantom" rather than the living Savior.

Dickens provides a vivid picture of Mrs. Clennam's exhausted soul and spiritual emptiness at the end of the novel when Mrs. Clennam is reduced to a "figure" and an "it." In contrast to Amy Dorrit standing in the sunlight, Mrs. Clennam is a "black figure in the shade . . . It bent its head low again, and said not a word" (861). Mrs. Clennam is reduced even further in the next scene when she is described as a statue: "For upwards of three years she reclined in a wheeled chair . . . except that she could move her eyes and faintly express a negative and affirmative with her head, she lived and died a statue" (863). Wasting away physically, emotionally, and spiritually, she becomes nothing more

than an empty shell. By juxtaposing Mrs. Clennam's religious severity with Amy Dorrit's compassionate charity, Dickens illustrates the difference between what he considers true religion and false religion and implies that his readers should test the authenticity of their own religious beliefs and those proclaimed in public.

Although Dickens's representation of Mrs. Clennam's obsession and delusion is consistent with Esquirol's observations of monomania, Dickens does not use the term *monomaniac* to describe her. This is an interesting omission because Dickens was familiar with the term and used it to lambaste sabbatarians and temperance reformers in "The Great Baby" in 1855, the same year that he began writing *Little Dorrit.* Condemning the evangelicals he judges to be self-righteous and uncharitable, Dickens labeled the reformers "Monomaniacs" and caricatured one of their supporters as "Mr. Monomaniacal Patriarch" (3). Dickens apparently hoped that his readers would conclude that the sabbatarian monomaniacs were so dangerous and their proposals so irrational that they should be categorically dismissed. His decision not to use the same strategy with Mrs. Clennam suggests that he realized that dismissing Mrs. Clennam in such a reductive manner would have limited his opportunity to expose the false reasoning and false associations that inform her self-justifications and delusions. Additionally, Dickens may have realized that it would be counterproductive to label her condition *monomania* when Victorian alienists used the term to exempt insane individuals from responsibility. Such a label would compromise the narrative's judgment of Mrs. Clennam's rigid, unforgiving attitude. By choosing not to identify her overtly as a religious monomaniac, Dickens allows the text's disapprobation of Mrs. Clennam to remain unmitigated. She is

seen as a woman consumed by a self-induced, moral (both mental and ethical) condition that warrants condemnation for distorted reasoning rather than pity for mad impulses.[9]

I began this chapter with an observation from Vieda Skultans about the moral managers who attempted "to combat the forces of disorder" through "the arts of self-government." This struggle against disorder informs Dickens's fictional representation of Mrs. Clennam's religious monomania. Mrs. Clennam is guilty of turning her back on the human community. She exalts her own skewed perceptions, definitions, needs, and desires. Because her pride is not checked by relatives or neighbors, it expands and wreaks havoc in her personality and in the lives of people around her. Her story encourages the reader to recognize the importance of sincere humility, forgiveness, personal accountability, and social interaction.

## Miss Havisham and Association Psychology

Michael S. Kearns has observed, "Although Dickens never stated his allegiance to association psychology, both the language and the concepts of this psychology are so prominent in his character portrayals that he can fairly be termed an association novelist. He made extensive use of the central metaphor of associationism, that the mind is a blank slate or a piece of clay shaped by external forces" (112). According to associationism, the mind receives and stores impressions, which form meaningful associations. As Locke explains, "Ideas that in themselves are not all of kin, come to be so united in some men's minds, that it is very hard to separate them; they always keep company" (249). Because these associations influence attitudes, emotions, and behavior in both positive and

negative ways, they are important factors in characters development. As Kearns explains, Dickens utilizes associationist principles in his novels, but he goes "beyond his contemporaries' use of associationism by allowing a person's mind to be *re-formed* through the agency of the heart" (112).[10] In contrast to nineteenth-century associationism, which described "chains of association" that were "continuous and uni-directional," Dickens allowed "sudden changes and reversals" to soften hearts hardened by the defensive and destructive associations formed by painful external events. (Kearns 112). This softening then led to a reformed outlook and a renewed character.

By emphasizing the potential for a change of heart, Dickens not only adapted the stated principles of associationism but also directly opposed the determinist principles of Victorian alienists like Henry Maudsley. In contrast to moral managers like Abercrombie, Barlow, and Conolly who advocated preventative education programs that emphasized mental exercise, moral training, healthy interpersonal relationships, and social responsibility, Maudsley asserted that education could not alter physiology:

> But great as is the power of education, it is yet a sternly limited power; it is limited by the capacity of the individual nature. . . . no mortal can transcend his nature. . . . Education can plainly act only, first, within the conditions imposed by the species, and, secondly, within the conditions imposed by the individual organization. (*RMD* 21)

In a discussion of the criminal class Maudsley emphatically discounted the likelihood of reforming one's character: "The dog returns to its vomit and the sow to its wallowing in the mire. A true reformation would be the *re*-forming of the individual nature; and how can that which has been forming through generations be *re*-formed within the term of a single life?" (*RMD* 35). According to Maudsley, evolution and hereditary predispositions

determined an individual's nature and capacities. Additionally, he argued that asserting one's will or disciplining one's passions could not alter physiological conditions. It is this narrow view of human nature and experience that Dickens rejects in his voluntarist representations of madness. By holding characters like Mr. Mopes, Mrs. Clennam, and Miss Havisham accountable for their deeds, Dickens asserts that mad behavior like theirs may be eliminated if the individual can be made to see himself or herself clearly.

In *Great Expectations* (1860-61), Dickens suggests that Miss Havisham's proud personality developed early in life. During her childhood "'her father denied her nothing,'" and she became a spoiled young woman (203). When she was courted by Compeyson, her vanity and inexperience blinded her to his "'practised'" devotion. Although she was warned by her cousin Matthew that Compeyson should not be "'mistaken for a gentleman. . . . she was too haughty and too much in love, to be advised by anyone'" (204-205). After Compeyson jilted her, she suffered an emotional breakdown and withdrew into her house. As the years pass, Miss Havisham's canceled wedding has such strong impact on her emotions and memory that she is unable to think about anything else. Her personality and mind become completely absorbed by "'sick fancies'" (88), and her life is soon dominated by behaviors consistent with nineteenth-century conceptions of melancholia and monomania.

The chain of associations that is forged by Miss Havisham's painful memories turns a devastating event into a devastated life. Like a melancholic who "fastens upon himself all his thoughts, all his affections; is egotistical, and lives *within* himself" (Esquirol 320), Miss Havisham chooses to withdraw from life. "Her wild resentment, spurned

affection, and wounded pride" create a self-made prison within her boarded-up house (411). Surrounded by rotting wedding preparations, she continually broods over her canceled wedding. The banquet table, along with her unworn jewelry, gloves, and shoe, become fixed objects in her rooms and in her mind. Her self-imposed seclusion preempts any desire for normal activities and social interaction, thus furthering the painful associations and decreasing the likelihood of encountering any people or activities that might break the cycle of destructive thoughts. Ultimately, because she will not allow other interests and needs to replace her shattered dreams or soften her obsessed imagination, she must be held responsible for her unhealthy mental condition. As J. Hillis Miller explains,

> It is Miss Havisham herself who chooses to make her betrayal the central event and meaning of her life. And in so choosing she makes herself responsible for it. . . . Her frozen life is not the result of a failure of will, but of a will so strong as iron to 'reverse the appointed order of [her] Maker' by closing every last aperture of her life through which change might come, just as she has closed all the windows and doors in Satis House through which the natural light and air might enter. (*CD* 257-258)

She focuses her thoughts and emotions so totally on her canceled wedding that she magnifies and transforms this one event into an identity, a Jilted Woman, and a single purpose, vengeance. Without a doubt, Miss Havisham is victimized by Compeyson, but her own pride turns her into a life-long victim.

Another chain of destructive associations forms as Miss Havisham tells herself that the proof of love "'is blind devotion, unquestioning self-humiliation, utter submission, trust and belief against yourself and against the whole world, giving up your whole heart and soul to the smiter'" (261). As a young woman in love, Miss Havisham

did not believe her love was blind, nor did she characterize Compeyson as a smiter. After he jilted her, though, a shift in thinking was necessary to protect her ego and to avoid acknowledging that she was wrong about Compeyson and their relationship. In time her naive love became a "blind, masochistic self-sacrifice followed by righteous despair and revenge" (Young 209). As long as she keeps repeating her new definition of love and reinforcing the association of ideas that feeds her revenge, she reassures herself that love does, in fact, require self-abasement and that she was not a fool to love Compeyson and reject the warnings of her cousin.

The anger that this chain of associations provokes causes her to devise a plan "'to wreak revenge on all the male sex'" (200). As she plans this revenge, she actually reshapes her world so that she can eliminate family obligations, social engagements, and business affairs that might distract her from her scheme of revenge.[11] This withdrawal removes her from the "thousand natural and healing influences" available in community life and reinforces her monomaniacal thoughts (411). She becomes what Jean Hampton calls a "malicious hater" and awaits the day that she will vanquish her enemy and finally experience a feeling of satisfaction. As Hampton explains, malicious hatred soothes the hater's humiliated ego:

> Consider someone who inwardly seethes at an enemy whom she fears has "won" over her in some way. What happens when she inwardly seethes? Using words that vilify her enemy and elevate herself, she projects onto the world the ranklings she would have them occupy. She "sees" him as low, and herself as high. . . .
>
> More commonly, a malicious hater engages in what are called "vengeful" actions which involve controlling or harming or mastering her enemy. By winning against him in this way, she hopes to diminish him, either by revealing or by making him to be lower, and such diminishment is perceived as an indirect way of elevating herself. (68-69)

Miss Havisham focuses her energy on a plan that she believes will reverse her victimization. The degradation that Miss Havisham suffered at the hands of Compeyson must be overturned by diminishing him and reasserting her position above him. If she can accomplish this reversal, she may experience a sense of satisfaction and closure. Her plan is frustrated, though, because she cannot vent her anger and hatred directly on Compeyson. As she continually indulges her anger, she magnifies Compeyson's "crime" and projects his deceitfulness onto the entire male sex. This new link in the chain of her thoughts allows her to choose a representative of the male sex to bear Compeyson's punishment. She chooses Pip, a sensitive and malleable boy, and devises a scheme in which Estella will re-create Compeyson's role while Pip will re-create her own role. She expects to enjoy this re-creation because this time she intends to identify with Estella's cool command of the situation.[12]

Twenty years of continual brooding and handling objects that evoke painful memories cause Miss Havisham to shrink both mentally and physically. Like James Lucas, she becomes "a deteriorated spectacle" (*TTG* 596). She effectively identifies her emotional state when she points at the rotten wedding cake and tells Pip, "'sharper teeth than the teeth of mice have gnawed at me'" (117). This image of gnawing was a common metaphor for depressive states in the nineteenth century. In his *Textbook of Disturbances of Mental Life* (1818), Heinroth notes that "in melancholia the disposition has lost its world, and becomes an empty, hollow Ego which gnaws at itself" (221). Similarly, Wilhelm Griesinger describes in *Mental Pathology and Therapeutics* (1845), "the slow gnawings of disappointed ambition on the mind, regret on account of certain unjust

actions, domestic affliction, unfortunate love, jealousy, error." Griesinger goes on to explain that this mental gnawing is most common when painful associations have been ingrained in the sufferer's mind: "[W]e always see the most powerful effects where the wishes and hopes have been for a long time concentrated upon a certain object. Where the individual has made certain things indispensable to his life, and when these are forcibly withdrawn . . . a violent internal strife results" (165-166).

The chains of humiliation, anger, and hatred that cause Miss Havisham's psychological turmoil begin to disintegrate when she realizes that Estella does not love her and, in fact, is incapable of loving anyone. Miss Havisham taught Estella to use love as a weapon to punish men, but she never anticipated that these lessons would "'[steal] her heart away and put ice in its place'" (412). Estella's dispassionate responses shock Miss Havisham, but a greater shock occurs when she witnesses Pip's painful reaction to the news of Estella's engagement to Drummle. She later tells Pip, "'Until you spoke to her the other day, and until I saw in you a looking-glass that showed me what I once felt myself, I did not know what I had done'" (411). Pip's mirror-image causes her to collapse under the emotional strain.[13] She falls to her knees and moans, "'What have I done!' And so again, twenty, fifty times over, What she had done!" (411). Pip is willing to forgive her, but she cannot comprehend his words because she assumes it will take years for him to forgive her for the pain she has caused him. She is also so absorbed by shame that she assumes she must suffer in order to merit Pip's forgiveness.[14]

Even though Miss Havisham pleads for forgiveness and designates substantial financial gifts for Herbert and Matthew Pocket to prove to Pip that her heart is "'not all

stone'" (408), her punishment continues. She suffers severe burns and is plagued by guilt even while she is unconscious. A few weeks later she dies without ever experiencing any peace of mind. Nonetheless, her change of heart is significant. The inheritance she leaves Matthew indicates that she is finally willing to admit that she was wrong to dismiss his counsel. This recognition of her haughty behavior toward her family offers the reader hope that Pip will undergo a similar attitude change toward Magwitch and Joe.

The mixture of sympathy and condemnation expressed toward Miss Havisham at the end of the novel reflects the conflict Dickens and other Victorians felt when they were charged with responding to insanity: compassion for human suffering versus an obligation to uphold standards of behavior. Dickens's expressions of sympathy are often overshadowed by his desire to insure justice and deter both sinfulness and madness. In contrast to many of his contemporaries who used the concept of monomania to excuse a wide range of irrational behaviors and immoral deeds, Dickens advocates a more conservative position that restricts exemptions from moral responsibility to people who have lost or never possessed the ability to reason. As we shall see, both Trollope and Braddon also prefer a voluntarist perspective on insanity and culpability, but, because their narratives challenge contemporary definitions of insanity, their personal attitudes and judgments are less obvious than Dickens's are. From Dickens's perspective, individuals who exhibit a capacity for understanding the wrongness of their actions should be held accountable for their irrational behavior because they neglected to exercise their reason and assert their will.

Several of the factors that influence Dickens's judgment of Miss Havisham's behavior as "something of madness but more of sin" are apparent in Pip's final assessment of Miss Havisham:

> I knew not how to answer, or how to comfort her. That she had done a grievous thing in taking an impressionable child to mould into the form that her wild resentment, spurned affection, and wounded pride, found vengeance in, I knew full well. But, that, in shutting out the light of day, she had shut out infinitely more; that, in seclusion, she had secluded herself from a thousand natural and healing influences; that, her mind, brooding solitary, had grown diseased, as all minds do and must and will that reverse the appointed order of their Maker; I knew equally well. And could I look upon her without compassion, seeing her punishment in the ruin she was, in her profound unfitness for this earth on which she was placed, in the vanity of sorrow which had become a master mania, like the vanity of penitence, the vanity of remorse, the vanity of unworthiness, and other monstrous vanities that have been curses in this world? (411)

Although Miss Havisham is betrayed by a con man, this description of her emphasizes that she chooses to become a life-long victim. By focusing on revenge instead of forgiveness, she "reverse[s] the appointed order" of God. Furthermore, as she rejects the counsel, social diversion, and personal relationships that could heal her wounds, she creates an unhealthy environment that fosters a "diseased" mind. The fact that Dickens sees this disease as a type of insanity is implied in the phrase "vanity of sorrow which had become a master mania." Dickens does not use the words *melancholia* or *monomania,* but Pip's words undoubtedly suggest both. At the same time, though, the emphasis that Dickens puts on *vanity* suggests sin rather than madness, willfulness rather than compulsion, and a refusal to understand rather than an inability to understand. Consequently, Miss Havisham should be regarded as an inhabitant of the borderland of

partial insanity where sin and madness not only overlap but are often inextricably intertwined.

In conclusion, *Great Expectations* suggests that when Dickens sees a mixture of madness and wickedness, he begins the evaluative process with an assumption of human agency and moral culpability, an intuitive understanding of associationist psychology, and a hope that behavior can change if one is willing to see the truth about himself or herself. Someone like Maudsley, on the other hand, who emphatically rejects the claims of religion and metaphysics, begins from a scientific assumption that behavior is determined by physiology and heredity and that neither willpower nor education can alter one's "organization." Maudsley's assumptions lead him to conclude that madness is most often inevitable, irresistible, and irreversible, while Dickens's assumptions lead him to conclude that madness is most often volitional and neither inevitable nor irreversible.

## Accountability and Renewal

Dickens's representations of partial insanity reveal not only his understanding of nineteenth-century conceptions of melancholia and monomania but also his own values and world view. Like the moral managers and associationists of the first half of the century, Dickens considers madness (excluding forms of idiocy and mental deficiency) primarily a consequence of faulty reasoning and self-indulgence. For example, in the case of James Lucas, Dickens believed that the hermit's intelligence was unimpaired. This judgment led to the conclusion that Lucas was capable of thinking and acting rationally if he chose to do so. Dickens was apparently unwilling to consider the possibility that

Lucas might be affected by a somatic condition that impaired his emotions and will without affecting his intellect. It seems that the attribution of false reasoning and irrational behavior to physiological causes was simply too determinist for him.

In Dickens's fictional borderlands, characters like Mr. Mopes, Mrs. Clennam, and Miss Havisham become victims of their own faulty reasoning. They deceive themselves into thinking that they can ignore their responsibilities and indulge personal interests, passions, and sorrows. They withdraw not only into barricaded houses but also into barricaded minds. Although Dickens characterizes their borderland behavior as unnatural and even diseased, he does not see partial insanity as a mitigating condition. In keeping with the legal opinion asserted by Justice Hale and subsequent jurists, Dickens is not inclined to exculpate individuals for their deeds unless they are totally insane. This is not to suggest that Dickens has no sympathy for human suffering. He describes Miss Havisham in sympathetic terms and allows her the opportunity to experience a change of heart, but he still holds her accountable for creating her own "diseased" mind. As long as he sees evidence of intelligence and willpower, he believes that individuals can exert some control over their behavior. Consequently, he exhorts, admonishes, reproaches, caricatures, and, in the process, reveals his belief in individual accountability and personal renewal.

## Notes

[1] Dickens's support for moral management is evident in his non-fiction. In "Boys to Mend," an article published in *Household Words* in 1852, Dickens praises John Conolly's "moral discipline and kindness" and admits "we would rather advise with our good friend Dr. Conolly, than with the quarter sessions" (430-431). In "A Curious Dance Round a Curious Tree," another article for *Household Words* in 1852, Dickens praises asylum attendants who "find their sustainment and reward in the substitution of humanity for brutality, kindness for maltreatment, peace for raging fury" (391). A fictional representation of moral management is found in *David Copperfield* (1849-50). Like a moral manager, Betsy Trotwood cares for Mr. Dick as an individual who is capable of contributing to his own welfare. By intervening when Mr. Dick's brother proposes to "shut him up for life" in an asylum, she provides a healthier environment for Mr. Dick, an environment where he can interact with a variety of people, feel useful, and begin to replace harmful mental associations with more positive ones. Betsy understands the significance of her friend's Memorial of King Charles I in this regard and treats Mr. Dick and his Memorial with respect. For further discussion of Dickens's support for moral management, see Richard Currie's "*All the Year Round* and the State of Victorian Psychiatry," *Dickens Quarterly* 12 (March 1995): 18-24.

[2] As noted in Chapter 1, melancholia and monomania were frequently linked in the nineteenth century, sometimes as separate disorders and sometimes as sequential steps in one debilitating disease. Throughout this study I use *melancholia* when I am focusing on

depression and withdrawal and *monomania* when I am focusing on obsessions and delusions.

[3] For further discussions of Mathews's representations of the White Woman and *Rouge et Noire* and discussions of both women as sources for Miss Havisham, see Martin Meisel, "Miss Havisham's Brought to Book," *PMLA* 81 (June 1966): 278-285; and Harry Stone, "Dickens' White Woman," *Victorian Newsletter* 33 (Spring 1968): 5-8.

[4] It is likely that James Lucas was a source for Miss Havisham. Like Lucas, Miss Havisham barricades her house against intrusion and lives in self-imposed isolation, surrounded by symbolic momentos of the past. Dickens's fictionalized account of his meeting with Lucas was published at the end of 1861, just as he was finishing *Great Expectations.* Obviously Dickens created Miss Havisham before he met Lucas, but he probably knew of Lucas long before he actually visited him. It would be surprising if Dickens had not heard of Lucas's strange life through Edward Bulwer-Lytton, who lived only a few miles from Lucas. For more detailed discussions of Lucas as a source for Miss Havisham, see Richard Whitmore, *Mad Lucas: The strange study of Victorian England's most famous hermit,* and Susan Shatto, "Miss Havisham and Mr. Mopes the Hermit: Dickens and the Mentally Ill," *Dickens Quarterly* 2 (June 1985): 43-50 and (Sept. 1985): 79-84).

[5] The seven chapters of *Tom Tiddler's Ground* were written by five authors: "Picking up Soot and Cinders," "Picking up Miss Kimmeens," and "Picking up the Tinker" by Dickens; "Picking up Evening Shadows" by Charles Collins; "Picking up

Terrible Company" by Amelia Edwards; "Picking up Waifs at Sea" by Wilkie Collins; and "Picking up a Pocket-book" by John Harwood.

[6] Dickens is willing to exempt "the idiot and the palsied" because they lack basic mental and physical capacities. In his essay "Idiots," Dickens quotes Dr. Felix Voisin's definition of idiocy as "that particular state in which the instincts of reproduction and preservation, the moral sentiments, and the intellectual and perceptive powers are never manifested, or that particular state in which different essentials of our being are only imperfectly developed" (490). Similarly, in "A Curious Dance Round a Curious Tree," Dickens describes individuals who are unable to care for themselves and who seem to be lost within themselves:

> all silent, except one . . . . Utter vacuity. . . . silently looking at the ground—or rather through the ground. (386)
>
> the vacantly-laughing girl . . . . the man of happy silliness, pleased with everything. (388)
>
> some watched the dancing with lack-lustre eyes, scarcely seeming to know what they watched . . . others rested weary heads on hands, and moped. . . . all were shut within themselves. (389)
>
> the worn cheek, the listless stare, the dull eye raised for a moment and then confusedly dropped. (390)

These silent men and women appear to be incapable of focusing their attention outside of themselves or participating in healthy interaction with others. They need caretakers because they lack the skills to care for themselves.

[7] It is certainly possible that Dickens knew about the 1851 decision. If he did, he may have felt that the Commissioner's judgment and his own judgment confirmed each

other. It is also interesting to consider the influence that Dickens's judgment of Lucas may have had on Forster in 1872.

[8] For further discussions of Dickens's religious beliefs and attitudes toward contemporary religious groups, see Norris Pope, *Dickens and Charity,* 83-85; Dennis Walder, *Dickens and Religion,* 170-194; and Janet L. Larson, *Dickens and the Broken Scripture,* 199-205.

[9] As noted, however, the possibility of weakening his criticism did not keep Dickens from using the term *monomaniac* in his article "The Great Baby." Perhaps, Dickens realized that the sarcastic trouncing he inflicted upon the sabbatarians would counter any unspoken association with alienist discourse. Or Dickens may have simply "grabbed" a label with emotional connotations of irrationality and danger without considering the implication the label carried regarding culpability. Either way, his use of *monomania* to vilify sabbatarians and their proposals creates an interesting cultural exchange. Dickens writes, "Now, the Monomaniacs, being by their disease impelled to clamber upon platforms, and there squint horribly under the strong possession of an unbalanced idea, will of course be out of reason and go wrong" (1). This personification of a psychological "disease" that "impels" irrational thinking and action, is not unlike Maudsley's description of impulses that "acquire an irresistible force" ("Homicidal" 338). Unlike Maudsley, however, Dickens is not describing a mental condition he finds exculpable. His purpose is to condemn inflexible followers of the Old Testament and hold their obsession up to ridicule. Thus, in "The Great Baby," monomaniacs are not unfortunate sufferers who deserve pity but rather willful extremists who deserve

ostracism. This significant shift in connotation illustrates Dickens's voluntarist view of insanity and demonstrates the kind of exchange that Stephen Greenblatt describes when authors "take symbolic materials from one zone of the culture and move them to another, augmenting their emotional force, altering their significance, linking them with other materials taken from a different zone, changing their place in a larger social design" (230).

[10] Kearns notes that Dickens's understanding of association psychology may have come from two influential books found in Dickens's library: Dugald Stewart's *Elements of the Philosophy of the Human Mind* (three volumes written in 1792, 1814, and 1827) and David Hume's *A Treatise of Human Nature* (1739). Kearns also notes that it is likely that Dickens was familiar with John Locke's *An Essay Concerning Human Understanding* (1700) through his friend Edward Tagart, whose treatise *Locke's Writings and Philosophy Historically Considered* was published in 1855 (113).

[11] For a discussion of the ways that Miss Havisham "repudiated the role of women's economic and bodily capital within the family enterprise system" and neglected "her duty to offer monetary support to real or surrogate male relatives" (74), see Susan Walsh, "Bodies of Capital: *Great Expectations* and the Climacteric Economy," *Victorian Studies* 37 (Autumn 1993): 73-98.

[12] It is interesting to note that Dickens uses the words *susceptibility* and *practise* to describe both relationships. Young Miss Havisham was susceptible and Compeyson "practised on her affection" (204-205). Dickens reverses the male and female roles in the

second relationship when Pip says that Estella "practise[s] on the susceptibility of a poor boy" (376).

[13] The dynamics of this scene recall a method Pinel used to shock patients out of their "self-referring observation," a method Foucault calls "demystification" (*MC* 263). Pinel paired patients with others who exhibited the same delusion so that the patients would observe their own brand of irrationality in their companions.

[14] Pip also struggles with this issue of earning forgiveness through suffering. When he realizes Joe has come to nurse him back to health, Pip cries, "'O Joe, you break my heart! Look angry at me, Joe. Strike me, Joe. Tell me of my ingratitude. Don't be so good to me!'" (472).

## Trollope and Public Negotiations of Madness

> Of all the afflictions to which human nature is subject, the loss of reason is at once the most calamitous and interesting. (Davis xv)

Although Dickens's fiction demonstrates the importance of living in a community and fulfilling one's social responsibilities, he does not explore the complex negotiations that communities undergo when conflicts over judgments of sanity and insanity erupt. Anthony Trollope, on the other hand, brings the community into the foreground. A community like Barsetshire, for example, is not simply a setting for the action but an interactive force that affects and is affected by the madness of individual characters. Even when the narrative focuses on the private acts and thoughts of individuals, the narrator's commentary reveals "the collective mind of the community" (Miller, "Self" 128). As the community observes the "mad" behavior of its members, it responds in a variety of ways: talk abounds, alliances are formed and broken, friends intervene, and enemies interfere. In the midst of all this commotion, men and women throughout the community are tested.

This emphasis on community responses to insanity sets Trollope's novels apart from Braddon's and Dickens's novels. In Braddon's *Lady Audley's Secret,* for example, Lady Audley's mad impulses and criminal acts are a private, family matter; no criminal charges are filed, and she is confined in a foreign asylum. Except for the handful of

individuals actually involved in the Audley affair, no one knows the truth about Lady Audley's madness or her crimes. Similarly, in Dickens's *Great Expectations,* Miss Havisham's weird appearance and behavior are the subject of family and neighborhood gossip but nothing more. Miss Havisham's relatives could and should intervene, but instead they actually encourage her delusions, hoping she will be swayed by their feigned solicitude and include them in her will. In Trollope's novels, on the other hand, questions of insanity are public business. The entire community is aware of the questionable behavior, and almost everyone expresses an opinion about what should be done. In *The Last Chronicle of Barset,* an assumption of partial insanity and a charge of theft against Josiah Crawley, a minister known for his rigorous pride, force the people of Barsetshire to explore questions of personal culpability and social responsibilities. Crawley's sanity becomes a topic of debate not only for family and friends but for people throughout Barsetshire and London. In *He Knew He Was Right,* Louis Trevelyan, plagued by exaggerated suspicions about his wife and fears of public disgrace, succumbs to melancholia and monomania. His increasing madness is a topic of concern for members of the Trevelyan family and social circle. Unfortunately, by the time they are able to intervene successfully, Trevelyan's health has deteriorated, and he dies. In both novels Trollope repeatedly draws attention to the ways that communities respond to madness and to the moral dilemmas it creates for relatives, neighbors, and associates.

Trollope's fictional borderlands also stand apart because his psychological explanation of pride and madness is quite different from the sensational treatment found in novels by other writers. Unlike sensation writers who include madness in their novels

because it provides "a set of ready-made conventions for villainy" (Taylor 48), Trollope includes mad impulses and obsessions as realistic aspects of character rather than as sensational plot twists. Josiah Crawley, for example, is proud and gloomy by nature, and the character he adopts stems from his understanding of classical heroes and martyrs. He goes to great lengths to maintain his public image as an independent, conscience-bound gentleman because he is privately plagued by self-doubt and memories of personal and professional disappointments. Similarly, pride and inflexibility are part of Louis Trevelyan's nature, and the character he adopts stems from traditional attitudes and values. Because he expects to control his wife and marriage, he fears that he will be disgraced by his wife's independence. He creates a crisis for himself as he persistently clings to exaggerated Victorian notions of male mastery and fears of public opinion. The more he isolates himself from family and friends, the more melancholia and monomania consume his energy and weaken his will.

Trollope's psychological treatment of his characters' internal conflicts also differs from the "metaphorical exploration of moral and psychological forces" that Dickens creates as object lessons on pride, bitterness, and forgiveness (Polhemus 5). Miss Havisham, for example, has already been wearing her rotting wedding clothes and walking around her spider-infested wedding cake for twenty years when we first see her. To say she is unusual is an understatement. In contrast, Trollope's characters appear to be ordinary, though troubled, people pursuing ordinary activities. Because we see Trevelyan before he becomes melancholic, he does not appear to be unusual—proud and unreasonable, yes, but not unusual for a Victorian man who expects to be the master of

his family. Trollope develops Trevelyan's madness gradually and encourages us to consider Trevelyan and other characters "not as creatures of his imagination or as the expression of his view of life, but as autonomous people whom we can talk about and judge as if they were real" (Polhemus 5). Because Trollope "lived with" characters like Josiah Crawley and Louis Trevelyan, he learned "[t]he depth and the breadth, and the narrowness and the shallowness" of their personalities (*Autobiography* 233).[1] This intimacy between author and characters evokes a similar intimacy between the characters and the readers, who also live with the characters over a period of time, which allows them to judge the characters as "acquaintances rather than . . . [as] fictional heroes and villains" (Tracy 330).

Trollope's multilayered narratives ask the readers to explore complex moral dilemmas that resist simplistic resolutions. In *The Last Chronicle of Barset,* Crawley's difficulty involves a complicated mixture of legal, ecclesiastical, and socioeconomic questions that must be negotiated according to the community's values and priorities. In *He Knew He Was Right,* Trevelyan's dilemma involves conflicting views of marital rights and privileges and society's obligation to intervene (or not intervene) when an individual falls into a self-destructive state of mind. Trollope's fictional communities expend a good amount of energy sorting out competing theories and policies. The conflicts that result destabilize the boundaries between sanity and insanity and force the readers to ask "What constitutes insanity?" and "When is it necessary to intervene?" Thus, the novels remind the reading public of the complexity of human nature and the difficulty of responding appropriately to behavior that society deems mad.

## Josiah Crawley and Community Responses

In *The Last Chronicle of Barset* (1866-67), Josiah Crawley, a poor minister plagued by creditors, cashes a £20 cheque to pay a food bill. The cheque, however, was originally made out to Lord Lufton, and when Crawley is asked to explain how the cheque came into his possession, he is unable to provide a definite answer. His first response is that Mr. Soames, Lord Lufton's business manager, gave it to him, but when Soames denies this and claims that he lost the cheque at Crawley's house, it appears as if the poor minister stole the cheque. Crawley then states that he believes his friend Dean Arabin gave him the cheque, but the dean, who is traveling in the Holy Land, writes that he gave Crawley five £10 notes but no cheque. As the story unfolds, this dilemma requires a "supreme effort," on Crawley's part, "to overcome the outer circumstances of his dilemma and to dispel his inner doubts about himself, in order to regain his place as a man of integrity, sanity, and dignity, in his own eyes, in the eyes of all others, and of his God" (Emmerich 8). In addition, this incident creates a dilemma for Crawley's neighbors, who must sort out not only the facts of the cheque-cashing incident but also the implications and consequences regarding Crawley's ministry. The fact that the people of Barsetshire believe that Crawley is "half-mad" complicates the search for answers.

As J. Hillis Miller observes, "The action of a novel by Trollope is a temporary whirlpool in the midst of the surrounding mind of the community" ("Self" 135). Before we can investigate the whirlpool in the mind of the community, however, we need to understand the whirlpool in the mind of Josiah Crawley. A variety of circumstances have

created in Crawley both a rigorous pride and a gloomy sense of inferiority. As a minister, Crawley has a gift for "making intelligible to the ignorant the promises of his Saviour." In addition, he is an able scholar: "He could be logical with a vengeance. . . . he had Greek at his fingers' ends. . . . he would sometimes recite to them English poetry, lines after lines, stanzas upon stanzas. . . . Books in Latin and in French he read with as much ease as in English" (34). These achievements, however, have not insured a comfortable living for Crawley and his family. For ten years he has been the curate of Hogglestock, a poor parish of farmers and brickmakers. The £130 salary he earns in a year barely covers the needs of his family, which the narrator explains would easily require £65 for meat and bread, £50 for clothing, and £15 for miscellaneous items like sugar, tea, and education (31). Crawley's poverty is "a living disgrace to him" (11) and a bitter reminder that his career has stalled while less scholarly men have attained higher positions in the diocese.

Crawley allows his disappointment to cast a shadow over everything else in his life. He constantly dwells on the rewards that have eluded him and the afflictions that have plagued him. He is an honest, hard-working minister, but his bitterness and desire for a more glorious role in the diocese sour his disposition. Consequently, he is respected but not popular, and his neighbors consider him "morose, sometimes almost to insanity" (10). As Crawley retreats from everyday activities, "the peculiarity of his disposition" is misunderstood by his parishioners and neighbors (10). They begin to see his behavior as "partial lunacy" (108), "half-mad" (369), and "woolgathering" (606). Yet, because his rigorous pride and conscience are the only attributes he has to prove to

the world that he is a gentleman and a scholar rather than a poor curate who cannot pay his bills, he proudly clings to his sense of duty whenever he is burdened by troubles. This "intellectual vanity . . . is the only weapon he has against the pressures of the diocese. As long as he can pride himself on his scholastic powers, he can hold up his head among his more fortunate fellow clergymen" (Epperly 54).

Crawley's pride makes relationships with his neighbors and colleagues rather difficult. Before the cheque incident occurs, they admire Crawley's parish work but unanimously suspect that he is partially insane. The more that Crawley isolates himself, the more difficult it becomes for the community to view Crawley sympathetically. After he is accused of theft, Crawley's refusal to seek legal counsel confirms the community's suspicions to such an extent that his friends question his sanity and even his wife worries about his mental and physical health. As Crawley awaits his trial, Mrs. Crawley is concerned about his increasing depression and admonishes him: "'Be a man and bear it. Ask God for strength, instead of seeking it in an over-indulgence of your own sorrow. . . . It is indulgence. You will allow your mind to dwell on nothing for a moment but your own wrongs'" (92). When Crawley insists on walking through the parish in the wet morning air, Mrs. Crawley fears that his brooding will make him "'forgetful of everything" until he is chilled to the bone. She also worries about the hours he sits by the fire "telling himself from minute to minute that of all God's creatures he was the most heavily afflicted" (93). It is not long before his gloomy thoughts cause him to doubt his own sanity, and he admits,

> "The truth is, that there are times when I am not—sane. I am not a thief,—not before God; but I am—mad at times. . . . There are different

> kinds of sickness. There is sickness of the body, and sickness of the heart, and sickness of the spirit;—and then there is sickness of the mind, the worst of all. . . . With me, Mary, it has been all of them,—every one! My spirit is broken, and my mind has not been able to keep its even tenour amidst the ruins." (152-53)

Crawley feels burdened physically and spiritually, and he fears that he can no longer muster the mental strength he needs to endure. Nonetheless, his faith keeps him from complete despair; he tells his wife, "'But I will strive. I will strive. I will strive still. And if God helps me, I will prevail'" (1.153). This determined faith, along with the persistence of several friends who help Crawley despite his protestations, keeps Crawley from the tragic melancholic death his counterpart Louis Trevelyan succumbs to in *He Knew He Was Right.*

In addition to relying on his faith in the midst of disappointment, frustration and hardship, Crawley often turns to stories of classical heroes and martyrs for comfort. Unfortunately the comfort is a two-edged sword because the heroic stories actually feed his depression as he identifies with the heroes and interprets his life as a tragedy of equal proportions.[2] As he compares his situation to St. Paul's, he concludes that his own situation is much worse because at least the apostle was respected:

> And in it all, I think, there was nothing so bitter to the man as the derogation from spiritual grandeur of his position as priest among men, which came as one necessary result from his poverty. St. Paul could go forth without money in his purse or shoes to his feet or two suits to his back, and his poverty never stood in the way of his preaching, or hindered the veneration of the faithful. St. Paul, indeed, was called upon to bear stripes, was flung into prison, encountered terrible dangers. But Mr. Crawley,—so he told himself,—could have encountered all that without flinching. The stripes and scorn of the unfaithful would have been nothing to him, if only the faithful would have believed in him, poor as he was, as they would have believed in him had he been rich! . . . No one

> respected him. No one! His very wife thought that he was a lunatic. (94)

Crawley assuages his hurt pride by telling himself that his sufferings are more grievous than St. Paul's and that he could out-martyr the martyr if given the chance. He faces every trial with stoic determination, resolved to fulfill his duty more diligently or more selflessly than his colleagues. This response allows him to believe that he is more dedicated than his colleagues and that they are not his superiors, even though they enjoy a higher social status. Unfortunately, the more he sees himself as a tragic hero, the more he creates his own tragic circumstances.

As exasperating as Crawley's pride is at times, at moments it serves him well. Barsetshire is divided into two ecclesiastical camps, the Proudie camp and the Grantly camp. Mrs. Proudie, the bishop's domineering wife, seizes on Crawley's dilemma as an opportunity to strike a blow against the Grantly faction. Determined to make an example of Crawley, she pushes the bishop to replace Crawley and sequester his income immediately. Although Dr. Proudie does not share his wife's zeal for battle and knows that he does not legally have the preemptive power that his wife believes he has, he agrees to appoint Mr. Thumble as a replacement for Crawley. Knowing Mrs. Proudie is behind the appointment, Crawley is incensed and refuses to give up his parish duties until he is legally relieved of them. As he walks to Barchester for his interview with the bishop, he imagines the scene as an opportunity to shame his enemies:

> He took great glory from the thought that he would go before the bishop with dirty boots,—with necessarily dirty boots,—with rusty pantaloons, that he would be hot and mud-stained with his walk, hungry, and an object to be wondered at by all who should see him, because of the misfortunes which had been unworthily heaped upon his head; whereas

> the bishop would be sleek and clean and well-fed,—pretty with all the prettinesses that are becoming to a bishop's outward man. And he, Mr. Crawley, would be humble, whereas the bishop would be very proud. And the bishop would be in his own arm-chair,—the cock in his own farmyard, while he, Mr. Crawley, would be seated afar off, in the cold extremity of the room, with nothing of outward circumstances to assist him,—a man called thither to undergo censure. (140)

His pride energizes him, and he confidently tells himself that he will "take the bishop in his grasp and crush him,—crush him,—crush him!" (140).

During the interview, the bishop tries to persuade Crawley that it would be better for him to relinquish his pulpit, but Mrs. Proudie continually interjects inflammatory remarks. Crawley ignores Mrs. Proudie as long as he can, but he finally exclaims, "'Peace, woman . . . you should not interfere in these matters. You simply debase your husband's high office. The distaff were more fitting for you. My lord, good morning'" (149). Crawley is triumphant. Mrs. Proudie, on the other hand, is incensed, and the bishop is humiliated. Although Crawley never speaks about his interview with the Proudies to anyone but his wife, the county quickly learns of the confrontation. Many people begin to regard Crawley with a new degree of respect because they dislike Mrs. Proudie and are pleased to hear that she has been summarily defeated. The narrator notes that Dr. Proudie even admires Crawley's firmness with Mrs. Proudie (149).

Crawley's interview with the Proudies is unusual, though. More commonly, Crawley's pride prompts unfavorable responses from the community. For example, when Crawley refuses to accept counsel from respected lawyers and ministers like Mr. Walker, Mr. Robarts, and Dr. Tempest, the community regards his proud independence as evidence of partial insanity. They consider his refusal to be foolish and self-important,

as if he believes that his problems are too serious, too unique, or too humiliating to be resolved by his neighbors. Similarly, Crawley's decision to resign his living at Hogglestock is considered foolish and rash. He tells a sympathetic clergyman, "'I cannot trust to any one,—in a matter of conscience. . . . I can trust no one with my own conscience'" (166-67). When he realizes that many of his neighbors believe he is guilty, he decides to resign his living because he does not want the charges against him to interfere with his parish work. Although Crawley is confident that he is not guilty of theft in God's eyes because "There had never been a thought of theft in his mind, or a desire to steal in his heart" (507), he knows that he has become the topic of public gossip. As he tells Dr. Tempest, who advises him not to resign before his trial, "'The name and fame of a parish clergyman should be unstained. Mine have become foul with infamy. I will not wait to be deprived by any court, by any bishop, or by any commission. I will bow my head to that public opinion which has reached me, and I will deprive myself'" (512).

Crawley's neighbors and colleagues would consider his decision to follow his conscience admirable if they shared his values and convictions. Unfortunately, Crawley lives in a common-sense world that no longer values heroes and, in fact, is suspicious enough of heroic impulses to regard them as mad impulses. Because the community's pragmatic approach focuses on the likelihood that Crawley's self-sacrifice will harm his family, his neighbors consider his conscience-bound convictions excessive and unwarranted. Consequently, the more that Crawley tries to imitate the self-denial and

conviction of the heroes and saints he admires, the more his neighbors worry about his sanity.

Even though Crawley's dilemma causes a whirlpool of activity in Barsetshire, including discussions about reasonable behavior, grandiose pride, and independent convictions, public opinion is not against Crawley as much as he thinks it is. Most of Crawley's neighbors believe that he should not be sent to prison. In the chapter "What the World Thought About It," the reader quickly realizes that the community is in the process of qualifying the terms *guilty* and *innocent.* The standard dichotomy between guilt and innocence (either he did or he did not act as charged) is too simplistic to reconcile the evidence, Crawley's character, and his occupation. There is no doubt that Crawley cashed Lord Lufton's cheque, but his neighbors begin to wonder whether cashing the cheque actually constitutes a crime in his case. They wonder why a conscientious minister would commit such an obvious crime in his own community. There must be an explanation, and as the community tries to account for the inconsistencies, they consider a number of mitigating factors, including his social status, poverty, lack of criminal intention, and "the unfortunate peculiarity of his disposition" (10).

The women of Silverbridge, focusing on the fact that Crawley is a gentleman and a clergyman, assert Crawley's innocence. According to the ladies' sensibilities, Crawley may be poor, but he is an educated minister, not a common criminal who would steal money. Lady Lufton, for example, does not judge Crawley according to the legal

evidence but according to her view of the world and her assumption that a gentleman will always behave like a gentleman:

> She believed intensely in the wickedness of the outside world, of the world which was far away from herself, and of which she never saw anything; but they who were near to her . . . were made, as it were, saints in her imagination. They were brought into the inner circle, and could hardly be expelled. She was an old woman who thought all evil of those she did not know, and all good of those whom she did know; and as she did know Mr. Crawley, she was quite sure he had not stolen Mr. Soames's twenty pounds. (37)

The men of Silverbridge, however, "were made of sterner stuff, and believed the man to be guilty, clergyman and gentleman though he was" (36). The rector Dr. Tempest, believing that Crawley's poverty mitigates his guilt, asks, "'What is a man to do . . . when he sees his children starving?'" (37). Dr. Tempest is not alone in wondering if Crawley's poverty should be considered a mitigating factor. Anne and Annabella Prettyman believe that he "ought to be forgiven" because "the world had been so cruel" to Crawley and his family (108).

John Eames and Mr. Toogood also suggest that Crawley deserves special consideration because he has suffered as a poor curate. When John Eames remarks, "'You must not judge him as you do other men'" and Mr. Toogood adds, "'we ought to stretch a point in his favor,'" Mr. Walker, a lawyer who sympathizes with Crawley, points out the inconsistency in their logic:

> . . . What do we mean when we say that one man isn't to be trusted as another? We simply imply that he is not what we call responsible."
>
> "And I don't think Mr. Crawley is responsible," said Johnny.
>
> "Then how can he be fit to have charge of a parish?" said Mr. Walker. "You see where the difficulty is. How it embarrasses one all round. The amount of evidence as to the cheque is, I think, sufficient to get a verdict in an ordinary case, and the Crown has no alternative but so

> to treat it. Then his friends come forward . . . and say, 'Ah, but you should spare this man, because he is not responsible.' Were he one who filled no position requiring special responsibility, that might be very well." (316)

Crawley's friends wish to excuse him from legal prosecution, but Mr. Walker realizes that an acquittal on the grounds of insanity would increase the likelihood of church sanctions against Crawley. It would not be in the best interests of the denomination or the community to have a minister who escapes a charge of theft by claiming partial insanity. Crawley's effectiveness in the parish would inevitably be compromised if the parishioners' suspicions regarding sanity were confirmed in a court of law. As John Conolly, professor at the University of London, commented in his 1849 *Croonian Lectures,* even though an individual may recover from an attack of insanity, "the temper of the brain has been doubted for ever afterward, and the position of the individual in society, won by previous exertions of his mind, has, you all know, seldom been regained and maintained" (1). If this is true among the general population, it is certainly true for a minister like Crawley, whose rigorous pride and gloomy disposition are considered excessive and detrimental to himself and his family. Crawley's personality is such that his parishioners will probably believe that he is partially insane, even after it is discovered that he had a right to cash the cheque.

Most of Crawley's neighbors recognize that he is *technically* guilty, but they suggest that he is not *morally* guilty because he did not intend to commit a crime. Lily Dale, a friend of Crawley's daughter Grace, comments, "'I think he took it, and I think it wasn't his. But I don't think he stole it. I don't know whether you can understand the difference'" (239). Lily and others believe that Crawley made a mistake, a "temporary

obliquity of judgment," and, therefore, should not be held accountable for a crime: "It had not been his intention, they said, to be a thief, and a man should be judged only by his intention" (83). Similarly, Mark Robarts tells Lord Lufton that Crawley should not be prosecuted: "'I imagine that it had been lying in the house, and that Crawley had come to think that it was his own.'" Lord Lufton realizes, though, that this is a flimsy excuse and asks, "'What do we do when a poor man has come to think that another man's property is his own? We send him to prison for making the mistake'" (38). As Lord Lufton knows, the law routinely holds people accountable for consequences they do not intend. Consequently, he believes the case must be decided by a jury, although he does not want to see Crawley convicted.

Crawley's lack of criminal intention and his position as a poor curate elicit sympathy from his neighbors, but the strongest mitigating factor in Crawley's favor is the common belief that he is "touched with madness" (369). Crawley has been informally judged "half-mad" for years, but the community must now consider whether Crawley's "peculiarities" warrant consideration in a criminal trial. Mrs. Crawley believes her husband is not insane, but she recognizes that "there were dark moments with him, in which his mind was so much astray that he could not justly be called to account as to what he might remember and what he might forget" (34). Consequently, she is sometimes forced to treat him as "an acknowledged lunatic" (10).

Although Mrs. Crawley and others relate to Crawley as if he is partially insane, Trollope questions the validity of the concept of partial madness when Mr. Walker remarks, "a man must be sane altogether or mad altogether, and that Mr. Crawley must,

if sane, be locked up as a thief, and if mad, locked up as a madman" (108). Mr. Walker's assertion that a man must be completely sane or completely insane echoes Justice Hale's and Justice Tracy's requirement for total insanity. As noted in Chapter 1, the legal precedent regarding total insanity was modified in 1842 by the M'Naghten Rules, which stipulated simply the presence of a serious "defect of reason" at the time of the crime. Nonetheless, in the 1860's when Trollope wrote *The Last Chronicle of Barset*, the courts were still debating what constituted an exculpatory degree of insanity. Trollope's narrative echoes these contemporary medicolegal debates as the residents of Barsetshire discuss the legal and ecclesiastical implications of his dilemma.

In addition to affirming the traditional requirement for total insanity, Mr. Walker's assertion relies upon the legal concept of "reasonable" behavior. The law assumes that a guilty person knows that his/her actions are wrong and manipulates circumstances to avoid detection. As Hilary Allen explains in *Justice Unbalanced,* "legal discourse constructs for itself a standard human subject, endowed with consciousness, reason, foresight, intentionality, an awareness of right and wrong and a knowledge of the law of the land" (23). Mr. Walker alludes to this assumption when he says that Crawley does not act like a reasonable thief: "He must have known, had not all judgment in such matters been taken from him, that the cheque would certainly be traced back to his hands. No attempt had been made in the disposing of it to dispose of it in such a way that the trace would be obliterated. . . . the guilt of the theft seemed to be almost annihilated by the folly of the thief" (368). Blatantly cashing a cheque that could be traced is foolish; it lacks foresight and suggests a lack of criminal intention. It seems

reasonable then to Mr. Walker to argue that Crawley's actions were prompted by temporary insanity, an exculpatory category that Justice Hale and others acknowledged in the seventeenth century.

Mr. Walker still faces a challenge, though, as he prepares an insanity defense for Crawley. During the mid-Victorian years, a successful insanity defense was usually based on an argument of irresistible impulse.[3] This argument does not apply to Crawley, though. He is a melancholic man who is often so self-absorbed that his conscious mind does not register everyday events going on around him, yet there is no evidence that he is compelled by disease or irresistible impulse. Consequently, Crawley's defenders must assert a different argument. Mr. Walker believes that the strongest evidence of Crawley's insanity is the fact that he refuses to hire a lawyer to defend him in court:

> "Now a man must be mad who won't employ a lawyer when he wants one. You see, the point we should gain would be this,—if we tried to get him through as being a little touched in the upper story,—whatever we could do for him, we could do against his will. The more he opposed us the stronger our case would be. He would swear he was not mad at all, and we should say that that was the greatest sign of his madness." (158)

This approach stems from the "reasonable man" concept and allows Crawley's friends to mount a defense without his consent or help. Any opposition from Crawley can be explained as evidence of his madness because, as both the law and common sense assume, any sane man would hire a lawyer and cooperate with him as much as possible.

John Eames and Mr. Toogood, a London lawyer related to Mrs. Crawley, undertake to investigate the cheque-cashing incident on Crawley's behalf. They eventually discover that Mrs. Arabin gave Crawley the £20 cheque, which she had received as a rent payment from the landlord of The Dragon of Wantly. (Mr. Toogood

later discovers that an employee of the inn had stolen Mr. Soames's cheque and had given it to the landlord of the inn.) Because Mrs. Arabin never told her husband about the additional cheque, Dean Arabin reported that he gave Crawley five £10 notes. Although Mrs. Arabin's news exonerates Crawley, he is still in a difficult situation because he resigned his living. A position must now be found, or his family will starve. Crawley, rather uncharacteristically, is not bitter about the matter, though. Recognizing an opportunity to reestablish himself as a model Christian and a gentleman rather than a half-mad, poor curate, Crawley tells Dean Arabin, "'For the future it will be well that it should be forgotten . . . or, if not forgotten, treated as though forgotten'" (641). Similarly, when Mrs. Crawley criticizes Mr. Thumble, the man who temporarily replaced him in his parish, Crawley remarks, "'Our flesh at that time was somewhat prone to fester, and little thorns made us very sore'" (641). Crawley's forgiving attitude toward Arabin and Thumble suggests that his disposition has improved. He is not a completely new man, though. After receiving a living as the vicar of St. Ewold's, Crawley's pride prompts him to insist that it will not become a permanent living unless he proves his competence during the first two years. Crawley's wounded pride is finally soothed, however, when Archdeacon Grantly addresses Crawley as a gentleman:

> How the archdeacon conquered him may perhaps be best described by a further narration of what Mr. Crawley said to his wife. "I told him in regard to money matters, as he called them, I had nothing to say. I only trusted that his son was aware that my daughter had no money, and never would have any. 'My dear Crawley,' the archdeacon said . . . 'I have enough for both.' 'I would we stood on more equal grounds,' I said. Then as he answered me, he rose from his chair. 'We stand,' said he, 'on the only perfect level on which such men can meet each other. We are both gentlemen.' 'Sir,' I said, rising also, 'from the bottom of my heart I agree with you. I could not have spoken such words; but coming from

> you who are rich to me who am poor, they are honourable to the one and comfortable to the other.'" (674)

Crawley's life will finally be more comfortable. His personality will, no doubt, remain peculiar in the eyes of his neighbors, but the narrator tells us, "Mr. and Mrs. Crawley became quiet at St. Ewold's, and, I think, contented" (675). Crawley will probably never experience deep contentment, but at least his new circumstances will not aggravate his sense of injustice as much as his poverty did. And so, he will probably appear to be contented to those who are not aware of his private disappointments.

In *The Last Chronicle of Barset,* Trollope creates a borderland crisis that involves an entire community. As the residents of Barsetshire negotiate legal and ecclesiastical issues related to Crawley's case, they express many sentiments and theories debated by Victorian physicians, lawyers, and concerned citizens. Their discussions echo several of the medicolegal debates of the day, though Trollope, unlike Braddon, does not explore alienist theories involving irresistible impulse. Because Trollope never suggests that Crawley's partial lunacy is a physiological condition, the question confronting Barsetshire is not whether Crawley's partial lunacy is a moral or somatic condition but whether his "peculiarities" are sufficiently mad to exempt him from legal accountability without depriving him of his vocation. Thus, the novel allows the reading public to consider contemporary definitions of insanity and suggests ways to negotiate conflicting priorities regarding culpability. Trollope's readers have another opportunity to explore the borderland between insanity and culpability in *He Knew He was Right,* which examines the self-destructive nature of melancholia and monomania.

## Louis Trevelyan and Categories of Madness

In *He Knew He Was Right* (1868-69), Trollope pushes the melancholic personality he gave Josiah Crawley to its logical, self-destructive conclusion in Louis Trevelyan. In his *Autobiography* Trollope writes, "It was my purpose to create sympathy for this unfortunate man [Trevelyan] who, while endeavouring to do his duty to all around him, should be led constantly astray by his unwillingness to submit his own judgement to the opinions of others" (321-22). Although Trollope believed that he did not succeed in this goal, the novel stands as a fictional case study of a man's psychological deterioration. Additionally, Trollope's juxtaposition of Trevelyan's increasing madness with outbursts of irrational behavior in other characters recalls contemporary confusion about the ambiguous and variable nature of insanity. Trollope also reiterates Victorian questions about who is best qualified to judge an individual's sanity: close relatives or trained physicians. Trollope's representation of these questions regarding authority and definition invites the reading public to grapple with issues that were frequently debated in Victorian courts, medical schools, and government halls.

*He Knew He Was Right* begins where most Victorian novels end, that is, with a propitious marriage. Within the first three pages of the novel, however, we are told that the marriage between Louis Trevelyan and Emily Rowley will be a troubled one. A brief conversation between Emily's parents about the fact that both Emily and Louis like to have their own way emphasizes the mutual pride and stubbornness that will soon break up the marriage. In the next paragraph, the point is strengthened when the narrator observes that "Mr. Trevelyan had begun to think he should like to have his own way

completely" and adds a few lines later that "Emily also liked to have her own way" (1.4). Without a doubt, there is trouble ahead for this young couple, and, despite their love, both will cling to their pride.

The immediate conflict that separates Trevelyan and Emily involves the attentions of an elderly bachelor named Colonel Osborne. Although Osborne is an old friend of Emily's father, his previous relationships with married women cause Trevelyan and others to believe that Osborne's visits with Emily are improper. Emily denies the impropriety of Colonel Osborne's attention and continues to allow him to visit. Pride blinds both Emily and Trevelyan as the conflict escalates. Emily refuses to acknowledge that Osborne's visits are foolish, and Trevelyan refuses to acknowledge that his fears of public humiliation are excessive. Both of them aggravate the quarrel by adamantly asserting their own views and insisting that the other apologize. Ultimately Emily and Trevelyan share the responsibility for the breakdown of their marriage, but Trevelyan bears an additional responsibility for his own mental and physical decline.

As the weeks pass, Trevelyan is tortured by contradictory thoughts and feelings. The narrator notes the perversity of Trevelyan's thoughts when he suggests that Trevelyan's prayers to save Emily from sin mask a deeper need of self-justification:

> [H]e almost came to hope that it might be otherwise;—not, indeed, with the hope of the sane man, who desires that which he tells himself to be for his advantage; but with the hope of an insane man, who loves to feed his grievance, even though the grief should be his death. They who do not understand that a man may be brought to hope that which of all things is the most grievous to him, have not observed with sufficient closeness the perversity of the human mind. (1.302)

It is Trollope's depiction of this perverse aspect of human nature that makes Trevelyan's madness so interesting and realistic. Readers who have struggled with persistent fears and doubts will recognize the irrational torture Trevelyan inflicts upon himself: "That his wife was innocent he was quite sure. But nevertheless, he was himself so much affected by some feeling which pervaded him in reference to this man [Colonel Osborne], that all his energy was destroyed, and his powers of mind and body were paralyzed. He could not, and would not, stand it" (1.15). Trevelyan knows his inflexible pride and obsessive thoughts are destroying his marriage and health, but they are so ingrained in his nature that he is unable to overcome them. As the narrator observes, "He had taught himself to believe that she had disgraced him; and, though this feeling of disgrace made him so wretched that he wished he were dead, he would allow himself to make no attempt at questioning the correctness of his conviction" (1.210). Throughout these passages, Trollope emphasizes the willfulness underlying Trevelyan's melancholia.[4] The phrases "He could not, would not, stand it," "He had taught himself to believe," and "he would allow himself to make no attempt" suggest that Trevelyan consciously dwells on his grievances in order to solidify his position. This continual rehearsal assures Trevelyan that he is right, even though he knows his actions, most notably hiring a detective to watch Colonel Osborne and kidnapping his son, are "base and low" (1.149).

Trevelyan's self-indulgent melancholia is fueled by his expectation of mastery and his fear of public disgrace.[5] After Lady Millborough tells him that Colonel Osborne enjoys "'making mischief between men and their wives,'" Trevelyan worries about his own reputation as much as he worries about Emily's (1.22). He believes that "the

slightest rumour on a woman's name is a load of infamy on her husband's shoulders," and even though he does not really believe that Emily is guilty of sin, he fears "vile whispers, and dirty slanders would be dropped from envious tongues into envious ears, and minds prone to evil would think evil *of him and of his*" (1.36, emphasis added). A sense of "incurable ignominy" overwhelms his self-image, and he sees "himself as one who had been made unfit for society by no fault of his own" (1.205). The connection Trollope makes between perceived disgrace and depression is not unusual.[6] Nineteenth-century physicians and philosophers frequently observe that feelings of disgrace and fears of humiliation accompany emotional crises. As Dr. John Abercrombie observes in his 1833 *The Philosophy of the Moral Feelings*:

> [W]e have to keep in mind the mental agony and distraction which arise from jealousy, envy, hatred, and resentment,—the sense of shame and disgrace which follow a certain line of conduct,—and the distress which often arises purely from the contempt and disapprobation of our fellow-men. . . . It must likewise accord with the observation of every one, that among circumstances, which most frequently injure our peace and impair our comfort, are those which ruffle the mind by mortifying our self-love. (102-103)

Trevelyan's fears of gossip and public disgrace become abnormal when he allows them to dominate his thoughts and diminish his self-image. A disciplined effort to redirect Trevelyan's obsessive thoughts might forestall his madness, but unfortunately he seeks no relief from his depression. Instead of seeking healthy distractions, "From morning to night he sang to himself melancholy silent songs of inward wailing, as to the cruelty of his own lot in life" (1.263). By continually dwelling on the same thoughts, he carves them deeper into his consciousness so that in the end he is unable to get out of the mental rut he creates for himself.

Like the melancholic patients Heinroth describes in *Textbook of Disturbances of Mental Life,* Trevelyan suffers a "paralysis of the disposition," which becomes an all-encompassing depression (189). Heinroth compares this paralysis to a heavy burden, which "clings to the heart, weighs it down, and pulls it to ever greater depths. . . . the melancholic disposition is driven back into itself by depression, feeling nothing but itself and its pain, in ever greater dissension" (223). While living in Italy, Trevelyan's melancholic paralysis destroys his health to such an extent that he suffers "complete organic exhaustion: his is a dark affliction that broods in brain and body both, 'wasting' the whole man, intellectually and physically" (Wiesenthal 230).[7] When Emily finally convinces Trevelyan to return to England, he must be transported like an invalid. After several months he dies.

As Trollope records Trevelyan's mental and physical deterioration, he destabilizes the concept of madness. Ruth apRoberts has described Trollope as a "complicator" (41), and this is certainly true in his representations of madness. Trevelyan is not the only character in *He Knew He Was Right* who acts irrationally and passionately, nor is he the only character who likes to be in control. Both Emily and Miss Stanbury are proud, strong-willed individuals who like to have their own way. The difference between Trevelyan and these characters seems to be more a matter of degree than substance.[8] Trevelyan's stubborn pride and irrationality do not appear abnormal at first—irritating and exasperating to be sure but not abnormal. Initially Lady Millborough is sympathetic with Trevelyan's concerns, but she and other friends soon tire of his company because he continually talks about his grief and the injuries done to him. As

Trevelyan becomes more suspicious and irrational, his friends try to reason with him, but they are unable to pierce his rationalizations.

Trevelyan's resistance to these appeals and persuasions corresponds to the inflexible will that Esquirol observed in his melancholic patients:

> It is scarcely possible to imagine the full force and subtilty of their reasonings in sustaining their prejudices, disquietudes, and fears. Rarely do we succeed in convincing, and never in persuading them. . . . Nothing can subdue it, neither reasoning, nor the solicitations of the most active tenderness, nor threats. Nothing can triumph over their errors, their alarms or fears, Nothing can remove their prejudices, their repugnances or aversions. Nothing can divert them from the engrossing thoughts that occupy their mind and heart, but strong and unexpected shocks to attract their attention. (208)

Lady Rowley, Emily, and Sir Marmaduke all attempt to reason with Trevelyan, and all fail. When Lady Rowley objects to his demand that Emily submit and beg his pardon, Trevelyan reiterates his right to be master and exclaims, "'She must be crushed in spirit, Lady Rowley, before she can again become a pure and happy woman'" (2.104). The more that Lady Rowley defends her daughter, the more Trevelyan insists that he cannot leave his impressionable son with his wife unless she repents. Similarly, Hugh Stanbury, frustrated by Trevelyan's obstinacy, counters Trevelyan's argument about mastery with the assertion "'I do not think that she [Emily] is half so wrong as you yourself.'" When Trevelyan asserts that he thinks a marital separation is appropriate, Hugh responds, "'I cannot understand how you can be so mad as to say so'" (1.203). The more Hugh tries to make Trevelyan adopt a reasonable position, the more he conflates Trevelyan's obstinacy with madness. Hugh's charges of madness stem from frustration rather than medical knowledge of Trevelyan's mental state. Later, when Trevelyan's irrational

behavior begins to frighten his family and friends, the possibility of a more serious medical condition emerges. As the narrator notes, "It is all very well to declare that a friend is mad when one simply desires to justify one's self in opposition to that friend;—but the matter becomes much more serious when evidence of the friend's insanity becomes true and circumstantial" (2.144).

The serious task of understanding Trevelyan's irrationality and responding to it appropriately is complicated by the fact that contemporary standards of behavior blur the dividing lines between sanity and insanity, normal and abnormal, acceptable and unacceptable. For example, both Sir Marmaduke and Mr. Outhouse respond to Trevelyan with such anger that their own behavior is labeled mad. Mr. Outhouse is angry with Trevelyan because his nieces, Emily and Nora, have been forced to seek his protection until their parents return to England. When Trevelyan writes to Mr. Outhouse to inform him that he plans to take Louey from Emily, the narrator observes,

> If Trevelyan was mad when he wrote this letter, Mr. Outhouse was nearly as mad when he read it. . . . . Though he had often declared that Trevelyan was mad, he would not remember that now. Such a letter as he had received should have been treated by him as the production of a madman. But he was not sane enough himself to see the matter in that light. He gnashed his teeth, and clenched his fist, and was almost beside himself as he read the letter a second time. (1.351)

Mr. Outhouse is so angry that he conveniently "forgets" his previous declarations of Trevelyan's madness. By doing so, he rationalizes his own outburst of anger. As long as Mr. Outhouse can ignore Trevelyan's madness, he can rant and rave without feeling guilty. As Trollope suggests, Mr. Outhouse's emotional self-justification and physical

demonstrations of anger compromise his ability to think and act rationally. Consequently, his outburst is not much different than Trevelyan's early outbursts.

Trollope continues to blur the line between rational and irrational behavior with Sir Marmaduke's responses to Trevelyan. Like Mr. Outhouse, Sir Marmaduke is very angry with his son-in-law for maligning Emily's character, rejecting advice from his family and friends, and foolishly destroying his marriage. Sir Marmaduke declares that Trevelyan is mad on several occasions, but he does not "believe that Trevelyan was so mad as to be fairly exempt from the penalties of responsibility" (2.150). Nor does he believe that Trevelyan's "madness was of such a nature as to interfere with his own duties in punishing the man" (2.144). In other words, Sir Marmaduke holds Trevelyan accountable for his actions and wants to punish him for disgracing his daughter. While Sir Marmaduke's judgmental attitude provides an opportunity for readers to sympathize with Trevelyan for a moment, it also blurs the distinction between madness and sanity. Dr. Nevill notices Sir Marmaduke's angry response to Trevelyan and later tells Emily that it was foolish for Sir Marmaduke to threaten Trevelyan and adds that Sir Marmaduke's anger toward Trevelyan "'was hardly rational. One does not become angry with a madman'" (2.376).

If the anger expressed by Sir Marmaduke, Mr. Outhouse, and Trevelyan is essentially the same in kind, the judgment that distinguishes them by degree is a social construction based on a network of communal values and priorities. Although Sir Marmaduke and Mr. Outhouse are in danger of transgressing the boundaries set by social standards of behavior, they do not cross the line. Trevelyan does, though. He

does not simply approach extremes of passion; he is enveloped by them. By focusing on the gradual intensification of Trevelyan's irrationality and contrasting it with more common (more understandable and more acceptable) examples of irrationality, Trollope helps his readers to distinguish between emotional outbursts that are considered acceptable and outbursts that are considered excessive and unhealthy.

Trollope complicates the diagnosis of Trevelyan's madness on another level when several characters state that Trevelyan's madness is not the sort that warrants certification and confinement. For example, Sir Marmaduke tells Colonel Osborne, "'He is not so mad as to give us any relief by his madness,—poor as such comfort would be'" (2.119). From Sir Marmaduke's point of view, the situation would be much simpler if Trevelyan were an obvious lunatic who could be committed to an asylum. Lord Peterborough echoes Sir Marmaduke's sentiment when he remarks, "'He is undoubtedly so mad as to be unfit to manage anything for himself, but he is not in such a condition that any one would wish to see him put into confinement. If he were raving mad there would be less difficulty, though there might be more distress'" (2.342). These observations by Lord Peterborough and Sir Marmaduke recall a familiar question for Victorians: At what point does irrational behavior warrant confinement? This problem inevitably leads to another question: Who has sufficient understanding of insanity and the individual in question to determine whether or not confinement is necessary? Alienists asserted that laymen could not make an informed diagnosis because they did not understand the biological forces underlying madness. By mid-century the courts generally accepted the need for professional assessments of insanity, but, as Peter

McCandles notes, "The English public never wholly accepted it, however, and many people remained suspicious of the doctors' abilities and intentions even as reliance on them increased" (341).

Trollope's characterization of Dr. Nevill taps into this concern about Victorian doctors and their abilities to diagnose insanity. Although Dr. Nevill says that Trevelyan is not mad, Trollope suggests that the doctor's diagnosis is no more reliable than any of the other opinions expressed about Trevelyan's sanity. The narrator comments that the doctor "would not admit, even when treating his patient like a child, that he had ever been mad" (2.375). The fact that the doctor treats Trevelyan like a child while refusing to admit Trevelyan's irrational behavior suggests an obstinate refusal on the doctor's part. Dr. Nevill does recognize symptoms of monomania, but, because Trevelyan is not dangerous, he does not believe Trevelyan should be declared insane:

> He admitted that his patient's thoughts had been forced to dwell on one subject till they had become distorted, untrue, jaundiced, and perhaps mono-maniacal; but he seemed to doubt whether there had ever been a time at which it could have been decided that Trevelyan was so mad as to make it necessary that the law should interfere to take care of him. A man,—so argued the doctor,—need not be mad because he is jealous, even though his jealousy be ever so absurd. And Trevelyan, in his jealousy had done nothing cruel, nothing wasteful, nothing infamous. (2.359-60)

Dr. Nevill's position illustrates Simon During's observation that *monomania* was a label often reserved for "unfathomable" behavior like Henriette Cornier's beheading of a baby girl. As During argues, monomania "exists where it cannot be made intelligible, where 'common sense' cannot construe a motive" (87). Dr. Nevill thinks that Trevelyan's thoughts are "perhaps mono-maniacal," but he does not believe that Trevelyan's

madness is severe enough to warrant intervention other than home care. Because he understands Trevelyan's jealousy, he does not consider Trevelyan's accusations against Emily or the anguish he causes Emily when he kidnaps Louey particularly irrational or cruel. The doctor's blindness to mental cruelty reflects traditional assumptions about a husband's rights and privileges.

By connecting Dr. Nevill's judgment with contemporary views of male dominance, Trollope suggests that medical judgments are inevitably affected by the surrounding culture. As Janet Oppenheim observes,

> Scientists and medical doctors, belonging integrally to the public thus affected, share many of its biases and expectations. Their pronouncements are not objective, or free of implicit moral judgment, for science and medicine are interpretive endeavors into which the surrounding social context constantly intrudes. (4)

Trollope dramatizes this mixture of medical opinion and social prejudices in Dr. Nevill and then counters the bias with an alternative viewpoint. Immediately following the doctor's diagnosis, the narrator explains, "In all this Nora was very little inclined to agree with the doctor, and thought nothing could be more infamous than Trevelyan's conduct at the present moment,—unless, indeed, he could be screened from infamy by that plea of madness" (2.360). Unlike the doctor, Nora considers Trevelyan's behavior toward Emily and Louey to be both irrational and cruel. She would declare him mad, but she does not think that Trevelyan deserves the release from accountability that a declaration of madness would bring. Nora's rejection of the doctor's judgment gives the reader another view of Trevelyan's mental state. By this point in the narrative, one thing should be clear to the reader: In the borderland between sanity and insanity, forms of

partial madness exist that may be stigmatized and labeled as unacceptable but may not warrant legal or medical intervention. Consequently, assessing an individual's psychological condition and determining an appropriate response require a careful consideration of individual circumstances. Furthermore, because social prejudices like Dr. Nevill's intrude upon assessments of sanity, it is necessary to identify the competing assumptions, values, and priorities to insure that the needs of both the sufferer and his/her family are addressed.

Surrounded by the contradictory views held by Nora, Dr. Nevill, Sir Marmaduke, and Mr. Outhouse, Emily alternates between anger, disbelief, compliance, and compassion. At first she is so sure of the rightness of her own position that she refuses to consider Trevelyan's concerns about their public image. After Trevelyan kidnaps Louey, she tries to act in a conciliatory manner so that he will relinquish Louey, but when this attempt fails, she begins to believe he really is mad. Dr. Nevill's diagnosis that Trevelyan is not mad, however, creates a dilemma for Emily. From her point of view, there are only two options: "Had he not been mad he must have been a fiend" (2.380). Judging him as either a madman or a fiend, rather than as an individual afflicted with partial insanity, allows Emily to maintain an emotional distance. Both extremes—total madness and total wickedness—would relieve her of responsibility for the role that she played in the breakdown of her marriage and the deterioration of Trevelyan's health. Emily is caught in an impossible situation. As long as the doctor's diagnosis that Trevelyan is not mad stands, Emily must find a way to resolve the tension between Trevelyan's condemnation of her behavior and her own judgment that she has done

nothing wrong. She can either reject the doctor's diagnosis and judge her husband to be mad or accept the doctor's diagnosis and then judge him to be a fiend. What she cannot do is place Trevelyan in the borderland where behavior is sometimes mad and sometimes wicked because this judgment would effect a tacit admission that some of Trevelyan's actions have been reasonable responses to her own actions.

Although Emily treats Trevelyan "as though he were less responsible than an infant," she must regard him as a responsible adult because she "yearn[s] to be acquitted," and she realizes that an acquittal from a madman will not ease her conscience (2.380). Just before Trevelyan dies, Emily asks him to kiss her hand if he forgives her:

> For a moment or two the bitterness of her despair was almost unendurable. . . . But at length the lips moved, and with struggling ear she could hear the sound of the tongue within, and the verdict of the dying man had been given in her favour. He never spoke a word more either to annul it or enforce it. (2.382)

When Emily tells Nora, "'He declared to me at last that he trusted me,'" the narrator adds, "she said,—almost believing that real words had come from his lips to that effect" The narrator's qualification signals that Emily hears what she wants to hear. Because Trevelyan alternated between conciliation and condemnation in the past, the reader must consider the likelihood that Trevelyan might have retracted his words if he had lived a few minutes longer. This ambiguity requires the reader to judge Trevelyan's last words and gestures according to his or her own understanding of Trevelyan's character.

Trollope was certainly aware of the fact that *insanity, madness,* and *monomania* were labels that could be applied to a variety of behaviors for a variety of purposes. *He Knew He Was Right* provides numerous examples of irrational anger, unreasonable

demands, obsessive thinking, and self-destructive depression. Trollope's representations of these complex behaviors in Sir Marmaduke, Mr. Outhouse, Miss Stanbury, Emily, and Trevelyan allow his readers to consider the criteria that distinguish acceptable and unacceptable behavior, also normal and abnormal behavior. As in *The Last Chronicle of Barset,* Trollope demonstrates in *He Knew He Was Right* that the criteria varies according to individual circumstances and communal values.

## Inadequate Definitions and Community Negotiations

In an 1853 article titled "Madness: the Universal Presence," an anonymous writer for *The Times* wrote,

> Nothing can be more slightly defined than the line of demarcation between sanity and insanity. Physicians and lawyers have vexed themselves with attempts at definition in a case where definition is impossible. There has never yet been given to the world anything in the shape of a formula upon this subject, which may not be torn to shreds in five minutes by an ordinary logician. Make the definition too narrow, it becomes meaningless; make it too wide, the whole human race are involved in the drag-net. In strictness, we are all mad when we give way to passion, to prejudice, to vice, to vanity; but if all the passionate, prejudiced, vicious, and vain people in this world are to be locked up as lunatics, who is to keep the key of the asylum? (n.p.)

Trollope also recognized the inadequacy of contemporary definitions of insanity. As he comments in *He Knew He Was Right,* "There is perhaps no great social question so imperfectly understood among us at the present day as that which refers to the line which divides sanity from insanity" (1.299). Both Trollope and the writer for *The Times* recognized that the lack of comprehensive and consistent guidelines for diagnosing and treating insanity created a dilemma for Victorian society.

Because judgments of insanity are inevitably affected by the assumptions, values, prejudices, and priorities of the evaluators (doctors, lawyers, politicians, relatives, colleagues, and neighbors) questions regarding intervention, certification, and treatment cannot be conscientiously resolved without a careful examination of individual circumstances. Trollope dramatizes this complex process in *The Last Chronicle of Barset* and *He Knew He Was Right* and invites his readers to participate in the process. In Crawley's case, the process requires a careful sorting of legal, ecclesiastical, medical, and socioeconomic viewpoints. As the characters attempt to resolve the competing priorities, the narrative prompts the readers to examine their own priorities and consider how they would respond if they were residents of Barsetshire. Because Trevelyan's melancholia is both a cause of and a result of the breakdown of his marriage, Trollope urges his readers to re-consider the legitimacy of traditional marital rights and privileges. For example, although Trevelyan has the legal right to take Louey from Emily, the narrative suggests that this right should not be sacrosanct. The conflicting opinions between Dr. Nevill and Nora regarding the mental cruelty Trevelyan inflicts upon Emily also suggests that traditional privileges should not be upheld blindly.

Trollope depicts the ambiguous nature of madness in several other novels but without the same intense examination of melancholia, monomania, and community participation. In *Lady Anna* (1874), Countess Lovel becomes obsessed with regaining the social status denied her by her husband Earl Lovel. When her daughter announces that she intends to marry Daniel Thwaite, a poor tailor, she shoots Daniel in the shoulder. Because the incident is never reported, though, Countess Lovel is allowed to

live the remainder of her life at Lovel Grange. In *An Eye for an Eye* (1879), Trollope reverses the social dynamics. Overtaken by bitterness that Frederic Neville, the Earl of Scroope, will not marry her pregnant daughter Kate, Mrs. O'Hara forces Frederic off a cliff. Although Mrs. O'Hara is never prosecuted for the murder, she is confined in an asylum for the remainder of her life. In *Phineas Redux* (1874), Robert Kennedy, like Louis Trevelyan, is plagued by jealous thoughts. Kennedy's attempt to shoot Phineas Finn, Laura Kennedy's former lover, provokes both personal and political complications for several people and eventually causes such overwhelming despair for Kennedy that his health deteriorates, and he dies. In *The Prime Minister* (1876), Ferdinand Lopez's frustrated ambitions provoke melancholia, and he commits suicide by stepping in front of a train. These four novels, along with *The Last Chronicle of Barset* and *He Knew He Was Right,* address two questions that plagued Victorian society: What separates insanity from sanity? How should we, both as individuals and as a community, respond to people who suffer severe depression, obsessions, and delusions?

Trollope recognized the reality of insanity, but he also recognized that our inadequate definitions evoke ambiguous categories and ever-changing diagnostics. The resulting borderland demands that society negotiate (and periodically renegotiate) the criteria for fixing boundaries. In order to do this, concerned citizens, professionals and non-professionals alike, must be informed not only about clinical aspects of insanity but also about experiential aspects. Trollope's novels, especially *The Last Chronicle of Barset* and *He Knew He Was Right,* focus on subjective and interpersonal aspects of the

borderland and demonstrate the inadequacy of simplistic formulas, stereotypes, and traditions.

## Notes

[1] Trollope's father Thomas Anthony suffered serious bouts of depression stemming from financial difficulties and professional disappointments. Trollope's memories of his father's mood swings, melancholy, and pride gave him an insight into depression that he later incorporated in his characterizations of Crawley and Trevelyan. Robert Polhemus describes Crawley as "the apotheosis of his [Trollope's] father" and argues that "Through Crawley, he at last came to an understanding of his father and his father's failure to cope with life" (124, 145). For biographical information about Trollope and his father, see N. John Hall, *Trollope: A Biography* (Oxford: Clarendon Press, 1991), 3-77 and C. P. Snow, *Trollope* (New York: New Amsterdam Books, 1991).

[2] For a discussion of the ways that Crawley's identification with classical heroes "make[s] more misery" for him (50), see Elizabeth R. Epperly, *Patterns of Repetition in Trollope,* (Washington D.C.: Catholic U of America, 1989), 46-60.

[3] In *Responsibility in Mental Disease,* Henry Maudsley observes that "the insane have like passions with those who are not insane, and are restrained from doing wrong, and constrained to do right, by the same motives which have the same effects in sane persons" (4). He stresses, though, that, unlike law-abiding people who resist their passions and motives and unlike criminals who willfully indulge them, insane individuals experience destructive impulses that they cannot resist. Because Maudsley believes these

irresistible impulses stem from physiological abnormalities, he asserts that the insane are not culpable for their actions: "[I]t is manifestly not justice to him to treat him as if he were free from disease and were a completely responsible agent" (*RMD* 135).

[4] Trollope emphasis on willfulness echoes Esquirol's observation of lypemaniacs (melancholics):

> They perceive clearly that they are irrational, and often confess it, with grief and even despair. They are however, brought back by the passion that controls them, to the same ideas, fears, disquietudes and delirium. It is impossible for them to think, will, or act against it. Many assure us, that a resistless power has taken from them their reason, and that this power is God, the devil, *fate*; and that they no more possess the ability to direct it, than of controlling their will. Is not this *reasoning* lypemania? The will of most lypemaniacs is inflexible. (208)

This emphasis on human will and spiritual forces contrasts the somatic theories Maudsley and Tuke discussed in their mid-century writings.

[5] For a discussion of Trevelyan's obsession with mastery, see Simon Gatrell, "Jealousy, Mastery, Love, and Madness: A brief reading of *He Knew He Was Right,*" *Anthony Trollope,* ed. Tony Bareham (New York: Barnes & Noble, 1980) 95-115.

[6] In a table compiling the causes of 482 cases of melancholia, Esquirol lists 60 cases of domestic troubles, 48 cases of reverses of fortune and consequent misery, 42 cases of disappointed affection, and 12 cases of wounded self-love (214). Feelings of disgrace and fears of humiliation would be natural companions to the emotional crises that Esquirol and others listed as common causes of melancholia.

[7] C. S. Wiesenthal argues that Trollope's representation of melancholia "incarnates quintessential characteristics of the melancholic anatomy" (230). Wiesenthal also argues that Trollope's representation

> construct[s] a 'body' of rhetorical dimensions: the 'figure' of a melancholy body that is essentially ordered within and intrinsic to the realm of symbolic representation. In *He Knew He Was Right* Trollope, for instance, typically renders mental states or symptoms of melancholy, such as Travelyan's [*sic*] jealous obsession, or affects of sorrow and grief, either directly or indirectly in terms of corporal metaphors: a physical burden or load, an organic tumor-like growth, a flesh wound or an injury. At least in this respect, it might be said that the body melancholy proves an entity which 'proceeds' as profoundly from a 'whole body' of language as from a whole physiological body. (230)

For a nineteenth-century discussion of physiological signs of melancholia, see Conolly's series "The Physiology of Insanity" in *The Medical Times and Gazette* (1858).

[8] C. S. Wiesenthal argues, however, that Trevelyan's melancholia *is* different in kind, specifically noting "his unique knack for eroticizing and fetishizing his own mental and physical suffering" (244).

## Braddon and the Inadequacy of Medical Categories

> Kierkegaard wrote the following from his own experience: "The worst affliction of all is, and continues to be, that one does not know whether one's suffering is an illness of the mind or a sin." . . . Kierkegaard went to the doctor "as a gesture to human institutions" and presumably also out of the urge to be fully and compellingly persuaded that he could accept as an illness what he had considered to be his sins. He was of course deeply disappointed. Presumably medical categories were as much related to what he was experiencing as the speech of Hottentots to platonic philosophy. (Jaspers 425-27).

In *Lady Audley's Secret*, Mary Elizabeth Braddon constructs a complex narrative of twists and turns, accusations and confessions, clever manipulations and unnatural impulses. Although these narrative strategies were common in Victorian sensation novels, it would be reductive to categorize *Lady Audley's Secret* as a sensation novel because the narrative resists simplistic distinctions not only between good and evil but also sanity and insanity. Lady Audley is a mixture of all four conditions: her potential goodness is undermined by her ambition, greed, and pride; her blatant wickedness is mitigated by the presence of inherited insanity; and her claim of insanity is called into question by her ability to act quickly, decisively, and strategically. Consequently, the narrative creates an interesting context for exploring the complex conflict between insanity and culpability and the broader conflict between determinism and voluntarism.

As a young woman, Helen Maldon soon realizes that the only way she can escape "'the dull slavery of a governess'" is to marry a rich man. Unfortunately, her marriage to George Talboys soon deteriorates into "'poverty and misery.'" Unable to get a job, George boards a ship for Australia and vows not to return until he is a wealthy man. After three years without a word from George, Helen feels trapped. She begins to experience "'fits of desperation'" and decides to abandon her infant son and start a less encumbered life as Lucy Graham (232-233). Eventually her girlish charm wins the heart of Sir Michael Audley, and Lucy becomes Lady Audley. Unfortunately, George's unexpected return to England threatens her new life, and she must devise a scheme to convince George that his wife is dead. Although the scheme succeeds for more than a year, eventually George discovers the truth and confronts Lady Audley at Audley Court. George then mysteriously disappears, and Robert, Sir Michael's nephew, fears that his friend George has been killed. When Robert accuses Lady Audley of murdering George, she confesses:

> "When you say that I killed George Talboys, you say the truth. When you say that I murdered him treacherously and foully, you lie. I killed him because I AM MAD! because my intellect is a little way upon the wrong side of that narrow boundary-line between sanity and insanity; because when George Talboys goaded me, as you have goaded me, and reproached me, and threatened me, my mind, never properly balanced, utterly lost its balance, and *I was mad!*" (227)

Once all of the facts are revealed, it is clear that Lady Audley is guilty of abandoning her son, falsifying death records, committing bigamy and arson, and attempting to murder George Talboys and Robert Audley. Yet, Sir Michael asks Robert to arrange "'for the future comfort'" of the wife he can no longer abide and even adds that the

"'arrangements cannot be too liberal'" (261). In order to spare Sir Michael further humiliation, Robert sends her to a private asylum in Belgium, where she dies about a year later.

Deciding the degree of Lady Audley's culpability and the appropriate punishment for her crimes is the central task required of the readers. This task is the same one that British juries have faced since Justice Matthew Hale commented: "[I]t must rest upon circumstances duly to be weighed by judge and jury, lest, on the one side, there be a kind of inhumanity towards the defects of human nature; or, on the other side, too great an indulgence given to great crimes" (30).[1] Braddon's readers must consider the legal, medical, and socioeconomic evidence presented in the narrative and then judge Lady Audley's character and actions without falling into either inhumanity or indulgence. Specifically, the readers must consider the socioeconomic limitations that confronted Victorian women, the legal concept of criminal intent, and the medical concept of irresistible impulse. Adding their own values and priorities to these considerations, some readers may condemn Lady Audley for her schemes and deceptions while others may blame the society that restricts Lady Audley's options. For example, in 1863 *Fraser's Magazine* was not sympathetic towards Lady Audley and described her as "nothing more than a cold, calculating, heartless woman. . . . scarcely a human being" (259). More recently, Nicholas Rance, along with other twentieth-century critics, argues that Lady Audley's bigamy and subsequent crimes are consequences of "her limited options rather than her innate depravity" (121).[2] Because the narrative presents evidence of both

wickedness and insanity, the readers, like jurors, must decide which bits of evidence are most significant and compelling.

## Competing Discourses

Although Robert Audley gathers sufficient evidence to have Lady Audley arrested, the degree of her culpability is unclear because she claims to suffer mad impulses due to inherited puerperal insanity.[3] This ambiguity taps into contemporary medicolegal attempts to distinguish insane behavior from criminal behavior. While defense attorneys asserted determinist arguments that their clients were not culpable due to irresistible impulses, prosecuting attorneys asserted voluntarist arguments that the accused were morally and legally accountable for their deeds and deserved punishment. As we shall see, the narrative "debate" in *Lady Audley's Secret* concerning insanity and culpability echoes recurrent court deliberations regarding human nature, moral responsibility, and public demands for justice and deterrence.[4]

The trial of Martha Brixey offers a case in point. In 1845 Brixey, a domestic servant, slit the throat of her employer's child and then promptly confessed. Hoping to set a precedent for irresistible impulse, the defense argued that menstrual irregularities caused Brixey's "nervous system to operate automatically, without control" (Smith, *TBM* 156). This assumed connection between female physiology and pathology led to a successful insanity plea available to infanticidal women like Brixey. Although an acquittal on the grounds of insanity was not guaranteed, it became rather common in

Victorian courts.[5] Jurist James Fitzjames Stephen explained the rationale behind the court's leniency in 1873:

> The operation of the criminal law presupposes in the mind of the person who is acted upon a normal state of strength, reflective power and so on, but a woman after childbirth is so upset, and in such a hysterical state altogether, that it seems to me you cannot deal with her in the same manner as if she was in a regular and proper state of health. (qtd. in Allen, *JU* 28)

Stephen's remark echoes the prevailing Victorian assumption that women were not endowed with moral responsibility. As Kathryn Pauly Morgan argues, moral agency has been often denied women on the grounds of "moral epiphenomenalism" (147):

> [W]omen's bodies are interpreted as capable of acting upon the mind so as to occlude consciousness, thought, and moral feeling. And this is assumed to be an asymmetrical process, hence the epiphenomenal characterization of the process. The mind is not regarded as capable of taking control over these processes in any rational fashion. An hysterical woman is beyond the rational pale. (150)[6]

Victorian infanticide trials provide numerous examples of this epiphenomenalism. The courts, like the culture at large, assumed women were incapable of rational judgment and behavior during their menstrual cycles, childbearing years, and menopausal years. The Victorian tendency to treat women sympathetically because they were assumed to be automatons responding to irresistible stimuli was actually an example of protectionism, the assumption "that because women are physically and intellectually the weaker sex they should be given the benefit of laws designed to compensate for their inherent inferiority" (Mitchell 25). Thus, the legal benefits come at a high cost—being stripped of the freedom to think and act independently.[7]

In Brixey's case, the prosecution countered the defense's argument for irresistible impulse, by arguing that Brixey behaved like a criminal, that is, like a woman who knowingly broke the law. According to the prosecution, Brixey's confession to her employer and her concern about whether she would be hanged or transported indicated that she was aware of her actions and the legal consequences of her crime. Twenty years after Brixey's trial, Alfred S. Taylor, in his treatise *The Principles and Practice of Medical Jurisprudence*, reaffirmed the prosecution's position that Brixey "was perfectly *conscious* of the act she had committed; she treated it as a crime. . . . There was not the slightest evidence that at the time of the act, or at any time previous, she had laboured under any delusion or intellectual abberration [*sic*]" (1109-10). The prosecution's argument reflected the 1847 M'Naghten Rules, which stipulate that, in order to qualify as an exculpatory condition, "a defect of reason, from disease of the mind" must negate the accused's knowledge of right and wrong. In other words, individuals who demonstrate an understanding of moral distinctions should be held accountable for their crimes, but individuals who demonstrate an inability to distinguish between right and wrong (or legal and illegal) should not be held accountable.

Although Brixey's confession and anxiety about punishment seemed reasonable from a legal perspective, the jury apparently found it difficult to judge Brixey's violence—cutting the baby's throat with a kitchen knife—as reasonable behavior and found her not guilty by reason of insanity. The jurors' own common sense may have prompted the verdict rather than the medical or legal arguments presented by the defense and prosecution. The public, however, had a different view of what common sense

dictated. Rejecting the defense argument that Brixey's "violence was socially meaningless" because she "behaved like a machine" (Smith, *TBM* 156), and unconvinced that confinement in Bethlem was a sufficient consequence for slitting a baby's throat, the public protested the verdict and labeled Brixey the Greenwich Murderess. As Roger Smith notes, "[T]he critical reaction to the verdict suggests that the crime was perceived to have a social and not just a physical content" (*TBM* 156). Perhaps the public, especially parents who employed domestic servants, were uneasy about the court's decision to privilege Brixey as the victim of biological forces rather than the baby as the victim of a violent murderer.

As in Brixey's case, Lady Audley's claim of puerperal insanity complicates the question of culpability. Although Lady Audley does not kill her son, a clever lawyer could present her to the court as an infanticidal woman, that is, a woman who committed her crimes due to puerperal insanity. This strategy would increase the possibility of the court's leniency.[8] At the same time, though, Lady Audley's confession, like Brixey's, reveals her understanding of right and wrong and her fear of punishment. An argument based upon legal tests of knowledge and reasonable behavior could dismantle an insanity defense. Braddon develops the tension between these opposing arguments regarding Lady Audley's culpability by alternating voluntarist and determinist interpretations of her life and character. The dominant view is provided by Robert Audley, who considers Lady Audley a wicked woman rather than a madwoman His condemnation of Lady Audley is primarily allied with voluntarist discourse, in other words, an assumption that willful impulses and selfish desires have led her to commit murder. Robert also fears that

justice will not be served if George's murderer is not exposed and convicted. In contrast to Robert's moralist view, Lady Audley's confession of inherited puerperal mania and mad impulses, along with her description of a life of poverty, elicits a more sympathetic view of her and reads like an insanity defense informed by alienist discourse. These contradictory constructions of character and behavior recall similar constructions asserted during many Victorian insanity trials, including the trials of Mary Ann Brough and Celestina Somner.

On June 11, 1854, Mrs. Brough, once a wet nurse for the Prince of Wales, slit the throats of six of her children, ranging in ages between eighteen months and eleven years. When Mrs. Brough confessed to the police, she complained of exhaustion, a severe headache, and a "'black cloud'" before her eyes. Mrs. Brough's confession led the defense to focus on her physical and mental state, asserting "that the dreadful deed was committed by her while she was under the influence of a temporary frenzy and of an impulse which it was impossible for her to control" ("Esher" 11). The defense viewed Mrs. Brough sympathetically and saw no point in condemning a woman for actions caused by a faulty nervous system and an irresistible impulse. The prosecution countered the defense's theory of irresistible impulse by emphasizing Mrs. Brough's immorality. Specifically, the prosecution argued that Mrs. Brough's violence was an act of "selfish vindictiveness" because Mr. Brough had discovered that his wife was involved in an adulterous relationship and had threatened to present her with separation papers. Finally, the prosecution asserted that even if insanity were established, it would not exculpate her because it would be a "*self-created*" insanity stemming from Mrs.

Brough's immorality. The defense countered the prosecution's interpretation by asserting that a life of "depraved habits and vicious thoughts" could cause brain disease, which created a somatic condition that should be judged exculpable (Smith, *TBM* 158-159).[9]

In his charge to the jury, Justice Erle commented that the theory of irresistible impulse was "a most dangerous doctrine, for undoubtedly every crime was committed under some impulse, and the object of the law was to control impulses of that description and thus prevent crime." Nonetheless, Erle explained, if the jury believed "that at the time the prisoner committed the act she was not in a sane state," an acquittal would be appropriate ("Esher" 12). Although Mrs. Brough was acquitted on the grounds of insanity and sent to Bethlem, the verdict does not necessarily indicate that the jury believed the defense's medical construction of irresistible impulse. As Roger Smith remarks, "The only real evidence for insanity was the deed itself; perhaps the jury decided that it was literally 'insane'" (*TBM* 160).

The 1856 trial of Celestina Somner reveals another area of contention between medical and legal interests—the issue of criminal intent—and again illustrates the difficult task set before the judge and jury. Somner killed her ten-year-old step-daughter, apparently as an act of retaliation or defiance toward her abusive husband. In court the defense argued that the abuse Somner suffered mitigated her culpability. The jury, unconvinced by the defense's argument, judged Somner's understandable anger and hatred as signs of reasonable criminal motivation and found her guilty. The Home Secretary, though, accepted the defense's argument, overturned the conviction, certified

Somner as insane, and sent her to an asylum. The Home Secretary's decision to judge the murder as infanticide due to irresistible impulse provoked the public to label Somner's case as "one of the most deliberate and cruel murders ever recorded" (Tallack, *PP*, minute 1335). The verdict ended the trial, but it did not resolve the disparity between medical and moral interpretations of Somner's case. As Roger Smith notes, "Mrs. Somner had been continuously ill-treated by her husband, but she killed deliberately. She was certified by experts, but laymen felt justice had been frustrated. The medical discourse prevailed, but it did not coincide with the commonsense view that there had been criminal intent" (*TBM* 155).

Medical discourse prevailed because the Home Secretary accepted the alienist assertion that the primary issue was not that Somner had a motive for killing her step-daughter but that she was powerless to resist the physical impulses that provoked the violence. As Henry Maudsley emphasizes in *Responsibility in Mental Disease,*

> When an insane person is on his trial for some criminal offence, it is commonly taken for granted by the lawyers that if an ordinary motive for the act, such as anger, revenge, jealousy, or any other passion, can be discovered, there is no ground to allege insanity, or, at any rate, no ground to allege exemption from responsibility by reason of insanity. The ideal madman whom the law creates is supposed to act without motives, or from such motives as it enters not into the mind of a sane person to conceive; and if some one, who is plainly mad to all the world, acts from an ordinary motive in the perpetration of an offence, he is presumed to have acted sanely and with full capacity of responsibility. No greater mistake could well be made. (3-4)

In other words, everyone experiences selfish motives and criminal desires at one time or another. What separates an insane individual from a sane one is not the presence of motive or intention or ignorance of right and wrong, but the inability to resist violent

impulses generated in a faulty nervous system. As John Charles Bucknill asserts in *Unsoundness of Mind in Relation to Criminal Insanity,* "If a man is reduced under thraldom to passion by disease of the brain, he loses moral freedom and responsibility, although his knowledge of right and wrong may remain intact"(60). From an alienist perspective, then, the concept of criminal intention is irrelevant when nervous disruptions and irresistible impulses are present.

Throughout the nineteenth century jurists, physicians, and laity were concerned about the ambiguous nature of borderland disorders like puerperal insanity and monomania. Their attempts to establish consistent criteria for distinguishing criminal behavior and insane behavior can be seen in the trials of Celestina Somner, Mary Ann Brough, and Martha Brixey (along with the earlier trials of James Hadfield, Daniel M'Naghten, and others). *Lady Audley's Secret* participates in this cultural debate by giving the reading public a fictional situation to consider and judge. In order for the readers to fulfill this task as Lady Audley's jury, they must understand contemporary social issues and legal precedents. Because twentieth-century readers may not be familiar with Victorian conceptions of puerperal insanity and irresistible impulse, they may be tempted to dismiss Lady Audley's claim of madness as spurious. Consequently, it is important for modern readers to realize that the majority of Victorians believed that women were constitutionally flawed and subject to overpowering impulses that could provoke violence, including murder, and that many women were actually acquitted of violent crimes because the courts were predisposed to accept pleas of puerperal insanity.

## Lady Audley's Claim of Insanity

Lady Audley's defense revolves around two mitigating factors, inherited puerperal insanity and her own mad impulses. Like her mother, Lady Audley's first bout of insanity occurred after childbirth: "'She, my mother, had been, or had appeared sane up to the hour of my birth, but from that hour her intellect had decayed. . . . My baby was born, and the crisis which had been fatal to my mother arose for me'" (230, 232). After the initial outbreak of puerperal insanity, Lady Audley experiences mad impulses when she is overcome by distress or panic. For example, when she learns that George is returning to England, she fears that he will discover her new identity and destroy the secure life she has gained by marrying Sir Michael: "'My brain was dazed as I thought of my peril. Again the balance was trembled, again the invisible boundary was passed, again I was mad'" (234). Although Lady Audley's defense is tainted by the obvious ulterior motive she has for claiming insanity (that is, the possibility of confinement rather than execution), her claim is substantiated, at least in part, by the narrator's observations of a woman suffering from impulsive insanity. For example, when Lady Audley realizes that Robert intends to reveal her identity and to expose her publicly, the narrator describes how the thought of murder takes possession of her, both emotionally and physically:

> She did not finish the thought in words. She did not even think out the sentence; but some new and unnatural impulse in her heart seemed to beat each syllable against her breast.
>
> The thought was this: "He will do it, unless some strange calamity befalls him, and silences him forever." . . . Her hands, which had before been locked convulsively together, fell apart and dropped heavily at her sides. She stopped in her rapid pacing to and fro . . . with every pulse slackening, with every drop of blood congealing in her veins, in the

> terrible process that was to transform her from a woman into a statue. (203-204)

Similarly, as Lady Audley contemplates setting fire to the inn where Robert sleeps, the narrator tells us, "An unnatural luster gleamed in her great blue eyes. She spoke with an unnatural rapidity. She had altogether the appearance and manner of a person who has yielded to the dominant influence of some overpowering excitement" (205). Medical testimony emphasizing these unnatural impulses, coupled with the details of Lady Audley's early life of poverty and abandonment, could form a persuasive defense if she were ever prosecuted in court for her crimes. Using alienist discourse to explain Lady Audley's unnatural behavior, a defense attorney could argue that Lady Audley has experienced somatic impulses that she cannot resist and, therefore, is not culpable for the actions the impulses have provoked. Moreover, even though Lady Audley's crimes are preceded by blatant criminal intentions—for example, she tells Robert, "'You shall never live to do this. . . . *I will kill you first*'" (182)—an attorney could use alienist rebuttals of criminal intention to argue that her crimes were provoked by somatic impulses rather than volitional ones.

Robert Audley, a barrister by profession, is the primary spokesman for the moral judgment against Lady Audley. His efforts as an amateur detective create a "'chain of evidence'"—newspaper clippings, handwriting samples, and eye-witness testimony—that reveals Lady Audley's premeditated schemes (176-180). With this evidence in hand, Robert becomes Lady Audley's judge. Although the narrator describes Robert as "a pitiless embodiment of justice, a cruel instrument of retribution" (179), he is not really an

unfeeling judge. He wishes to extend mercy to Lady Audley, but he is pitiless in that he demands a confession of guilt first. His insistence on confession is a clear indication of his voluntarist point of view. After Lady Audley refuses Robert's offer of mercy and sets fire to the inn where Robert is sleeping, Robert's moral language becomes extreme. He tells her, "'I look upon you henceforth as the demoniac incarnation of some evil principle.'" Again he warns her that if she does not confess her crimes, "'I will gather together the witnesses . . . [and] bring upon you the just and awful punishment of your crime'" (227).

In the same way that Mary Ann Brough's prosecutors traced her insane violence to immorality, Lady Audley's adult sins—abandoning her son, committing bigamy, falsifying death records, pushing George Talboys down a well, and setting fire to Castle Inn—can be traced to "the master passions of her life . . . Vanity, Selfishness, and Ambition." As a young girl, she quickly learned that her beauty was advantageous; it gave her access to aristocratic circles and the power to manipulate those who admire feminine charm and beauty.[10] At this point, the narrator's observations condemn Lady Audley by emphasizing that her "master passions" became a habit of selfish sin:

> Perhaps in that retrospective revery she recalled the early time in which she first looked in the glass and discovered that she was beautiful; that fatal early time in which she had first begun to look upon her loveliness as a right divine. . . . Did she remember the day in which the fairy dower of beauty had first taught her to be selfish and cruel, indifferent to the joys and sorrows of others, cold-hearted and capricious, greedy of admiration, exacting and tyrannical with that petty woman's tyranny which is the worst of despotism? . . .
>
> How small those first youthful errors seemed as my lady looked back on them. . . . But how terribly that narrow pathway had widened

> out into the broad highroad of sin, and how swift the footsteps had become upon the now familiar way! (196)

Lady Audley has experienced unnatural impulses while traveling this "broad highroad of sin," but, from a moral/legal point of view, these unnatural impulses must be judged as criminal impulses rather than insane ones.

According to Robert, guilt provokes Lady Audley's unnatural behavior. After Lady Audley admits that she is "'dreadfully nervous'" and requires many prescriptions from Mr. Dawson. Robert responds rather pointedly:

> "Do you remember what Macbeth tells his physician, my lady? . . . Mr. Dawson may be very much more clever than the Scottish leech, but I doubt if even he can minister to the mind that is diseased. . . . Let me be the physician to strike to the root of your malady, Lady Audley. . . . Shall I tell you why you are nervous in this house, my lady? . . . Because for you this house is haunted. . . . Yes, haunted by the ghost of George Talboys." (175)

Robert's allusion to Macbeth and Lady Macbeth recalls their progression from wicked intentions to guilt to mental breakdown. Like the Macbeths' distress, Lady Audley's mental distress is the result of a guilty conscience. Lady Audley may have experienced some unnatural impulses, but according to Robert's moral perspective, they are unnatural because they are criminal, and they are the result of a life of selfishness and ambition. Even after Lady Audley confesses and Robert hears her story of inherited insanity and mad impulses, Robert continues to judge Lady Audley's behavior according to moral concepts rather than medical ones. At the Belgian asylum, he asks the superintendent to provide a clergyman who will give her "'spiritual advice and consolation'" and then tells Lady Audley, "'I only say to you, repent!'" (255-256). Repentance, of course, is an appropriate response to sinfulness but not madness.

Both medical and moral discourses provide the means for labeling Lady Audley's behavior as unnatural and harmful, but each discourse assumes different causes for that unnatural behavior: somatic forces, on the one hand, and volitional forces on the other. Lady Audley's confession echoes assumptions asserted by E. J. Tilt, Thomas Clouston, Charles Mercier, and other alienists about female physiology and elicits sympathy from Sir Michael and probably a number of Braddon's readers. As the story progresses, however, the moral perspective asserted by Robert dominates the narrative. Even though Lady Audley is certified and confined in an asylum, the narrative ultimately condemns her and holds her accountable for her crimes. By creating a fictional borderland that includes both alienist and moral representations of Lady Audley, Braddon dramatizes the difficulty of distinguishing between madness and wickedness.

## Criminal Prosecution or Lunacy Commission?

Confronted by evidence of Lady Audley's criminal intention and mad impulses, Robert must decide between prosecuting her as a criminal or confining her as a madwoman. In order to protect Sir Michael and the Audley family name, Robert chooses to have Lady Audley certified and confined in an asylum. He asks a friend to recommend a doctor "'experienced in cases of mania, and to be trusted with a secret.'" The friend writes in return, "'Alwyn Mosgrave, M.D., 12 Saville Row. Safe'" (243-44). The scene between Robert and the "safe" doctor complicates the reader's judgment of Lady Audley by contradicting the evidence presented earlier in the narrative. For example, Lady Audley tells Robert and Sir Michael that her mad impulses are an

"'inheritance'" from her insane mother (230), but Dr. Mosgrave tells Robert, "'Madness is not necessarily transmitted from mother to daughter'" (248). Also, the doctor's judgment that "'there is no evidence of madness in anything she has done'" (248) contradicts the narrator's observations regarding Lady Audley's "unnatural" behavior (205-208). Dr. Mosgrave soon modifies his diagnosis, though, when Robert reveals that he suspects Lady Audley of murdering George Talboys. After a brief interview with Lady Audley, Dr. Mosgrave declares that she is "'dangerous'" and not "'to be trusted at large.'" He quickly writes a letter authorizing Lady Audley's confinement in a private Belgian asylum (249, 251).

If Dr. Mosgrave were a real physician, we might conclude that this reversal is due to the fact that he is concerned about the possibility of his diagnosis being challenged if Lady Audley's case were ever brought to court. As Peter McCandles notes, nineteenth-century physicians were often concerned about the professional consequences of a wrong or unpopular diagnosis:

> Doctors pointed out in their defense that they were faced with a dilemma when called upon to certify or confine an alleged lunatic. If they declared him insane and confined him, and a jury later disagreed with the diagnosis, people would accuse them of nefarious behavior; if they pronounced him sane and left him at large, and he later committed an outrage, the public would condemn them as incompetent. (348)

Dr. Mosgrave appears to be protecting himself from future repercussions when he tells Robert, as if for the record, "'If I saw adequate reason for believing a murder has been committed by this woman, I should refuse to assist you in smuggling her away out of the reach of justice, although the honor of a hundred noble families might be saved by my

doing so'" (250).[11] Apparently he does not think it is improper to smuggle her out of the country as long as she is only *suspected* of murder (George's body has never been found). In addition, Dr. Mosgrave apparently does not consider Lady Audley's other crimes serious enough to warrant a police investigation. If a future investigation occurs, however, Dr. Mosgrave can honestly testify that he told Robert that Lady Audley was not insane and warned him about circumventing a criminal investigation and prosecution.

The collusion between Robert and Dr. Mosgrave appears to be a clear violation of British law. Charges of improper certification and wrongful confinement, especially for non-paupers, led Parliament to pass the Madhouse Act of 1828, which required separate certifications from two physicians after completing independent interviews with the patient. In addition, whenever this requirement was not fulfilled because of "special circumstances," the correct certifications had to be filed within seven days. In 1845 another Madhouse Act required a specific statement on each certificate explaining the facts that led to the physician's opinion (Parry-Jones 300-301). It is certainly possible that Braddon learned of the Madhouse Acts and the requirements they instituted during the lunacy panic of 1858-59, which erupted because of the public's fear of certification abuses and wrongful confinement.

Robert is either unaware of these laws or unconcerned about them. After Dr. Mosgrave's interview with Lady Audley, Robert should have arranged a second interview with another physician, but he does not. Yet, if he were deliberately circumventing the requirements of the Madhouse Acts, we would expect him to take Lady Audley to Belgium in a surreptitious manner, but he does not do that either. In

fact, Braddon suggests that Robert does fulfill the required legal and medical procedures associated with certification:

> There was official business to be gone through before Sir Michael's wife could be quietly put away in the place suggested by Dr. Mosgrave. Robert had to see all manner of important personages; and to take numerous oaths; and to exhibit the English physician's letter; and to go through much ceremony of signing and countersigning before he could take his lost friend's cruel wife to the home which was to be her last upon earth. Upward of two hours elapsed before all this was arranged. (252)

This passage clearly states that Robert presents only one letter of certification to the authorities, yet apparently none of these authorities request a second certification, and there is no mention of special circumstances excusing the missing certification. If Braddon had not specifically mentioned "Robert had . . . to exhibit the English physician's letter," the reader might assume that Robert obtained another certification at some point after his interview with Dr. Mosgrave and before completing the "official business."

This ambiguity about the required paperwork may be simply an example of the "mistakes and inconsistencies" alluded to in *Fraser's* 1863 review of *Lady Audley's Secret* ("Popular Novels" 257) or an example of Braddon's own allusion to "errors, absurdities, contradictions, and inconsistencies" in a letter to Bulwer-Lytton (qtd. in Wolf, "Devoted Disciple" 10). Another possibility exists, though. Braddon may have intentionally stated that Robert obtained only one certification. It is unlikely that Braddon was unaware of the Madhouse Acts. Throughout the novel Braddon demonstrates her familiarity with insanity issues. In addition, the requirements for certification and confinement were probably common knowledge because of the frequent

public debates over lunacy reform. Stories of abuse were periodically circulated by activists in popular newspapers and magazines, and more serious articles occasionally appeared in the *Times, Daily Telegraph*, and *Lancet* (McCandles 339-42). John Perceval, who founded the Alleged Lunatic's Friend Society in 1845, testified before the Select Committee in 1859 that he could name twenty-seven patients who had been wrongfully confined (Parry-Jones 238). Furthermore, the lunacy panic of 1858-59 occurred only three years before *Lady Audley's Secret* was published. In this atmosphere of public controversy, it is unlikely that Braddon was simply unaware of the Madhouse Acts. Thus, it seems likely that Braddon purposely states that Robert presents the authorities with only one certification and that they accept this one certification.

Whether the single certification was an intentional detail or a mistake, though, it serves a thematic purpose. It is rather suspicious that in less than two hours Robert is able to see various officials and to sign the required medical and legal documents.[12] The language Braddon chooses—"'Upwards of two hours elapsed before all this was arranged'" (252)—suggests that two hours is a long time for these arrangements. If Dickens's Circumlocution Office is any indication at all of the efficiency of Victorian bureaucracy, however, completing the paper work for lunacy certification in a mere two hours sounds unlikely, to say the least. Yet, Robert does manage to navigate the bureaucratic channels in a quick, private fashion: "There was official business to be gone through before Sir Michael's wife could be *quietly* put away" (252, emphasis added). Braddon thus implies that Robert takes advantage of privileged connections he possesses

as a barrister and as the representative of a baronet. This brief passage, then, with its suggestion of aristocratic privilege, reinforces the impression that Lady Audley is improperly certified and wrongfully confined in order to preserve the honor and pride of the Audley family.

Dr. Mosgrave is willing to help Robert and the Audley family because he chooses to interpret Lady Audley's aggression as a symptom of latent insanity. Braddon provides another interpretation of her aggression, however. The narrator suggests that Lady Audley may be acting on a rather reasonable impulse; she may be angry because "her opponent's hand had been too powerful for her, and he [Robert] had won" (245). The question of whether Lady Audley is acting on a mad impulse or an angry impulse may be actually irrelevant, though, because, as D. A. Miller notes, a diagnosis of insanity "lies ever in wait to 'cover'—account for and occlude—whatever behaviors, desires, or tendencies might be considered socially deviant, undesirable, or dangerous" (120). Because women like Lady Audley threaten the patriarchal bias underlying Victorian society and the hegemony of the privileged upper classes, "patriarchal expediency," to use Miller's phrase, demands that this boldness be snuffed out (122). Regulating troublesome women like Lady Audley as madwomen silences their voices and renders their experiences socially meaningless.

While it is true that Robert repeatedly demonstrates chauvinist attitudes[13] and that Lady Audley's certification has been improperly procured, Lady Audley is not simply a helpless victim of a patriarchal society. Although Robert initially wonders, "'Poor little creature. . . . Why doesn't she run away while there is still time?'" (166),

he soon realizes that Lady Audley is not like other women, or at least not like the tractable, unobtrusive women he prefers. Lady Audley's disarming beauty cloaks hidden potential and power. Robert sees her girlish charms, cunning, and criminal intentions and realizes that she is a challenging opponent. He also recognizes her ability to act boldly and strategically:

> "Yes, a conspiracy concocted by an artful woman, who had speculated upon the chances of her husband's death, and had secured a splendid position at the risk of committing a crime; a bold woman, my lady, who thought to play her comedy out to the end without fear of detection; a wicked woman, who did not care what misery she might inflict upon the honest heart of the man she betrayed." (177)

A few pages later, the narrator explains Robert's thoughts:

> What if this woman's hellish power of dissimulation should be stronger than the truth and crush him? . . . Robert Audley looked at the pale face of the woman standing by his side; that fair and beautiful face, illumined by starry-blue eyes, that had a strange and surely a dangerous light in them; and remembering a hundred stories of womanly perfidy, shuddered as he thought how unequal the struggle might be between himself and his uncle's wife. (181)

As Robert discovers, Lady Audley is not simply troublesome or rebellious; she is *dangerous*. She pushes George Talboys down a well and leaves him to die. She schemes to bury her past under a false gravestone while speaking softly and smiling lovingly at Audley Court. She threatens to have Robert committed and succeeds in persuading Sir Michael that his favorite nephew is suffering from monomania. When Robert's investigation closes in on her, she locks the bedroom door where she believes Robert is sleeping and sets fire to the inn. She also has no qualms about leaving Luke Marks, a man who blackmails her, to die in the fire. When Robert confronts Lady Audley after the fire, he exclaims,

> "It was you whose murderous hand kindled those flames. . . . What was it to you that other lives might be sacrificed? Henceforth you must seem to me no longer a woman, a guilty woman with a heart which in its worst wickedness has yet some latent power to suffer and feel; I look upon you henceforth as the demoniac incarnation of some evil principle." (226-27)

Lady Audley's crimes warrant a legal investigation and trial, but there are complications that dissuade Robert from initiating further legal action. As we have seen, Sir Michael does not wish to punish her and asks Robert to arrange for her "'safety and comfort'" (236). Like Sir Michael, George Talboys, who suddenly reappears at the end of the novel, does not want to punish Lady Audley either. George tells Robert that after he recovered from his injuries, he wrote a note to Helen (Lady Audley), saying, "'May God pity you and forgive you for that which you have done to-day, as truly as I do. Rest in peace. . . . You need fear no molestation from me'" (272). Furthermore, George tells Robert that even though Helen pushed him into the well, "'my chief thought was of the safety of the woman who had betrayed me'" (284). These plot twists and sympathetic responses to Lady Audley complicate the question of determining an appropriate punishment for her.

Given the fact that no one is willing to press charges, confining Lady Audley in an asylum rather than a prison seems to be a pragmatic solution, though a troubling one, because there is no clear judgment of guilt or insanity. Voicing the same frustration and dissatisfaction many people expressed in response to actual trial verdicts, *Fraser's Magazine* criticized Braddon in 1863 for blurring the distinction between sanity and insanity:

> Miss Braddon appears to be of the opinion that everybody is more or less mad, and that there are moments in all our lives when we are scarcely

> responsible for our own actions. . . . [Lady Audley] is a cold, calculating, heartless woman. . . [who] never loses her presence of mind, and she never forgets to save herself at the expense of others. . . . If this is being mad, then, no doubt, most of the murders daily committed are only the acts of lunatics, and many innocent creatures have been hung unjustly. (258-259)

These objections notwithstanding, Braddon's decision to confine Lady Audley in an asylum rather than in a prison fulfills James Cowles Prichard's recommendation concerning criminal insanity. In his 1842 treatise, *On the Different Forms of Insanity in Relation to Jurisprudence,* Prichard emphasizes that a person who suffers from impulsive insanity and is guilty of a violent act should be "separated from society to prevent mischief to himself and others." He goes on to explain that these sufferers "must be admitted to be morally guilty and to deserve to suffer. But the calamity with which we know them to be afflicted is already so great, that humanity forbids our entertaining the thought of adding to it. Perhaps all that we ought to aim at in such a case is to secure the community against the evils to which it may be exposed" (178). Prichard is willing to waive criminal punishment beyond "separation from society" on the grounds of compassionate "humanity." Committing Lady Audley to a private asylum where Robert says she "'will lead a quiet and peaceful life'" (256) meets Prichard's criteria—she is removed from society so that she cannot hurt herself or anyone else, and she is treated compassionately. Nonetheless, in keeping with the narrative's moral judgment against Lady Audley, Braddon makes sure that her confinement is ultimately a death sentence. According to Lady Audley, the asylum is "'a living grave,'" and "'the law could

pronounce no worse sentence than this—a life-long imprisonment in a madhouse'" (256, 258).

## An Ironic Compromise

As we have seen, *Lady Audley's Secret* presents an ambiguous image of Lady Audley. Maudsley's phrase "something of madness but more of sin" (*RMD* 34) seems to identify Lady Audley's character quite well. Even though Lady Audley has apparently experienced some mad impulses, Braddon's construction of the narrative makes it difficult to judge her exculpable on the grounds of insanity. Referring to nineteenth-century reviews of the novel, Nicholas Rance notes, "While no reviewers declared that Lady Audley was sane, she was not excused on the grounds of insanity" (127). This mixed judgment stems from the fact that the narrative is punctuated with sympathetic glimpses of Lady Audley's past life, even though the narrative ultimately condemns Lady Audley.

Like George Eliot and other mid-Victorian women writers, Braddon invites her readers to reconsider conventional notions of female nature and women's roles but does not become directly confrontational. Braddon could not afford—literally could not financially afford—to offend her readers' sensibilities and priorities. She presents them with an ambiguous situation for consideration and discussion but does not preach or harshly attack their biases or morality. She does not even draw unequivocal conclusions for them. As Henry James commented in 1865, "[B]y observing a strictly respectful attitude to her readers," she managed to "catch the public ear" with fictional

representations of current issues and concerns and successfully negotiated the "delicate fluctuations of the public taste" (593).

Elaine Showalter suggests that one of the reasons that Braddon introduced the possibility of Lady Audley's insanity was "to spare the woman reader the guilt of identifying with a cold-blooded killer" (*LTO* 167). Although Victorian newspapers frequently recounted the stories of gruesome murders committed by women, Victorian readers apparently preferred their fictional women to demonstrate traditional decorum and rectitude. Because women were also expected to be maternal and delicate, female killers confused Victorian sensibilities. Consequently, it made sense to many Victorians to categorize violent women as mad victims of irresistible impulses. While Braddon challenges these expectations by characterizing Lady Audley as an intelligent, bold, and dangerous woman, she also accommodates the expectation by destabilizing the legitimacy of Lady Audley's independence with evidence of puerperal insanity and irresistible impulses. In this regard, Lady Audley's confinement as a madwoman rather than a guilty criminal appears to be a concession to Victorian expectations and to the growing acceptance of somatic theories of insanity.

On another level, though, Braddon may be doing something more subversive. In a discussion about reader expectations and conventional heroines in nineteenth-century fiction, Winifred Hughes argues that Braddon "is quite willing and capable of playing around with her chosen conventions and making her own ironic compromises with the sticklish requirements of Victorian taste" (122). Lady Audley's mixture of wicked deeds and mad impulses may be an ironic compromise rather than a retreat into convention.

Because it was not uncommon to regulate dangerous women by questioning their sanity, Braddon may emphasize Lady Audley's wickedness throughout the narrative in order to avoid reducing her to an unfortunate victim of a faulty nervous system. Recognizing the complexity of female behavior, Braddon pushes her readers to judge Lady Audley as a guilty woman, even though she may have suffered some mad impulses during her lifetime. This judgment is more sophisticated than simply saying she is sane and therefore guilty, or insane and therefore not guilty.

As Stephen Greenblatt has observed, "Something happens to objects, beliefs, and practices when they are represented, reimagined, and performed in literary texts, something often unpredictable and disturbing" (449). In *Lady Audley's Secret*, Braddon represents and reimagines determinist views of insanity and voluntarist views of moral responsibility. She acknowledges that heredity and physiology affect character, but she suggests that these forces are not as significant as the cultural forces a woman encounters during her lifetime. Lady Audley claims that she inherited her mother's madness, and that it first appeared after childbirth, but in her confession she actually stresses her fate as "'a slave allied to beggary and obscurity'" more than her biological inheritance (232). Consequently, in the borderland that Braddon constructs, restrictive social opportunities and expectations appear to be more important root causes for her mad impulses than the faulty reproductive system that she may have inherited. Braddon also reimagines traditional views of women and responsibility. Although Lady Audley's decisions are dangerous and illegal, it is significant that these decisions are her own. She is neither an automaton nor a child. Both Robert and the narrator repeatedly describe

Lady Audley with epithets like "'golden-haired sinner'" (166), "'artful woman'" (177), "guilty woman" (243), and "wicked wife" (253). Labels of this sort only make sense in a voluntarist system which acknowledges human agency and moral responsibility. In other words, an individual cannot be judged guilty without a prior assumption that the individual is endowed with moral responsibility and the opportunity to act freely and independently. Braddon certainly recognized that traditional morality often perpetuated the inferiority of women and denied them moral responsibility as if they were children. Nonetheless, she gravitates toward a voluntarist view of human nature because there is still the possibility of moral responsibility for women within its framework. This possibility does not exist in alienist discourse, or at least not if the discourse is pushed to its logical conclusion. Braddon's construction of the narrative tacitly pushes the readers to affirm a voluntarist view of human nature, especially female nature, instead of a somatic, determinist view.

The emphasis on moral responsibility is reaffirmed in the final chapter where, according to convention, the good are rewarded with happy marriages: Robert marries Clara, Alicia marries Sir Harry Towers, and there is even the suggestion that George Talboys may marry again after "the shadow of my lady's wickedness" fades away.[14] The narrator concludes,

> I hope nobody will take objection to my story because the end of it leaves all the good people happy and at peace. If my experience of life has not been very long, it has at least been manifold; and I can safely subscribe to that which a mighty king and a great philosopher declared, when he said, that neither the experience of his youth nor of his age had ever shown him "the righteous forsaken, nor his seed begging their bread." (286)

Lady Audley, of course, is not among the good and righteous individuals alluded to in this final comment. There is nothing unusual or unconventional about the fact that Lady Audley dies at the end of the novel. Just as the good are rewarded, the wicked are punished, usually through death. Yet, there is more going on in this final paragraph than simply a nod to convention or even a satiric jab at convention. Braddon could have ended the novel with a comment about Lady Audley's mad impulses and her inherited insanity, but she does not. Instead, Braddon's final comment reminds the readers of the moral judgment against Lady Audley. She is not among the good nor the righteous because she has made immoral choices. Because moral choices are only available to free agents and not to automatons responding to stimuli, Lady Audley should be treated as a morally responsible individual who has gambled and lost.[15] She *should* be, but in Braddon's plot the men who have the power to determine Lady Audley's fate, choose instead to silence her and discredit her example by burying her in "'a living grave'" (256).

Because the assumptions of both determinist discourse and voluntarist discourse have been woven into the narrative, the readers must consider the claims of each. To readers primarily interested in a sensational plot, the moral judgment against Lady Audley may appear to be simply a reflection of the traditional morality Victorian readers expected. To readers more interested in thematic concerns, though, the narrative indicates that the behavior of fictional women like Lady Audley and, by extension, real women like Mary Ann Brough and Celestina Somner stems from a complex network of emotional needs, personal desires, social inequalities, and moral restrictions. Because

Braddon represents Lady Audley's psychological life in more complicated terms than contemporary theories allowed, the moral judgment against Lady Audley is a subtle rejection of alienist discourse and its restrictive view of women. Furthermore, Braddon's emphasis on Lady Audley's wickedness and the treatment she receives from men like her father, George Talboys, and Robert Audley fulfills a corollary thematic purpose, an ironic criticism of Victorian society and its patriarchal institutions.

## The Difficulty of Jury Duty

Unlike more dogmatic nineteenth-century writers, Braddon does not provide consistent distinctions between good and evil or sanity and insanity. Lady Audley is a complex character who exhibits the traits of a dangerous, ambitious woman, a victim of puerperal insanity, and an unfortunate victim of a restrictive, patriarchal society. Any attempt to pronounce a definitive judgment of her character is complicated by the fact that various details of Lady Audley's life may be selected and arranged in such a way that they elicit sympathy, while other details may be selected and arranged to condemn her as a willful criminal. At times the very same details can even be used to support or condemn. For example, Lady Audley's anxiety and unnatural behavior may be interpreted as symptoms of madness or as consequences of guilt.

Another difficulty regarding Lady Audley's culpability occurs if the readers are unfamiliar with alienist discourse. It is easy to reject Lady Audley's claim of insanity as a mitigating factor if the readers do not realize that nineteenth-century lawyers actually won insanity pleas based on puerperal insanity and irresistible impulse and that alienists

like Henry Maudsley believed that the presence of irresistible impulse rendered the concept of criminal intent irrelevant. Lady Audley's claim sounds at least as legitimate as the insanity claims asserted for murderers like Mary Ann Brough, Celestina Somner, and Martha Brixey. Finally, the conflict between the opposing interpretations of Lady Audley's behavior is exacerbated by the narrator's shifting sympathies. Sometimes the narrator describes Lady Audley in terms that corroborate her claim of insanity and sometimes in terms that corroborate Robert's judgment of wickedness. While this dual corroboration complicates the readers' task of judging Lady Audley's culpability, it also makes the task more realistic. Human behavior *is* difficult to judge, and distinguishing between insanity and wickedness is especially difficult. Braddon's construction of the narrative recreates this difficult task and forces readers to grapple with the conflicting boundaries associated with the debates concerning insanity and culpability.

Roger Smith has argued that the coexistence of determinist and voluntarist views of human nature created a "striking social reality" in Victorian England ("Boundary" 375). *Lady Audley's Secret* creates a space for readers, both nineteenth-century readers and twentieth-century readers, to participate in this "striking social reality" by recreating the medicolegal conflict between alienist and moral discourses. The readers participate by becoming Lady Audley's jury. They are asked to consider the legal, medical, and socioeconomic evidence presented throughout the narrative and then judge Lady Audley's character and actions. Although Braddon does not directly comment on the moral irresponsibility thrust upon Victorian women by alienist conceptions of the female body and behavior, her construction of the narrative reveals her rejection of the

determinist view of human nature in favor of a voluntarist view that grants women independence and moral responsibility. The readers must weigh the evidence presented and, like a jury, pronounce a verdict that neither condones criminal actions nor ignores human frailties. Although Braddon leaves the readers with a complicated situation that resists simplistic categories of guilt, innocence, sanity, or insanity, Braddon's construction of the narrative challenges Victorian conventions and priorities and then urges the readers to pronounce the verdict "guilty but recommended to mercy."

## Notes

[1] Hale (1609-1676) wrote his *History of the Pleas of the Crown* toward the end of his life, but it was not published until 1736. Nineteenth-century physicians and jurists, including Henry Maudsley and James Fitzjames Stephen, often quoted his writings. Maudsley quotes the passage I have used in *Responsibility in Mental Disease* (96).

[2] See also Elaine Showalter, *A Literature of Their Own,* 163-168; Winifred Hughes, *The Maniac in the Cellar,* 124-129; and Jill L. Matus, "Disclosure as 'Cover-up': The Discourse of Madness in *Lady Audley's Secret,*" 334-355.

[3] As noted in Chapter 1, Thomas Clouston writes in *Clinical Lectures on Mental Disease* that "the exhausting calls of menstruation, maternity, and lactation" provoke hysteria and puerperal insanity, which in turn provoke sudden outbursts of violence, most notably suicide and infanticide (584). Henry Maudsley explains in *Responsibility in Mental Disease* that a patient's ability to resist insane impulses depends on "the degree of morbid degeneration of nerve element" and compares insane impulses to involuntary physical reactions:

> . . . it is no longer an idea the relations of which the mind can contemplate, but a violent impulse into which the mind is absorbed, and which irresistibly utters itself in action. . . . By an act of the will a person may prevent involuntary movement of his limbs when the soles of his feet are tickled, but the strongest will could not prevent spasmodic movements of the limbs when the excitability of the spinal cord is increased by strychnia or disease. (*PPM* 310-11)

Maudsley's primary point is contained in the word *disease* because, for Maudsley and other alienists, insanity is a physiological condition, which debilitates an individual's nervous system and in turn afflicts the individual's mind and will.

[4] As Simon During observes, "the battle between lawyers and doctors was thought of as a 'struggle between social interests demanding justice, and the new systems which claim themselves protectors of humanity'" (91). In these debates, moralists, with their voluntarist view of human agency, appeared to be harsh advocates of imprisonment and execution for convicted criminals while alienists, with their determinist view of human nature, appeared to be compassionate advocates of custodial treatment for afflicted sufferers.

[5] In his study "Deadly Motherhood: Infanticide and Medical Opinion in Mid-Victorian England," G. K. Behlmer reports, "Extenuating circumstances saved all thirty-one of the females convicted of infanticide between 1849 and 1864. The guilty were often reprieved as criminal lunatics" (413). Judges and juries generally accepted pleas of insanity in infanticide cases unless premeditation could be established. For example, in 1849 Rebecca Smith, the last woman hanged in England for infanticide, was convicted of willful murder because she poisoned her baby rather than using one of the "accidental" methods like forgetting to tie the baby's umbilical cord or failing to keep the baby warm (Smith, *TBM* 147).

[6] Morgan adds that the recent attention to pre-menstrual stress, which many label as a syndrome, has diminished women's moral agency even further: "I reckon that we are

left with approximately three to five days per month during which we can act and be held fully morally responsible. But this only occurs during our child-bearing years. Once into menopause or post-menopausal, our moral eligibility disappears altogether" (151).

[7] As historian Roger Smith points out, "By explaining the insanity [exhibited by infanticidal women] as the product of physical disorder, they emptied the violence of any meaning it might have had" (*TBM* 158). Dismissing the socioeconomic circumstances surrounding women's insane actions contained their unacceptable behavior without disrupting the status quo, leaving important questions about women's lives unanswered and reforms delayed. I will discuss the issue of moral responsibility and Braddon's representation of Lady Audley's madness in "An Ironic Compromise" later in this chapter.

[8] A charge of infanticide, which generally involved a victim less than one year old, could be extended to women who killed older children and husbands if puerperal insanity could be established. See Smith, *TBM* 153-160.

[9] The defense's argument of a self-inflicted condition that could exculpate immoral or illegal acts is reminiscent of Justice Hale's concept of *dementia affectata* or "induced witlessness." Hale recognized that a voluntary action like drinking alcohol could turn into alcoholism, an uncontrollable habit. He believed that an alcoholic, unlike someone who is simply drunk, should be treated in the same way as someone who suffers from an involuntary disease. As Nigel Walker notes, Hale's recommendation became "a principle that was to save several Victorian alcoholics from the gallows" (39).

[10] For a discussion of the ways Braddon uses Lady Audley as an ironic fulfillment of the idealized Victorian woman, see Winifred Hughes, *The Maniac in the Cellar,* 124-129; Elaine Showalter, *A Literature of Their Own,* 163-168; Nicholas Rance, *Wilkie Collins and Other Sensation Novelists,* 120-128; and Jill L. Matus, "Disclosure as 'Cover-up': The Discourse of Madness in *Lady Audley's Secret,*" 334-355.

[11] Mr. Talboys, George's father, uses the same language when he tells Robert, "'It is not for me to blame you . . . for smuggling this guilty woman out of the reach of justice, and thus, as I may say, palter[ing] with the laws of your country'" (280). This image of avoiding justice by smuggling Lady Audley away serves two purposes: it reinforces the impression that Lady Audley is more guilty than insane, and it suggests that Robert is more concerned about family obligations than legal obligations.

[12] Certification and confinement were not always accomplished easily or quickly. As noted in Chapter 2, James Lucas's brother petitioned the Lunacy Commission in 1851 and in 1872 to have Lucas declared insane, but the commissioners were apparently unwilling to interfere in a competency dispute between a wealthy man and his younger brother. As Elaine Showalter and Jane Ussher have argued, though, the process was less controversial, less difficult, when a woman, especially a rebellious woman, was the individual in question.

[13] Robert's patronizing view of women is seen in his assessment of his cousin Alicia: "'poor little cousin. . . . Such a nice girl, too, if she didn't bounce'" (84). And his misogyny is seen at the end of a long tirade against women: "'They want freedom of

opinion, variety of occupation, do they? Let them have it. Let them be lawyers, doctors, preachers, teachers, soldiers, legislators—anything they like—but let them be quiet—if they can. . . . I hate women,' he thought, savagely. 'They're bold, brazen, abominable creatures, invented for the annoyance and destruction of their superiors'" (136-37).

[14] For a discussion of Braddon's ironic treatment of marriage, see Winifred Hughes, *The Maniac in the Cellar,* 120-128.

[15] Braddon compares the power struggle between Robert and Lady Audley to a card game: "The game had been played and lost. I do not think that my lady had thrown away a card, or missed the making of a trick which she might by any possibility have made; but her opponent's hand had been too powerful for her, and he had won" (245). See also pages 166, 177, and 181.

## The Power of Fictional Borderlands

For over twenty years, Victorians flocked to Hertfordshire to talk to James Lucas, the mad hermit lambasted in *Tom Tiddler's Ground.* As Lucas boasted to a journalist, "Last year I had 12,000 visitors and as many as 240 in a single day" (qtd. in Whitmore 7). Certainly Lucas was a sight to see as he sat behind a barred window with only a filthy blanket to cover his nakedness, but his visitors did not travel to Hertfordshire merely to catch a glimpse of him. They could have purchased a postcard or a piece of pottery stamped with his image if they only wanted a picture of him. No, the visitors who spent hours talking to Lucas about history, politics, religion, and current events were not simply curious to see what a madman looked like; they wanted to know what a madman thought and felt. Their curiosity may have stemmed from anxiety about their own mental health. In the midst of drastic cultural changes, Victorians experienced a great deal of uncertainty about themselves and their culture. By comparing their own experience to that of a man whom common sense (if not the Lunacy Commission) labeled mad, they could reassure themselves that they would recognize signs of madness in their own families and communities while there was still a possibility of preventing an irreversible descent into madness.

Not everyone could travel to Hertfordshire, though, and even those who did learned only about Lucas's unique brand of madness. More accessible opportunities for

Victorians to understand madness came through literature. Although numerous treatises and periodicals discussed insanity, the cumbersome language of nineteenth-century philosophy, medicine, and law failed to capture the experience of depression and irrationality itself. As Stanley Jackson notes in his study of melancholia,

> [T]here is no literal statement that would convey to a reader the distress of being in the throes of a severe depression. Without knowing from firsthand experience, or having at least learned with empathy directly from the distressed eloquence of a sufferer, it would require the enhancement of a metaphorical expression to bridge the gap of understanding, to draw the reader at least vicariously into the troubling subjective world of such a sufferer. (396)

Because fiction offered access to the "subjective world" of madness, Victorian readers gained a perspective that was not available to them otherwise. Conventions of privacy and propriety made it difficult for both the professional community and the reading public to obtain detailed information about actual cases of insanity. As Michael Collie observes, "a poet or dramatist might provide in a portrait the psychological detail that could not be obtained from the patient or asylum inmate" (17). Novels like Trollope's *The Last Chronicle of Barset* and *He Knew He Was Right* are especially helpful in this regard because they enabled readers not only to "live with" depressed characters like Josiah Crawley and Louis Trevelyan but also to witness the frustrations, fears, doubts, anger, and compassion that families and communities experienced when an individual in their midst succumbed to persistent depression.

At a time when Victorians were both fascinated by madness and anxious about it, Victorian fiction suggested some guidelines for responding to madness. In Dickens's novels Victorian readers found a sympathetic advocate for helpless asylum inmates but a

harsh critic of individuals like James Lucas who spoke intelligently and coherently while he behaved irrationally. In *Tom Tiddler's Ground,* Dickens curtly reproves the hermit for acting irresponsibly and openly criticizes the neighbors and curiosity-seekers who indulge him. Trollope is less harsh in his judgment of madness. In addition to expressing sympathy for characters like Josiah Crawley and Louis Trevelyan, Trollope suggests that the dividing line between acceptable and unacceptable behavior is ambiguous and variable. For example, Trevelyan's unreasonable behavior seems to differ from other characters' behavior in degree but not in kind. Both Sir Marmaduke and Mr. Outhouse exhibit "mad" outbursts, but neither crosses the boundary between what is socially acceptable and what is not. Thus, the reader is confronted with the possibility that madness (especially the conditions that combine both rationality and irrationality, volition and compulsion) is a social construction dependent upon the evaluator's assumptions, values, and priorities. Braddon also addresses the question of appropriate responses to madness in *Lady Audley's Secret.* Braddon suggests that the decision to certify and confine Lady Audley is prompted by ulterior motives that serve the men in charge of the proceedings. Tapping into the public's distrust of contemporary diagnostics and fear of wrongful confinement, Braddon suggests that judgments of insanity, even when pronounced by physicians, are tainted by the biases and motives of the evaluators. All of these fictional situations suggest criteria for distinguishing acceptable behavior from unacceptable behavior and, thus, help the reading public to recognize insanity and respond to it appropriately.

In addition to enveloping readers in the subjective experience of madness and the dynamics of responding to madness, Victorian fiction invited the reading public to participate in philosophical and political discussions regarding insanity. As a writer for the *Prospective Review* commented in 1853, Victorian fiction often served as a catalyst for examining "vexed and difficult questions" confronting society:

> Fiction has yet another claim to our regard as a vehicle for the transmission of opinion; the results of speculative inquiry, when presented in an abstract form, wear, to the ordinary mind, an aspect so severe and uninviting, that we joyfully hail the imaginative faculty which invests dead principles in the living hues of experience, and thus brings them home to the conscience and apprehension of humanity. We accordingly find that as society awakens to a consideration of its vital interests, the province of fiction expands; it becomes the chosen medium for the discussion of the vexed and difficult questions, moral, religious, social and political, which agitate the minds of men; and the various theories adopted for their solution endeavor to obtain a hearing, by assuming an imaginative expression, and embodying themselves in concrete form. ("Recent Works of Fiction" 223)

This capacity for transforming "dead principles" and complex social issues into "living hues of experience" is evident in the fictional borderlands of Dickens, Trollope, and Braddon. As keen observers of human nature and society, all three authors addressed contemporary concerns regarding the borderland of partial insanity. One of the philosophical issues that "agitated the minds of men" throughout the Victorian period was the conflict between voluntarist and determinist views of human nature and insanity. While questions of culpability were naturally problematic, the contrary views of human agency and moral responsibility assumed by voluntarist and determinist discourses led to opposite conclusions about legal accountability, treatment, and confinement. As we have seen, this conflict was openly debated in courtrooms, but the conflict was not only a legal

one. The question of culpability was inherent in all cases of insanity, though not all cases were controversial.

Dickens, Trollope, and Braddon share a preference for a voluntarist view of insanity, but Braddon addresses the issue most directly in *Lady Audley's Secret* by inviting the reading public to negotiate several complicated debates about irresistible impulse, puerperal insanity, and hereditary predisposition. By recreating the dynamics between defense attorneys and prosecuting attorneys arguing an insanity defense, Braddon urges her readers to weigh the evidence for and against Lady Audley in the same way that jurors do. They must choose between conflicting constructions of Lady Audley's life and character. On the one hand, Lady Audley appears to be an ambitious woman who callously uses people to achieve her selfish goals and then manipulates circumstances to protect herself; on the other hand, she appears to be an unfortunate victim of poverty, restricted social conventions, inherited puerperal insanity, and mad impulses. As the readers consider these alternate interpretations of Lady Audley's life, the narrative encourages them to reject alienist conceptions of female physiology and pronounce Lady Audley "guilty but recommended to mercy."

At the heart of the conflict between voluntarist and determinist views of insanity is the problematic relationship between sin and madness. Although Dickens, Trollope, and Braddon all explore the borderland identified as "something of madness but more of sin," Dickens emphasizes moral (both mental and ethical) causes and consequences of madness more directly than Braddon and Trollope do. In *Little Dorrit* and *Great Expectations,* Dickens emphasizes the "vicious association of ideas" (Esquirol, *MM* 320) that

associationists and moral managers assumed prompted melancholia and monomania. Although Mrs. Clennam and Miss Havisham are victimized by other people's disloyalty, they are responsible for their own mental state because they cling to their emotional wounds and shut out people and activities which could bring healing. Their confessions and pleas for forgiveness evoke moral judgments because acts of repentance only make sense in a voluntarist system which assumes volition rather than compulsion. Dickens's depiction of Miss Havisham's change of heart and his admonishments regarding the importance of the "thousand natural and healing influences" available in the community (*GE* 411) also reveal his voluntarist position and his hope for overcoming madness. This hope was quite strong among the moral managers, but it dwindled as physiology and determinism gained acceptance. By the middle of the century, alienists like Henry Maudsley and Daniel Hack Tuke were less inclined to believe that a change of heart (redirected thoughts and renewed will) could alter one's "organization."

By offering the reading public the opportunity to study borderland behaviors and related sociopolitical implications, Dickens, Trollope, and Braddon drew a large number of people into the Victorian struggle to understand insanity. In addition, they allowed these participants to "experience" depression, obsession, delusion, and compulsion. The subjective connection between the text and the reader achieved by these authors demonstrates over and over again that insanity, in its various forms and degrees, is not simply an abstract concept for physicians, lawyers, and reformers to debate. The personal, often intimate, portraits of insanity provided in *Great Expectations, Little Dorrit, The Last Chronicle of Barset, He Knew He Was Right,* and *Lady Audley's Secret,*

became catalysts for discussion. "By assuming an imaginative expression" and giving "concrete form" to contemporary attitudes, fears, and doubts, the fictional borderlands created by Dickens, Trollope, and Braddon increased awareness and furthered understanding in ways that professional treatises could not. Thus, they stand as important indicators of nineteenth-century conceptions of insanity and its problematic relationship with culpability.

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