

“Is [he] a man? If so, is he mad? And if not, is he a devil?”:

The Influence of Culture Versus Experience on the Brontë Sisters’ Perception of Mental Illness

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Dedicated in Memory of  
Margaret Isabel Thomas  
Beloved Grandmother and Fellow Brontë Scholar  
9 November 1933 - 23 March 2020

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### Introduction: Branwell Brontë

A certain cultural stigma has always surrounded mental illnesses, as society views the people afflicted with these illnesses as different or unclean, sometimes even dangerous. This perception is often perpetuated within literature, as any mentally ill characters are written as two-dimensional lunatics rather than real people, or the authors choose to avoid the issue of mental illness within their novels altogether. During the Victorian era, the accepted practice was to send these people away to asylums, thereby minimizing any burden on the family members, but this time period was also a turning point in scientific thought surrounding mental health, which in turn led to a reform in the treatment of the mentally ill within these asylums. In Victorian literature, the subject of mental illness was still viewed as unsavory or taboo, but a change can be seen emerging here as well, through the writings of authors such as the Brontë sisters. Throughout the course of this study, we will explore how these sisters offer unique perspectives on this issue, as each of them shared a common experience with mental illness, but also how this experience influenced their views in different ways, as reflected in their novels.

Charlotte, Emily, and Anne Brontë are perhaps one of the most famous sets of siblings in literary history, but a fourth, lesser known sibling should receive credit for much of the inspiration behind their writing careers. Patrick Branwell— simply called Branwell, after their mother's maiden name— was the second eldest of the four Brontë children who survived into adulthood, and the only son. An imaginative child, he led his sisters in make-believe play, creating the fictional world of Angria with Charlotte, his closest sister, just as Emily and Anne later made up the world of Gondal. Such imaginative exercises helped develop the literary creativity of the siblings, and these stories offered a mental escape from the bleak reality of their childhood. Their mother, Maria Brontë, died when they were very young, and during the time of

her illness, the children were expected to remain quiet and out of sight. Their father, Reverend Patrick Brontë, encouraged the education of his children, but otherwise he was distant and reserved, leaving their care to his sister-in-law after his wife's death. Overall, the children were left to entertain themselves, so they retreated to fantastic worlds filled with mighty heroes and great battles (Peters 6).

Unfortunately, trouble in the Brontë household did not end with the death of their mother, for the two eldest daughters, Maria and Elizabeth, passed away during adolescence. As a result, Charlotte gained a profound fear of death and became paranoid about the health of her younger siblings, a fear which continued to haunt her into adulthood (Gaskell 131). Maria's death also deeply affected Branwell, for he watched her daily suffering while his other sisters were away at school. He never forgot the morbid details of her slow decline, and he wrote about her burial years later in his poem "Caroline":

She lay with flowers about her head—  
Though formal grave-clothes hid her hair!  
Still did her lips the smile retain  
Which parted them when hope was high,  
Still seemed her brow as smoothed from pain  
As when all thought she could not die...  
They came—they pressed the coffin lid  
Above my Caroline,  
And then, I felt, for ever hid  
My sister's face from mine! (qtd. in Peters 14)

Such was only the beginning of the darkness that clouded Branwell's mind. As he grew into adulthood, an enormous pressure to provide for his family fell on his shoulders, and his sisters all had high hopes for his success. After all, the family had always struggled financially, and Reverend Brontë's health and eyesight began to fail as he aged, thereby limiting the work he was able to do. As the only son, Branwell was expected to be the saving grace for his family, using his artistic and literary talents to earn enough money to sustain them. However, when he went to London to study art at the Royal Academy, he began to crumble under the pressure:

He was eighteen with the emotional stability of a thirteen-year-old. Petted, indulged, and admired at home, he had no real solidity of either character or talent. His personality had all the dazzle of a skyrocket, and all its durability. To be fair, he knew it himself... By the time he had dismounted from the coach and found his way to lodgings at the Chapter Coffee House in Paternoster Row, the confusion of the city and his self-doubt had already beaten him. (Peters 51)

Rather than enrolling in the Academy as his family had planned, Branwell wandered the streets of London, aimless and restless. Overwhelmed by the city, he retreated to the safety and familiarity of the pubs, where he was always welcome and accepted. Drinking became his way of protecting himself against the harsh realities of the world and his fear of failure.

Branwell found occasional work but had difficulty maintaining a position, and he never encountered the success he or his family had hoped for. By his mid-twenties, he described himself as needing to recover from "almost insanity" after having worked as a head clerk in Luddenden Foot Station, a job he wrote was determined to "find how far mind could carry body without both being chucked into hell" (qtd. in Wise and Symington 263-64). He had not yet given up on his ambition of artistic success, but as time went on, he became increasingly

frustrated and turned more towards substances for relief, including the more recent habit of opium eating:

Branwell too had not given up hope of public recognition, although he looked more and more to opium to solve the agonies of an uncertain talent wedded to an indecisive disposition. For his working model in elegant drug addiction he had Thomas de Quincey's *Confessions of an English Opium Eater*; for his rationalization of the habit, De Quincey's belief that opium arrested the consumption that Branwell dreaded, that it enlivened rather than deadened the mind, and that it opened a rosy world of soothed nerves and warm pleasures. (Peters 87)

This new addiction decreased public attention by keeping him out of the pubs and was less easily detected by his family members. When he was given a new position as tutor in the Robinsons' household, he was believed to be a highly moral and reputable man. This assumption was proven false, however, when he was discovered having sexual relations with his employer's wife, Lydia Robinson, and was promptly sent home. Here he faced the unsavory task of explaining himself to his father and sisters:

Back at Haworth Parsonage, Branwell also claimed innocence, of a kind, and 'spoke freely' with his father on the subject, leaving the latter in no doubt that 'intimacy' had taken place, but also that the blame lay squarely with the matron, whom Reverend Brontë described to Elizabeth Gaskell as a 'diabolical seducer.' Whether the girls were as ready to exculpate Branwell was another matter: Anne was shocked and ashamed for her brother; Emily inclined to put the matter behind them all and move on. The person who felt most anger and mortification, and the one to whom Branwell felt the need to apologise by letter, was Charlotte, who was not just appalled by his behaviour but



secretly furious at the ease with which he had been able to indulge his passions, while she was almost killing herself with the suppression of her own. (Harman 210-11)

These responses can be seen as precursors to the sisters' varying attitudes regarding Branwell's more extreme actions later. Anne was the closest in proximity to this affair, as she was employed within the same household. She would have witnessed her brother's inappropriate actions daily and felt the shame firsthand. She submitted her resignation shortly before the affair was discovered, likely unable to bear watching it unfold any longer. Emily was the most emotionally distant, which explains her willingness to look past these unfortunate events.

Charlotte, on the other hand, experienced a deeper emotional response, not only due to her close relationship with Branwell and the shock of her disappointment in him, but also because of her personal struggle with her own romantic feelings. Her extreme disapproval of Branwell's actions can be seen as rather hypocritical, as she was in love with a married man herself. She had become infatuated with Monsieur Heger, a fellow teacher at a school in Brussels who had given her and Emily French lessons. The romantic idealization of the teacher-student relationship was played out in Charlotte's novels *The Professor* and *Villette*, with *Villette* offering a more direct portrayal of Heger through the character of Paul Emmanuel. However, unlike in the fictional versions, Heger was married to the directress of the school and did not return Charlotte's feelings. Still, she continued to write him letters, her love bordering on obsessiveness, just as Branwell had become obsessed with Lydia Robinson. The occasional responses Charlotte received were more emotionally distant, some even scolding her for her inappropriate and irrational words and asking her to cease writing to him (Harman 200-201). Who knows what would have happened if her affections had been returned— she might have followed the same path as her brother and entered into an affair. Perhaps her outrage at

Branwell's actions was in part a response to her own frustrations at her unrequited love, or perhaps she hated in him the shortcomings that she recognized in herself.

After the affair was discovered, Branwell was fired and sent home, but his obsession with Mrs. Robinson continued. He was convinced that their love would prevail and was elated when he later received the news that her husband had passed away. However, after the death of her husband, Mrs. Robinson had second thoughts about her lover and cut off communication between them. Rather than extinguishing his passion, this new obstacle threw Branwell further into a frenzy, unable to eat or sleep. In despair, he wrote to one of his friends, "What I shall do I know not. I am too hard to die, and too wretched to live... my mind sees only a dreary future which I as little wish to enter on, as could a martyr to be bound to the stake" (qtd. in Harman 241). Charlotte quickly drew tired of his melodrama, believing his obsession with Mrs. Robinson to merely be a "pretext to throw all about him into hubbub and confusion with his emotions" (qtd. in Harman 241). Her patience with her once beloved brother was wearing thin on multiple levels. Harman notes her frustration by writing, "His distress, drinking, even his threats of suicide she interpreted as signs of hopelessly weakened character: '[he] declares now that he neither can nor will do anything for himself—good situations have been offered more than once... but he will do nothing—except drink, and make us all wretched'" (241-42). Branwell had been the shining hope of the family, but now that he had failed, the responsibility to provide for their family fell to Charlotte. She accepted her duty and sacrificed her own happiness in order to do what was best for her family, while she viewed her brother as selfish and lazy.

Meanwhile, Branwell was growing just as frustrated at his family's lack of understanding. Bedridden, he expressed his frustration at "the inability to make my family aware of the nature of most of my sufferings" (qtd. in Harman 237). The exact nature of Branwell's

condition cannot be definitively determined; however, certain writings point to the possibility that he suffered from bipolar disorder, or possibly major depressive disorder. Elizabeth Gaskell, a friend of the family and later Charlotte's first biographer, made note of the "agony of mind, which at times made [Branwell] restless and unnaturally merry, at times rendered him moody and irritable" (218). Gaskell expanded upon this statement by describing Branwell as being "at one time in the highest spirits, at another, in the deepest depression—accusing himself of blackest guilt and treachery, without specifying what they were; and altogether evincing an irritability of disposition bordering on insanity" (218). This description strongly resembles the manic highs and depressive lows characteristic of bipolar disorder. While an exact diagnosis is impossible given the limited amount of information and the inability to talk to Branwell himself, the evidence seems to coincide with the diagnostic criteria listed by the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*. The *DSM-5* lists nine major symptoms of major depressive episodes, five of which are necessary for diagnosis. The evidence suggests that Branwell may have exhibited at least six of these symptoms:

1. Branwell is described as "moody and irritable" and being in the "deepest depression" (Gaskell 218), which coincides with the symptom listed by the *DSM-5* as a "[d]epressed mood most of the day, nearly every day."
2. In a letter to a friend, Branwell described a newfound lack of pleasure in activities he once enjoyed: "Noble writings, works of art, music or poetry now instead of rousing my imagination, cause a whirlwind of blighting sorrow that sweeps over my mind with unspeakable dreariness... for nearly every pleasurable excitement that I used to know has changed to insipidity or pain" (qtd. in Fraser 271).

3. In the months before his death, Branwell drastically lost weight and often refused to eat, which possibly matches the description of weight loss and lack of appetite listed by the *DSM-5*. His friend Francis Grundy noticed his extreme weight loss, also noting that “[h]e even ate some dinner, a thing which he said he had not done for long” (qtd. in Fraser 313). Whether or not this weight loss was the result of depression is questionable, however, for it may have been a side effect of his drug use.
4. Exhausted and barely sleeping, Branwell exhibited symptoms of insomnia. After he started sleeping in his father’s room, he would come out saying, “The poor old man and I have had a terrible night of it; he does his best—the poor old man! but it’s all over with me” (Gaskell 227). Still, this lack of sleep could quite possibly have also been drug induced.
5. Gaskell noted Branwell’s habit of “accusing himself of blackest guilt and treachery, without specifying what they were” (218), which matches the description of “[f]eelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)” (*DSM-5*).
6. Branwell exhibited “recurrent thoughts of death” and “suicidal ideation” (*DSM-5*) as he became obsessed with the thought of death. Harman notes that “[m]ost of Branwell’s time was spent in bed, writing poems about his misery and doodling bleak, black caricatures in his letters to Leyland and on the drafts of poems... one is a Promethean figure in hell-fire, bound at the wrists with the word ‘Myself’ written beneath” (251). His friend Grundy also wrote that “[Branwell] described himself as waiting anxiously for death—indeed, longing for it, and happy, in these his sane moments, to think that it was so near” (qtd. in Fraser 313).

These symptoms clearly caused “significant distress or impairment in social, occupational, or other important areas of functioning,” as required by the *DSM-5* for the diagnosis of a major depressive episode. However, the final criterion is uncertain, as whether these symptoms were caused by his substance use is unknown. Also, while major depressive episodes are common in bipolar disorder, bipolar disorder cannot be diagnosed without evidence of a manic episode. Although Gaskell’s description of Branwell being “restless and unnaturally merry” and at times in the “highest spirits” suggests that he may have experienced such a manic episode, the details of these occurrences are unknown, thereby eliminating the possibility of verifying diagnostic criteria. If in fact he did not experience a true manic episode, he may have suffered instead from major depressive disorder, or if his occasional manic highs were brought on by his substance use, he may have experienced substance-induced bipolar and related disorder rather than true bipolar disorder.

Whether Branwell’s mood swings resulted from his addictions or whether his addictions were a way to self-medicate and cope with his symptoms is unclear. Additional studies have also shown that people with bipolar disorder are more prone to abuse substances. Mark Frye and Ihsan Salloum note the results of a study comparing the prevalence of substance addiction in people with bipolar disorder:

The ECA Study reported a 60.7% lifetime prevalence rate for substance use disorders in persons with bipolar I disorder; alcohol was the most common substance abused...

Similarly, in the National Comorbidity Survey, respondents with a lifetime diagnosis of alcohol dependence had a significantly increased likelihood of having co-occurring lifetime diagnosis of mania, which was much higher for men than for women. (“Bipolar Disorder”)

These statistics point to the likelihood of the cooccurrence of Branwell's addictions and bipolar disorder. While the question of the origin of each disorder resembles the proverbial chicken and egg conundrum, the fact remains that Branwell was suffering from a condition outside of his control and was unable to receive the support he needed. However, allowances should also be made for the fact that the nature of these disorders would not have been understood or recognized during the nineteenth century. Modern scholars have the advantage of being able to look at the situation through the lens of current psychological knowledge to try to understand what may have been happening, thereby giving greater insight than Victorian doctors would have had. In context of the Brontë family, this insight allows the reader to understand Branwell's condition more fully, recognizing the likelihood that he suffered from a disorder apart from his addictions, which then not only lends greater sympathy to his situation, but also shows the bigger picture behind his actions and his sisters' responses to his actions.

Still, his family took care of him as much as they could. During this era in England, the most typical response to Branwell's deteriorating mental state would have been for his father to send him to an asylum; however, Reverend Brontë chose instead to have his son cared for within his own home. As a result, the three sisters ended up being primary caregivers for their brother, exposing them to mental illness in a way that was unique for the time period. They watched their brother fall into hysterical fits and even set his own bed on fire while he was in it (Marchbanks 59), an event that likely inspired Bertha Mason's acts of arson in Charlotte's novel *Jane Eyre*. Caring for Branwell took a deep emotional and physical toll on the entire family, as Gaskell described:

For some time before his death he had attacks of delirium tremens of the most frightful character; he slept in his father's room, and he would sometimes declare that either he or

his father should be dead before morning. The trembling sisters, sick with fright, would implore their father not to expose himself to this danger; but Mr. Brontë is no timid man, and perhaps he felt that he could possibly influence his son to some self-restraint, more by showing trust in him than by showing fear. The sisters often listened for the report of a pistol in the dead of night, till watchful eye and hearkening ear grew heavy and dull with the perpetual strain upon their nerves. (227)

The physical exhaustion of the care and the emotional strain of worry, combined with heartbreak and disappointment, were almost too much for the sisters to bear. This new version of Branwell was far from how they remembered their brother, and even farther from the person whom they had hoped he would become.

Branwell's friends were not as deeply affected by his decline as his family, so they were able to remember a more positive side of him. Distant from the situation and the burden of care, his old friend Francis Grundy was able to be more sympathetic, claiming that Branwell was not a "domestic demon, just a man moving in a mist, who had lost his way" (qtd. in Harman 274).

William Heaten also remembered Branwell's softer side, saying, "I shall never forget his love for the sublime and beautiful works of Nature, nor how he would tell of the lovely flowers and rare plants he had observed by the mountain stream and woodland rill" (qtd. in Harman 144).

Branwell was still a human being, despite the declining state of his mental health, but it was difficult for his family to remember this fact amidst the trial of caring for him. Still, even his friends could not help but notice the major changes that overtook Branwell late in his life. Even Grundy was able to see a darker side of Branwell when he went to visit him in the final weeks before his death:

When Branwell did turn up, he was in a shocking state: spectrally thin, unkempt, ‘the cheeks yellow and hollow, the mouth fallen... the sunken eyes, once small, now glaring with the light of madness’—all the marks of the hopeless opium-eater... when Branwell was leaving he showed Grundy a carving-knife that he had been hiding in his sleeve all evening, having imagined that his summons to the inn had been from Satan, whom he was determined to stab. (Harman 274)

Branwell’s imaginary battle with the devil likely felt like a daily reality to him, at least metaphorically, as he constantly had to struggle with his own dark impulses— and often lost.

Branwell lost his final battle at the age of thirty-one when he died in his father’s arms. His death impacted Charlotte more than the other sisters, causing her to fall into a deep depression. Harman writes that “[s]he took to her bed, incapable of even speaking, waking from fitful sleep into a renewed awareness of what had taken place, a nightmarish state with ‘impressions experienced... such as we do not put into language’” (282). She claimed that the feelings she was experiencing were not from love, though the honesty of this claim is highly questionable. In a letter she wrote a week after Branwell’s death, she says:

I do not weep from a sense of bereavement—there is no prop withdrawn, no consolation torn away, no dear companion lost—but for the wreck of talent, the ruin of promise, the untimely, dreary extinction of what might have been a burning and a shining light. My brother was a year my junior, I had aspirations and ambitions for him once—long ago—they have perished mournfully—nothing remains of him but a memory of errors and sufferings—There is such a bitterness of pity for his life and death—such a yearning for the emptiness of his whole existence as I cannot describe. (qtd. in Harman 283)



In a sense, she was mourning his life rather than his death. After all, she had lost the brother that she had known and loved long ago, as she had watched him turn from a bright and talented young man into a depressed, drug-addled alcoholic. For her, he may have “died” years earlier, and the man she now knew acted only as a constant reminder of his failed potential. Still, his literal death was a permanent confirmation of this loss, leaving her empty and hopeless. For all three of the sisters, this feeling of loss may have also been joined with a guilty sense of relief, for the burden and perpetual fear were finally lifted off their shoulders. Either way, this experience changed them and would influence the way they would view mental illness, and the world, for the rest of their lives— although sadly, the rest of their lives did not last long, at least for Emily and Anne. The constant burden of care and sleepless nights took a heavy toll on Emily, for soon after Branwell’s death, she became gravely ill herself and passed away, with Anne following not long after (Harman 284-93). Charlotte’s worst fears were then realized: she had been filled with anxiety over the lives of her younger siblings ever since the death of her older sisters (Gaskell 131), and now one after the other, she watched them die, until she was the only one surviving.

This personal experience dealing with mental illness set the Brontë sisters apart from the general public in the Victorian era, as they were able to watch the decline in their brother’s mental state firsthand and could remember who he was as a person before he fell into addiction and depression. Still, this shared experience impacted each of the sisters differently, likely due to the different relationship each of them had with their brother as well as the way they responded to the cultural influences, which then affected the way they portrayed mental illness in their novels: Charlotte, though once the closest to Branwell, held an outdated, unfavorable opinion of mental illness, presenting those afflicted as animalistic in nature in her fiction; Anne took a more religious approach, viewing addiction as a result of a fallen moral state; whereas Emily showed

the humanity of the mentally ill and the reasons behind their mental deterioration, all while maintaining hope for rehabilitation.

## Chapter One

Charlotte Brontë: *Jane Eyre*

Once sharing in a close relationship with her brother, Charlotte seemed to struggle the most with his addiction and deteriorated mental state. This struggle is reflected in her novel *Jane Eyre*, in which Branwell is fictionalized as the female character of Bertha Mason, and the care that Charlotte herself sought to offer her brother can be likened to that of Mr. Edward Rochester. This gender reversal is interesting to note, as the common belief at the time was that women were more susceptible to mental illnesses than men, a belief that Dr. John Thurnam responds to in his article “On the Relative Liability of the Two Sexes to Insanity,” published in 1846. Although Thurnam recognizes the falsity of this claim, he notes that “every recent writer on insanity” held to this belief, following a study conducted by French psychiatrist Jean-Étienne Dominique Esquirol that failed to bear in mind the disproportionate number of men and women in the population (235). The fact that Charlotte made the character of the madwoman female, rather than male like Branwell, suggests that she too may have held to this presupposition, and may have believed her brother to be a weak, possibly feminine, man for succumbing to his addictions. The primary examples of mental illness in the works of both Emily and Anne, on the other hand, are seen in male characters.

Overall, Charlotte’s perception of mental illness was outdated, however, as she presented the mentally ill as sub-human and animalistic, a view that later lost popularity as a result of new psychological studies during the Age of Enlightenment. In the 1792 book *Observations on Maniacal Disorders*, William Pargeter describes the condition displayed by the mentally ill:

Let us then figure to ourselves the situation of a fellow creature destitute of the guidance of that governing principle, reason—which chiefly distinguishes us from the inferior

animals around us, and gives us a striking superiority over the beasts that perish. View man deprived of that noble endowment, and see in how melancholy a posture he appears. He retains indeed the outward figure of the human species, but like the ruins of a once magnificent edifice, it only serves to remind us of his former dignity, and fills us with gloomy reflections for the loss of it. Within, all is confused and deranged, every look and expression testifies internal anarchy and disorder. (2-3)

This description suggests that with the loss of mental reasoning, a person loses the main distinguishing factor that differentiates humans from animals, thereby reducing him to the status of an animal with only the outward appearance of a human being. This time period was a turning point in psychological theory, as physicians such as Benjamin Faulkner began advocating for the mentally ill to be “treated as a rational creature, with attention and humanity” (qtd. in Laffey 1292). However, up until this time, psychiatric therapy involved “punishment and rough treatment aimed to suppress and cool the animal spirits, not to join battle with an autonomous ‘psychological’ realm... endor[s] the popular misconception that lunatics were like lions, and in need of taming” (Laffey 1287-91). Charlotte appears to have embraced this old perspective rather than recognizing the humanity and worth of the mentally ill.

This viewpoint is exemplified in the character of Bertha Mason, as the madwoman is shown as uncontrollably violent and animalistic, locked away on the third floor of Thornfield Hall. Her exact condition is never specified, only that she appears to have inherited it from her mother, as Rochester states, “Bertha Mason is mad; and she came of a mad family;-- idiots and maniacs through three generations! Her mother, the Creole, was both a mad-woman and a drunkard!... Bertha, like a dutiful child, copied her parent in both points” (*Jane Eyre* 335). He also later tells Jane that “there was a younger brother, too; a complete dumb idiot. The elder

[brother]... will probably be in the same state one day” (350-51). The assumption here is that the mental illness is hereditary, which is entirely possible, but also that the children have no alternative future but to follow in the path of their mother. Edward Daniell wrote in his 1845 article “On Impulsive Insanity” that “[a]ccording to the investigations of the continental pathologists, the children of eccentrics have been frequently insane; and in my own practice I have found both the children and grandchildren of such persons very prone to brain diseases” (26). Such strong assumptions about the hereditary nature of mental illnesses also show the influence of prevailing cultural beliefs on Charlotte, for while genetics can play a part in the development of these disorders, they are typically not the only factor involved, as suggested in the research and literature of her time (Esquirol 34). This section will show how Charlotte’s close relationship with Branwell and her own mental health struggle influenced her to portray the madwoman in *Jane Eyre* as sub-human, and how Rochester’s resentment towards Bertha reflects Charlotte’s own feelings towards her brother, even though they both felt a strong sense of duty to care for their respective charge.

#### ANIMALISTIC PORTRAYAL OF BERTHA MASON

The animalistic nature of Bertha is shown through both her physical appearance and her actions. When the truth about Rochester’s wife is revealed, and Rochester shows her to the people gathered for his wedding, she is described as a “clothed hyena.” According to the text, “What it was, whether beast or human being, one could not, at first sight, tell: it groveled, seemingly, on all fours; it snatched and growled like some strange wild animal: but it was covered with clothing; and a quantity of dark, grizzled hair, wild as a mane, hid its head and face,” and with a “fierce cry... the clothed hyena rose up, and stood tall on its hind feet” (336). All traces of humanity are stripped from this woman in this description. She is no longer person but thing, a

brutish animal to be revolted. An earlier description, when Jane catches a glimpse of Bertha burning her veil before the wedding day, reads, “It was a discoloured face—it was a savage face. I wish I could forget the roll of the red eyes and the fearful blackened inflation of the lineaments” (325). This physical description of Bertha bears similarities to Grundy’s description of Branwell in the last weeks of his life, as he described him as “spectrally thin, unkempt, ‘the cheeks yellow and hollow, the mouth fallen... the sunken eyes, once small, now glaring with the light of madness’” (Harman 274). Jane tells Rochester that the woman’s appearance reminds her of a “Vampyre,” thereby marking her as a monster that lurks in the night. This vampiric description also appears earlier, when Bertha bites her half-brother Mason, and he exclaims, “‘She sucked the blood! she said she’d drain my heart!’” (243). Such an analogy is interesting, for vampires are beasts that were once human but are now sub-human; they were once alive, but now occupy an unknown space between the living and the dead. Such a state also reflects the way the mentally ill were viewed: less than human and no longer fully alive.

Bertha’s actions also portray her as more beast than human, as she is seen growling and biting and filling the hallways with maniacal laughter. Harman notes that aspects of her outbursts mirror Branwell’s behavior, as demonstrated through “the noise, the surges of energy, crazy determinations and unrestrainable force” displayed by the “deteriorating addict” (273). The most direct correlation is found in the scene where Bertha sets Rochester’s bed curtains on fire, just as Branwell set fire to his own bed curtains. More broadly speaking, the danger experienced by Rochester as he slept is reflective of the fear and danger experienced by Branwell’s sisters and father, especially when Branwell began sleeping in his father’s room, for the family was all too familiar with his destructive capabilities. As a result of this fear, Charlotte began viewing her once beloved brother as a fiend bent on hurting her family, and this perspective is exemplified

within the character of Bertha Mason:

The madwoman scenes had come in for some criticism when the book came out for being too ‘horrid,’ but Charlotte defended herself by saying that such behaviour was ‘but too natural.’ ‘There is a phase of insanity which may be called moral madness, in which all that is good or even human seems to disappear from the mind and a fiend-nature replaces it,’ she told Williams. ‘The sole aim and desire of the being thus possessed is to exasperate, to molest, to destroy, and preternatural ingenuity and energy are often exercised to that dreadful end.’ (Harman 273-74)

In many ways, Charlotte may have interpreted Branwell’s actions as a personal attack, for his actions affected her more deeply than the other sisters, due to the former state of their relationship. Her beliefs were supported by early nineteenth century French psychiatrist Jean-Étienne Esquirol, who wrote, “The insane conceive an aversion for those persons who are most dear to them, revile them, ill-treat them, anxiously shun them, in consequence of their mistrust, their suspicions, and their fears” (qtd. in Prichard 22). Branwell may have singled Charlotte out and intentionally distanced himself from her and mistreated her, initially as a result of his shame, and later as a result of fear and paranoia. He therefore became a villain to her, just as Bertha can be seen as an antagonist standing in the way of Jane and Rochester’s happiness.

#### RESPONSE TO BERTHA’S AND BRANWELL’S MENTAL STATE

The extreme change in Charlotte and Branwell’s relationship also led to the feeling of intense disappointment, as her high hopes for her brother were consistently crushed. This disappointment is portrayed in *Jane Eyre* as the contrast between Rochester’s expectations for his marriage and the reality he was faced with when his wife’s true mental state was revealed. Rochester was happy at the beginning of his marriage, saying, “I had a charming partner—pure, wise, modest”

(335). He had high hopes for the future, just as Charlotte had high hopes for her brother's future, and Rochester's disappointment that his wife turned out to be a "mad-woman and a drunkard" also mirrors Charlotte's disappointment that her brother encountered a similar fate. When Rochester reveals his wife after his wedding is stopped, he asks the people gathered to sympathize with his position, considering the stark contrast between Bertha and Jane: "That is *my wife*... And *this* is what I wished to have... this young girl, who stands so grave and quiet at the mouth of hell, looking collectedly at the gambols of a demon... Compare these clear eyes with the red balls yonder—this face with that mask—this form with that bulk" (337).

Rochester's comparison of Bertha and Jane is the manifestation of his expectations and desires juxtaposed with the harsh reality of his vicious, lunatic wife. This contrast between desire and reality, between ideal and disappointment, was a major theme in Charlotte's life, particularly as related to Branwell.

Rochester's response to the insanity of his wife is also reflective of Charlotte's own response to her brother's condition. Rochester is seen torn between bitterness and anger at being "tricked" into a marriage with a madwoman, and a sense of duty to still take care of her. With the wealth he possesses, he could have easily sent her away to an asylum, or he could have put her in his other property Ferndean Manor, which is more secluded but less accommodating to her health. Instead, he chooses to have her taken care of in his primary residence in England, even though it causes him greater inconvenience. Although she is locked away in the attic and treated like an animal, Rochester believes that as long as "she is cared for as her condition demands," he is doing "all that God and Humanity require of [him]" (354). He clearly despises her and is angry about her condition, but he still provides in-house care for her, just like Patrick Brontë did for his son. Rochester also refuses to cause Bertha physical harm, just as Reverend Brontë insisted on



handling Branwell with gentleness rather than force: “[Rochester] could have settled her with a well-planted blow; but he would not strike; he would only wrestle” (337). Rochester’s sense of duty prompts him to provide his wife the best care he knows how and to protect her physical wellbeing as much as possible, even though he resents her existence and the burden she places on his life.

Likewise, Charlotte felt a sense of duty to care for her brother, but she also expressed bitterness about his condition. Some of this bitterness may have been a result of her strong emotional investment in the situation, which stemmed from her close relationship with Branwell growing up. After all, the brother and sister once shared a tightknit bond, as Peters notes, “Even though Charlotte was much quieter than the flamboyant Branwell, they seemed to think, speak, and feel as one. Obviously, Charlotte was excessively proud of her brother, imagining for him a bright future of genius although only the drudgery of governessing lay ahead for her” (38). Branwell’s failure would therefore have felt like a personal betrayal, for not only were they intimately connected, but she had also placed in him a hope for success she could not achieve herself. His failure was then, in a way, her failure—the eradication of her dreams and ambitions. Some of her disappointment may have also come as a result of her overall perspective on the world, as influenced by her childhood experiences, particularly in school. Peters notes how Charlotte’s negative experience at Cowan Bridge, the school that was later dramatized as Lowood in *Jane Eyre*, darkened her worldview and damaged her faith in others:

We see, for example, Charlotte’s capacity for intense resentment and hatred and, at the same time, her compulsion to suppress her feelings under a mask of conformity and submission. ‘I am a hearty hater,’ she once wrote her good friend Ellen Nussey in a moment of frank revelation ... Yet Cowan Bridge also shows us that Charlotte’s

emotions could sometimes distort her critical judgment and bias her irrevocably, even against fact... The child formulated a new but permanent philosophy: be slow to reach out—and expect the worst. (16)

This perspective can be seen in her attitude towards her brother, for as her trust in him was broken, her resentment towards him grew. Her emotions then blinded her to the extent of the situation— she saw only the pain that he was causing her family, especially her, but was unable to recognize the hurt and struggle that Branwell himself was experiencing— even though she played out the part of the longsuffering caregiver. Her anger and resentment were then channeled into the unfavorable presentation of the madwoman in her novel.

Still, the line between love and resentment can be blurred since the resentment arises out of love; therefore, the love does not disappear but is merely transformed into the secondary emotion of anger as a result of hurt and disappointment. Charlotte likely would not have felt so strongly about Branwell's situation had she not loved him. In her novel, however, she draws a clearer distinction, for Rochester harbors no feelings of love for Bertha, only hatred and disgust. He does claim to love Jane, though, and tells her that he would continue to love her even if she lost her mental faculties:

'If you were mad, do you think I should hate you?' 'I do indeed, sir.' 'Then you are mistaken, and you know nothing about me, and nothing about the sort of love of which I am capable. Every atom of your flesh is as dear to me as my own: in pain and sickness it would still be dear. Your mind is my treasure, and if it were broken, it would be my treasure still: if you raved, my arms should confine you, and not a strait waistcoat—your grasp, even in fury, would have a charm for me: if you flew at me as wildly as that woman did this morning, I should receive you in an embrace, at least as fond as it would

be restrictive. I should not shrink from you with disgust as I did from her: in your quiet moments you should have no watcher and no nurse but me; and I could hang over you with untiring tenderness, though you gave me no smile in return; and never weary of gazing into your eyes, though they had no longer a ray of recognition for me.' (345-46)

Such a claim brings up some interesting questions, for Rochester was happy with Bertha before she went mad, just like he is with Jane, and only lost interest in her after she became mentally ill. Why then would Jane be any different? Perhaps Rochester believes he loves Jane in a way that he never loved Bertha, and therefore would continue to love her no matter what her mental state may become. Even in such a case, this claim is difficult to believe, for Jane's intellect and calm disposition are what Rochester admires about her. The question is also raised as to how Charlotte herself viewed this issue, for she resented Branwell just as Rochester resented Bertha, even though she clearly loved her brother, at least at one point. Under what circumstances would she have accepted Branwell's condition in the same manner Rochester claims he would accept Jane's hypothetical madness, if her love for her brother was not enough? Perhaps she would have felt differently had she not believed that his condition came as a result of his own poor choices, or perhaps Charlotte, through Rochester, was deceiving herself by believing her feelings could have been different under different circumstances.

For a while, Charlotte was able to overlook Branwell's shortcomings and love him as she had when they were younger. After all, she grew up in a culture that taught women to excuse men's faults. Thomas Greene's advice to wives dictated, "They have their humors and their faults—so mutable is man—excuse his failings in your thought, and hide them if you can" (qtd. in Harman 35). This attitude was demonstrated for her by her mother when dealing with her father, who was notoriously domineering and short tempered, and the sisters were expected to

treat their father the same way. The fact that Charlotte later applied this principle to her brother as well comes as no surprise. However, she eventually began to reach her breaking point, and she started to reevaluate the way she viewed Branwell. As Peters writes, “Charlotte, taught by her culture to excuse masculine weakness, still welcomed him happily [upon his return home from London]. But she had been brooding more than usual over the problem of loving and respecting a brother whose weak, erratic character deeply challenged her loyalty” (67). Such a perspective supports the theory that she would have continued to love her brother more if she had believed his condition was out of his control. Peters goes on to say that “[i]nvariably, she turned her conflict into prose. In a long narrative, ‘Captain Henry Hastings,’ written late that winter, she had dwelt on the brother-sister relationship, curiously forecasting Branwell’s coming defeat” (67). In this narrative, the title character is a deserter from the army, wanted for murder, and an alcoholic, but his sister Elizabeth continues to love him and try to protect him. Their relationship can be summarized in the following conversation, which carries strong resemblance to the dynamic between Charlotte and Branwell:

‘[B]ut with regard to you I’m just the same Harry Hastings that I always was—I daresay by this time you’ve learnt to think of me as a kind of ogre—’ He looked at her with that kind of mistrust born of conscious degradation—but his suspicions were allayed by the expressive glance with which she answered him—it said more convincingly than words— ‘Your faults & yourself are separate existences in my mind, Henry.’ (“Henry Hastings” 201)

Elizabeth later pleads for her brother’s life in front of the Duchess, who had sentenced him to death, saying, “I have nothing to urge in extenuation of my brother—his crimes have been proved against him. I have only to ask your Grace to *remember what he was before he fell...* the

energy that marks Captain Hasting's mind... the powerful & vigorous talent that distinguished him above most of his contemporaries—the Country rung with his name once” (225; emphasis added). Likewise, Branwell's negative actions were undeniable, but at least at the time, Charlotte tried to focus on “what he was before he fell”—the brother whom she had known and loved. After all, like Hastings, he had possessed great talent that set him apart from his peers, and although he was not nationally renowned, he was the center of his family's hopes and ambitions. Charlotte tried to love Branwell despite his faults, just as Elizabeth Hastings does in her novelette, and for a while, she was able to succeed in separating her view of her brother from her disappointment in his actions. As she writes in the text, “It was very odd but his sister did not think a pin the worse of him for all his Dishonour. It is private meanness, not the public infamy, that degrade a man in the opinion of his relatives... he was the same brother to her he had always been, still she beheld him acting through a medium peculiar to herself” (242). Still, eventually Branwell's “private meanness,” his attitude towards his own family rather than his bad reputation, led to the change in Charlotte's opinion of her brother, as she could no longer ignore what he was becoming.

#### CHARLOTTE'S PERSONAL EXPERIENCE WITH MENTAL ILLNESS

In addition to witnessing her brother's fight with mental illness, Charlotte experienced her own struggle with mental health. Peters describes her ongoing struggle with depression, saying, “The depression that had struck her down at Roe Head four years ago returned with doubled force. Nervous irritation and exhaustion brought on ill-health which in turn cast her down into a prolonged mental crisis” (47). Charlotte's own experience likely influenced the way she describes Jane Eyre's feelings after the wedding was called off:

My eyes were covered and closed: eddying darkness seemed to swim round me, and reflection came in as black and confused a flow. Self-abandoned, relaxed, and effortless, I seemed to have laid me down in the dried-up bed of a great river; I heard a flood loosened in remote mountains, and felt the torrent come: to rise I had no will, to flee I had no strength. I lay faint; longing to be dead... it came: in full, heavy swing the torrent poured over me. The whole consciousness of my life lorn, my love lost, my hope quenched, my faith death-struck, swayed full and mighty above me in one sullen mass.

(340)

She thinks of God but has no energy to call out to him in prayer. She knows of him and that he is supposed to be there to help her, but her faith breaks under the weight of everything else. In a similar manner, Charlotte tried to rely on God amid her depression, but she was unable to find solace in him. Instead, she was crushed under the weight of her own thoughts and feelings, like the flood waters Jane describes.

Charlotte's friends also chimed in with their own opinions on her mental health, attempting to be helpful but instead making matters worse. As Peters writes, "Mary Taylor had told Charlotte flatly that her depression was not mental but physical in origin, caused by too much sedentary work and not enough exercise. Ellen, however, unconsciously preyed upon Charlotte's depression, constantly sounded the theme of sin and possible salvation through Ellen Nussey. It drove Charlotte frantic" (59). Both friends reinforced the idea that mental illness was in large part the result of a person's own choices and shortcomings. Ellen's sermons and warnings about moral failings, in particular, got inside Charlotte's head, making her feel worse about her current situation but also likely influencing the way she later viewed Branwell's condition.

In addition to experiencing bouts of depression, Charlotte may have even experimented with opiates herself. After all, around the time when Branwell began practicing opium-eating, he and Charlotte were still tightly knit and did everything together. According to Harman, it would have been highly probable that Charlotte would have tried the drug with him, given the opportunity (104). The two siblings also shared a similar predisposition to the use of such drugs, due to their grief-ridden childhood. Alethea Hayter writes on the factors that tend to draw people towards drugs such as opium, a description that closely matches both Charlotte and Branwell's situation:

Men and women who feel all kinds of suffering keenly... who are unable to face and cope with painful situations, who are conscious of their own inadequacy and who resent the difficulties which have revealed it; who long for relief from tension, from the failures and disappointments of their everyday life, who yearn for something which will annihilate the gap between their idea of themselves and their actual selves. (qtd. in Harman 104)

Still, Harman also notes that "it remains that Charlotte denied using opium when Elizabeth Gaskell asked her outright, in 1853, about the very striking scenes in *Villette* where the streets of Brussels are seen through the drugged eyes of Lucy Snowe, under the influence of 'a strong opiate' administered surreptitiously to sedate her (but which has the opposite effect)" (104-5). The description of this drugged state contains a level of detail suggestive of personal experience, and although Charlotte denied ever trying the drug, whether she would have been open about the fact remains in question. Although advocates of the drug such as De Quincey romanticized its use, the general public tended to look down on it as a working-class vice. The nineteenth century also saw a shift in perspectives surrounding the use of opium in general, for although it was

readily available for sale, people were beginning to recognize its dangers and advocate for regulations to be put in place (Berridge 107-9). At the same time, a widespread temperance movement advocated against drunkenness and intoxication, largely motivated by Protestant notions of morality (Hyman 453). Given their strong religious convictions, the Brontë family likely sided with the advocates of sobriety, with the exception of Branwell. Charlotte may have then been too ashamed to admit any experimentation with drug use, since such use would have gone against not only societal and familial expectations of her, but also her own moral convictions.

On one level, Charlotte had such a strong emotional response to Branwell's eventual decline due to their once close relationship, for her close attachment to him and extreme faith in him led to a stronger feeling of disappointment than for their other sisters. On another level, she may have also judged him more harshly because she shared in several of his struggles—unrequited love for a married man, ongoing battles with depression, and possibly even opium use—but while Branwell was crushed under the weight of these trials, Charlotte was able to overcome them and constantly fight to do what needed to be done. Out of all the sisters, she had the ability to empathize with what Branwell was going through, but at the same time, she may have looked down on him for not being as strong as she was. All these feelings of pain, betrayal, disappointment, and judgment were transmuted into feelings of anger and resentment, which were then shown through the animalistic portrayal of Bertha Mason in *Jane Eyre*.



## Chapter Two

*Anne Brontë: The Tenant of Wildfell Hall*

Unlike her sister Charlotte, Anne Brontë seems to have drawn the most inspiration from her religious beliefs, which stemmed from a combination of both culture and experience. She believed Branwell's condition to be of a moral nature, the inevitable result of his own wrongdoings. Still, she did not believe these consequences to be irreversible, for she advocated for repentance and used her influence through her novel to warn other people of the dangers of following the same path.

## INFLUENCES ON ANNE'S PERSPECTIVE OF MENTAL ILLNESS

Many early Victorian physicians and psychiatrists believed that mental illness could result from extreme moral depravity rather than a dysfunction in the brain itself. Johann Heinroth, the first professor of psychiatric therapy in Germany, was a leading advocate of this theory, believing that “[a]t the root of all psychiatric suffering lay the weak will, which led individuals to yield to the power of corrupting passions, such as greed, envy, imprudence and hatred” (Pietikäinen 115). According to Heinroth, the weak will of man led to sin, and this sin led to mental and physical deterioration. Therefore, in Heinroth's mind, the mentally ill were responsible for their own afflictions (Pietikäinen 115). Heavily influenced by the Germans, James Cowles Prichard expanded upon these ideas, using the term “moral insanity” to describe cases in which a person's morality is impaired while his intellect remains intact. Prichard describes moral insanity as:

[A] form of mental derangement in which the intellectual faculties appear to have sustained little or no injury, while the disorder is manifested principally or alone, in the state of the feelings, temper, or habits. In cases of this description the moral and active principles of the mind are strangely perverted and depraved; the power of self

government is lost or greatly impaired; and the individual is found to be incapable, not of talking or reasoning upon any subject proposed to him, for this he will often do with great shrewdness and volubility, but of conducting himself with decency and propriety in the business of life. (*Treatise on Insanity* 15)

Prichard's research changed the scientific approach to mental illness not only by broadening the definition of mental illness, but also by changing the perspective surrounding who could become mentally ill. As Hannah Augstein writes, "[Prichard] showed madness to be part of the human condition: anybody was liable to become mad" (313). The significance here lies in the implication that the mentally ill are not lesser humans or animalistic in nature, for anyone could become mentally ill given the right, or wrong, circumstances. However, he was not as interested in uncovering the circumstances that led a person to becoming mentally ill as he was in "moral redemption, intellectual and cultural perfection. He saw man in the light of final causes and was not concerned with the tedious fetters of physical circumstances which prevented him from fulfilling his rational and moral potential;" instead, his main goal was "to save man's soul" (Augstein 314). Originally, he held to the "Lockean notion that a madman had lost his wits, but not his soul," arguing that "insanity consisted in a faulty transmission of data from the brain into the mind. Madness, in other words, arose from some organic malfunctioning either in the brain or in the nervous system more generally" (Augstein 315). However, he later decided that such a view was too limited, for it failed to account for cases where the afflicted person seemed to lose his moral capabilities without sacrificing his intellectual reasoning, such cases he described as "moral insanity." As an example, Prichard described one form of moral insanity as involving a lack of proper mood regulation, which leads to a lack of self-control and often the abuse of alcohol:

A state of gloom and melancholy depression occasionally gives way after an uncertain period to an opposite condition of preternatural excitement: in other cases this last is the primary character of the disease... In this form of moral derangement the disordered condition of the mind displays itself in a want of self-government, in continual excitement, an unusual expression of strong feelings, in thoughtless and extravagant conduct... Not unfrequently persons affected with this form of disease become drunkards; they have an uncontrollable desire for intoxicating liquors, and a debauch is followed by a period of raving madness, during which it becomes absolutely necessary to keep them in confinement. (25)

This description seems to bear some similarities to Branwell's situation, and Anne's approach to his illness suggests that she viewed it to be the result of his moral failings. Likewise, Augstein writes that "Prichard knew that ethics had nothing to do with medicine, and yet he could not help finding some truth in Heinroth's theory that insanity rose out of sin. It linked up with his belief that the causes of moral insanity were, more often than not, of a moral rather than a physical kind" (336-37). After the mid nineteenth century, Heinroth's theory that, as Emil Kraepelin scornfully described in 1904, "mental disease resulted from a moral transgression, from a voluntary surrender to a life of sin" was widely dismissed, as the focus of the medical community shifted away from religious ideas towards more materialistic and scientific explanations (Thiher 176). Published in 1848, *The Tenant of Wildfell Hall* was written during this period of shifting public opinion, but as a devout Christian, Anne naturally would have sided with the religious thinkers rather than the rationalists. Whether Anne was familiar with Heinroth's or Prichard's works is uncertain; however, she seems to hold similar beliefs regarding the moral nature of her brother's condition.

Anne was also influenced by the religious teachings of her father, who was an Anglican reverend, and her Methodist aunt, who took care of the Brontë children after the death of their mother. Elizabeth Branwell, Maria Brontë's sister, had a large impact on each of the Brontë sisters, instructing them in her views of Christian virtues, womanhood, and domestic duties. Of the three sisters, she had the most influence over Anne, for Anne was only a baby when her mother died. Gaskell writes, "Next to her nephew, the docile, pensive Anne was her favourite. Of her she had taken charge from her infancy; she was always patient and tractable, and would submit quietly to occasional oppression, even when she felt it keenly. Not so for her two elder sisters; they made their opinions known, when roused by any injustice" (147). Compared to her outspoken and independent-minded sisters, Anne was the most like her aunt in temperament, and she grew to hold similar beliefs. Her longsuffering nature also made her a natural choice for Branwell's caregiver, though her brother pushed her patience to its limits. Although she quietly submitted herself to the task, a more honest portrayal of her suffering is revealed within her novel *The Tenant of Wildfell Hall*.

#### PORTRAYAL OF ADDICTION WITHIN WILDFELL HALL

In this novel, the character of Arthur Huntingdon falls into alcohol and possibly opium addictions while carrying on an affair with his close friend's wife, much like Branwell became addicted to these same substances after being fired for having an affair with his employer's wife. While the details of Branwell's affair are unknown, Anne was a firsthand witness of its development, as she was employed within the same household. The probability that she would have incorporated some of the events she witnessed into her portrayal of Huntingdon's affair, just as she based Huntingdon's developing addictions on that of Branwell, is therefore relatively high. Huntingdon's wife, Helen, endures his drunken escapades and emotional abuse until he

starts to teach their son, also named Arthur, to drink and swear as well, at which point she runs away with her son to live near her brother in Wildfell Hall. The fact that she worries about her son learning these habits from his father is interesting, for the implication is that they are learned vices rather than part of an inherited nature, which also points to Anne's perception of addiction as a conscious immoral choice. Robert Macnish writes in his 1835 book *The Anatomy of Drunkenness*, "Drunkenness appears to be in some measure hereditary. We frequently see it descending from parents to their children. This may undoubtedly often arise from bad example and imitation, but there can be little question that, in many instances at least, it exists as a family predisposition" (16). Anne's view, as reflected in Helen Huntingdon, falls somewhere within this contemporary perspective, without submitting to it entirely, for she places the emphasis on moral choice rather than genetics. Helen's predicament then becomes, "How shall I teach him hereafter to respect his father, and yet to avoid his example?" (*Wildfell Hall* 198). While in Wildfell Hall, Helen takes on a new identity, using her mother's maiden name of Graham, hiding her relationship to both her husband and her brother, Frederick Lawrence. Still, she remains faithful to her husband, spurning any romantic advancements while he is alive, and even returns to take care of him when she hears of his ill health. This strong sense of duty and loyalty reflects Anne's own feelings towards her brother, for Anne felt duty-bound to care for Branwell, even though she viewed his condition as the result of his own immoral choices. Only after Arthur dies of consumption does Helen pursue a relationship with Gilbert Markham, the narrator of the first and third sections of the novel, and her happy ending can be seen as a reward for her piety and loyalty.

Ironically, Huntingdon unintentionally foreshadows his own downfall, recognizing the error of his ways while simultaneously refusing to acknowledge or fix them. He tells Helen early

in their relationship, “I see that a man cannot give himself up to drinking without being miserable one half his days and mad the other” (158). His words end up proving true: he does habitually overindulge in alcohol, and as a result, he does indeed become miserable and mad. The question then arises as to why he allows himself to lose himself in the bottle, when he knew what the consequences would be. Gwen Hyman sheds some light on this question by putting it into a historical context:

[T]he view of Huntingdon as an ‘alcoholic’ in the modern sense is profoundly ahistorical: the idea of drinking as compulsive behavior out of the control of the individual was not entertained by the early Victorians. In the first half of the nineteenth century, habitual drunkenness was seen as a behavioral or criminal issue, inflected with ethical connotations, tied to class and dependent for its definition on widely varying community standards. The Victorian drunkard was viewed variously as viciously depraved, morally bereft, or badly socialized. While one might certainly die from the effects of habitual intoxication, the idea of drunkenness itself as a disease was not widely accepted until at least the 1860s. (452)

For Huntingdon, drinking was simply a normal part of everyday life. After all, most of Victorian society still held to the eighteenth-century perception of alcohol which dictated that, as Sarah Freeman writes, “[alcohol] was as natural and necessary for survival as food” (qtd. in Hyman 452). As a member of a relatively high social class, Huntingdon also had no real work with which he could occupy his time. His excess drinking could then be simply seen as the result of boredom, as he grew restless in the quiet countryside. Hyman writes that “[a]lcohol, as Deborah Lupton notes, is a ‘liminal’ food: it puts its consumer into a state between consciousness and unconsciousness, control and chaos” (457). Drinking therefore offered an escape from dreary

reality into a liminal world of altered consciousness. Branwell also capitalized on this escape method, running away from his failures in art and literature. His life was unfolding in ways beyond his control, and rather than losing himself in the chaos, he retreated to a world in between—and ended up losing himself there instead.

Excess drinking also had a decided effect on one's manhood. Hyman notes that "[f]or Huntingdon, being one's own man is impossible within the bounds of social constraints, which are embodied in women; manliness precisely demands a determined lack of control, which, paradoxically, is the only way to control one's life" (459). By seeking the liminal world between control and chaos through drink, he is then trying to find his identity as a man. He could not place his identity in his work or any other productive pursuit, so he is left feeling aimless, which violates his vision of manhood. As he asks Helen, "Do you think I have nothing to do but to stay home and take care of myself like a woman?" (205). He then attempts to fill this void by drinking and socializing in clubs. However, these attempts end up producing the opposite effect. As Hyman writes, "The after-effects of drink further feminize him. He becomes peevish, petty, temperamental, cruel, a slave to his moods and passions. His 'nerves [are] racked and torn to pieces;' ... '[h]e lies on the sofa nearly all day long,' ... His gentlemanly self-actualization through drink has turned him, in other words, into the archetypal Victorian fainting lady" (461). The question then becomes whether Anne thought less of her brother as a man because of his drinking habits. Based on her portrayal of Huntingdon, the answer is mostly likely yes.

Still, Huntingdon likely does not intend for his drinking to go as far as it does, and when he tells Helen of the dangers of excess drinking, he probably believes that these consequences would never be the case for him. However, the more he indulges in alcohol, the more he begins to rely on it. As the text reads, "[Wine] was now something more to him than an accessory to

social enjoyment: it was an important source of enjoyment in itself. In this time of weakness and depression he would have made it his medicine and support, his comforter, his recreation, and his friend,—and thereby sunk deeper and deeper— and bound himself down for ever into the bathos whereinto he had fallen” (210). Macnish writes on the two primary causes of drunkenness in *The Anatomy of Drunkenness*:

Some are drunkards by choice, and others by necessity. The former have an innate and constitutional fondness for liquor, and drink con amore... They delight in the roar and riot of drinking clubs; and with them, in particular, all the miseries of life may be referred to the bottle. The drunkard by necessity was never meant by nature to be dissipated. He is perhaps a person of amiable dispositions, whom misfortune has overtaken, and who, instead of bearing up man fully against it, endeavours to drown his sorrows in liquor. It is an excess of sensibility, a partial mental weakness, an absolute misery of the heart, which drives him on. Drunkenness, with him, is a consequence of misfortune; it is a solitary dissipation preying upon him in silence. Such a man frequently dies broken-hearted, even before his excesses have had time to destroy him by their own unassisted agency. (12-13)

Both Huntingdon and Branwell began as drunkards by choice, frequenting bars and clubs as a form of social recreation and enjoyment. However, as the troubles of life began to weigh them down, they became drunkards by necessity, using alcohol as a medicine to numb their feelings and escape from their everyday existence.

#### ANNE'S MOTIVATION TO WRITE WILDFELL HALL

Many critics view *The Tenant of Wildfell Hall* as one of the first feminist novels, as Helen stood up for herself and her son by leaving her alcoholic, abusive husband, which would have been unusual for the time period. In this way, Anne does contradict the cultural conventions of her



time, but she also holds to the common belief that immoral vices such as alcoholism and sexual infidelity lead to mental illness. As Jean-Étienne Esquirol writes, “The abuse of wine, liquors, and aromatic infusions of opium, produce a great amount of insanity. This cause ought to be regarded as producing half the cases of insanity that occur in England” (*Mental Maladies* 41). As with moral insanity, blaming overindulgence in alcohol for poor mental health places the responsibility on the patient’s sense of morality. Rather than trying to make a feminist statement, Anne’s primary intention in writing this novel is clearly of a moral nature, as she writes in the preface to the second edition to her book:

My object in writing the following pages was not simply to amuse the Reader; neither was it to gratify my own taste, nor yet to ingratiate myself with the Press and the Public: I wished to tell the truth, for truth always conveys its own moral to those who are able to receive it... Let it not be imaged, however, that I consider myself competent to reform the errors and abuses of society, but only that I would fain contribute my humble quota to so good an aim... Such humble talents as God has given me I will endeavour to put to their greatest use; if I am to amuse, I will try to benefit too; and when I feel it my duty to speak an unpalatable truth, with the help of God, I WILL speak it. (5)

While Charlotte appears to be working through her own personal feelings about Branwell’s condition in her novel, Anne’s goal in writing her book was to promote a stronger sense of morality within the general public through what she learned in her experience caring for her brother. Some of her opinions may have been formed as a result of this experience, while others may have been influenced by the culture she was in, but ultimately the most important factor to Anne was her faith and sense of morality.

Anne did not enjoy her work, however, and would have preferred to write about a happier

topic. Still, she felt morally obligated to share her experience with the world, so other people might benefit from its lessons. In her “Biographical Notice of Ellis and Acton Bell,” Charlotte commented on the unusual subject choice of her sister’s novel:

The choice of subject was an entire mistake. Nothing less congruous with the writer’s nature could be conceived. The motives which dictated this choice were pure, but, I think, slightly morbid. She had, in the course of her life, been called on to contemplate, near at hand, and for a long time, the terrible effects of talents misused and faculties abused: hers was naturally a sensitive, reserved, and dejected nature; what she saw sank very deeply into her mind; it did her harm. She brooded over it till she believed it to be a duty to reproduce every detail (of course with fictitious characters, incidents, and situations), as a warning to others. She hated her work, but would pursue it. (*Wuthering Heights* xxxiii)

Charlotte did not approve of Anne’s novel, likely due to its open representation of their family’s suffering, and even tried to restrict its publication, which later contributed to Anne becoming lesser known than her sisters. This reluctance to air even a portion of their family’s dirty laundry is understandable, for the shame Branwell brought upon them was deeply felt by each sister, including Anne. This sense of shame is reflected in *Wildfell Hall* as Helen laments:

I feel his degradation, his failings, and transgressions as my own; I blush for him, I fear for him; I repent for him, weep, pray, and feel for him as for myself; but I cannot act for him... I am so determined to love him—so intensely anxious to excuse his errors, that I am continually dwelling upon them, and labouring to extenuate the loosest of his principles, and the worst of his practices, till I am familiarized with vice, and almost a partaker in his sins. (212)

These same feelings are likely the reason Anne hated her writing, but the same sense of duty also

motivated her to persevere in her task, both in caring for her brother and in finishing her novel. She also genuinely cared about her brother and wanted to save him from the path he was heading down.

Like Helen, Anne would have attempted to remind Branwell of his moral obligations and encourage him to change his ways. For Helen, when these attempts failed, she resigns to living in the moment and simply trying to make the best out of the situation:

I have found it my wisest plan to shut my eyes against the past and future, as far as he, at least, is concerned, and live only for the present; to love him when I can; to smile (if possible) when he smiles, be cheerful when he is cheerful, and pleased when he is agreeable; and when he is not, try to make him so—and if that won't answer, to bear with him, to excuse him, and forgive him, as well as I can, and restrain my own evil passions from aggravating his; and yet, while I thus yield and minister to his more harmless propensities to self-indulgence, to do all in my power to save him from the worse. (215)

Anne likely felt a similar sense of hopeless resignation. Initially, it would have been easy to turn a blind eye to the situation, as Branwell attempted to keep his problems a secret from his family. After all, as Helen's aunt warns her, "You will form a very inadequate estimate of a man's character... if you judge by what a fond sister says of him. The worst of them generally know how to hide their misdeeds from their sisters' eyes, and their mothers' too" (142). However, Branwell's shortcomings eventually became impossible to ignore, no matter how badly his sisters wanted to.

#### POSSIBILITY OF REDEMPTION

The sisters never wavered in caring for Branwell, however, no matter how emotionally and physically difficult it became for them. Likewise, Helen never stops trying to support and care

for her husband, despite his poor treatment of her and his unfaithfulness to her. Still, even with Helen's sacrifices and longsuffering patience, Huntingdon continues to berate her, complaining that she does not care for him and is making his condition worse:

'Oh, to be sure, you're overflowing with kindness and pity for everything but me... After all the wear and tear that I've had, when I come home sick and weary, longing for comfort, and expecting to find attention and kindness, at least, from my wife, -- she calmly asks what is the matter with me!' 'There is nothing the matter with you,' returned I, 'except what you have wilfully brought upon yourself against my earnest exhortation and entreaty.' ... 'If you knew all, my girl, you'd say rather, "What a wonder it is you can bear it so well as you do!"' (206-7)

Huntingdon's complaints and insistence that Helen does not understand the depth of his pain echo Branwell's lament that his family did not understand what he was going through. Helen, however, remains adamant that her husband's suffering was the direct consequence of his actions, specifically his overindulgence in alcohol, a view shared by Anne regarding her brother. Helen persists in advocating for her husband's redemption, however, but eventually recognizes that her efforts are in vain: "God might awaken that heart, supine and stupefied with self-indulgence, and remove the film of sensual darkness from his eyes, but I could not" (209-10). Anne likely had to come to terms with the same resignation. Only God has the power to change hearts, not man or woman.

Still, in both the real account and its fictional representation, God's influence can be seen until the end. Huntingdon's second to last words, "Pray for me, Helen," reflect Branwell's final "Amen." Harman writes that "as [Branwell] lay dying on the morning of 24 September, with his sisters and his father gathered round him: he was heard praying softly and when Patrick Brontë

offered up a final prayer, replied ‘Amen’” (282). Charlotte herself commented on “how unusual that word appeared from his lips” (qtd. in Harman 282). Neither Huntingdon nor Branwell were religious men during their lifetime, but both seemed to recognize their approaching eternal fate as they neared their death. In Huntingdon’s case, Helen clings to the hope that his soul would end up being saved:

How could I bear to think that that poor trembling soul was hurried away to everlasting torment? it would drive me mad. But thank God I have hope—not only from a vague dependence on the possibility that penitence and pardon might have reached him at the last, but from the blessed confidence that, through whatever purging fires the erring spirit may be doomed to pass—whatever fate awaits it, still, it is not lost, and God, who hateth nothing that he hath made, will bless it in the end! (365-66)

Earlier in the narrative, Helen expressed her belief that eternal damnation was not in fact eternal, but instead the sinner simply had to spend a certain period of time in hell as penance for his sins before he would be forgiven and admitted into heaven. Whether Anne shared this belief is not conclusive; however, the final stanzas of her poem “A Word to the ‘Elect’” suggests that she did hold the same view as Helen on the temporary nature of damnation and the salvation of all men:

That as in Adam all have died,  
 In Christ shall all men live...  
 That even the wicked shall at last  
 Be fitted for the skies;  
 And, when their dreadful doom is past,  
 To life and light arise.  
 I ask not, how remote the day,

Nor what the sinners' woe,  
 Before their dross is purged away;  
 Enough for me, to know  
 That when the cup of wrath is drained,  
 The metal purified,  
 They'll cling to what they once disdained,  
 And live by Him that died. (37-52)

Whether or not she believed damnation to be temporary, Anne harbored hope for her brother's eternal salvation. This hope is reflected in Huntingdon's possible repentance in the end, which was written and published months before Branwell's death. Huntingdon's request for prayer seems to be in direct opposition of his previous claim that "God is only an idea" (364), but he may have only been repeating his plea that Helen intercede on his behalf, since he does not trust in God himself. However, as Helen tells him, "No man can deliver his brother, nor make agreement unto God for him" (365). Likewise, Anne was unable to intercede on her brother's behalf. By the time Huntingdon seems to be more receptive to the concept of prayer, he becomes too incoherent to speak, so Helen never finds out if he ends up turning to God. She, like Anne, is only left with hope. By leaving an ambiguous ending to this troubled character's life, Anne showed that the possibility was still open for Branwell to put aside his atheism and trust in God at last. Her text proved almost prophetic, for in his final days, Branwell did become more receptive to his family's prayers and expressed regret that "[i]n all my past life I have done nothing either great or good" (qtd. in Harman 282). Whether or not Branwell truly repented in the end, however, only God can know.

## Chapter Three

Emily Brontë: *Wuthering Heights*

Despite having gone through the same experience with Branwell and having grown up in the same culture, Emily gained a more progressive perspective on mental illness than either of her sisters. Rather than simply viewing mental illness as a result of biological predisposition or conscious immoral choices, Emily shows how the environment in which a person is raised influences his or her character and mental state. Marchbanks notes how Emily points to home life as a major source of the state of a person's mental health:

Following the lead of such health reformers as Philippe Pinel who considered the 'repulsive spectacle of debauchery, of dissensions, and shameful distress' visible in many of his contemporaries' homes to be 'the most fertile source of insanity we treat in the hospitals,' Emily implicates the domestic spaces of *Wuthering Heights* in the very creation of not only alcoholism and lunacy, but idiocy. (62)

Such a perspective was revolutionary, for it not only undermined the idea that mental illness was either genetic or the result of some sin in a person's life— in other words, either outside of a person's control or one's own fault, and therefore unable to be changed— but by showing the importance of a solid home life in maintaining mental health, it allowed for the possibility for reform and rehabilitation through the introduction of a positive environment.

Within *Wuthering Heights*, the principle of nurture being a more influential factor in a person's character than nature is seen clearly in the development of the children Hareton and young Catherine. Still, even in the mentally unstable characters of Heathcliff and Hindley, Emily Brontë shows how they end up in such a deteriorated state rather than simply presenting them as monsters. This matter is one of debate within the novel, as Heathcliff's wife Isabella questions

after running away to marry him, “Is Mr. Heathcliff a man? If so, is he mad? And if not, is he a devil?” (135), while the servant Nelly later rebukes her, saying, “He’s a human being... Be more charitable: there are worse men than he is yet” (170). Still, the readers are given a fuller picture of these people’s lives and heartbreak, confirming their humanity despite their eventual malicious nature. In this way, Emily’s presentation of mental illness is different from the typical cultural perceptions, for most people at the time would have assumed that these tendencies towards violence and addiction were an innate part of who these men were and would not have bothered looking at their lives and humanity outside of these factors.

The fact that Emily was able to see beyond these cultural perceptions suggests that her experience with her brother Branwell gave her a different perspective on mental illness, which was also different from her sister Charlotte’s. The main difference in the two sisters’ experiences seems to be the level of emotional involvement, for Charlotte had a close relationship with Branwell before he became an alcoholic and was highly emotionally involved, while Emily was reportedly self-centered and emotionally distant from her family (Marchbanks 66). According to Rebecca Fraser, neither Emily nor Anne suffered as much as Charlotte, for “[l]iving in their own private worlds, not having Charlotte’s jarringly intense reaction to Branwell, they took pleasure in the most ordinary domestic tasks and in their constant writing” (244). Emily and Anne also would have been able to act as a support system for each other, for just as Charlotte and Branwell had been closely knit, Emily and Anne shared a tight bond together. Still, although less emotionally involved, Emily would have been in closer physical proximity throughout most of Branwell’s illness, for while Charlotte was often away trying to support her family financially, Emily tended to get homesick and avoided leaving Haworth as much as possible, preferring instead to stay home and tend to the domestic duties there (Gaskell 109-10). She therefore would



have had a closer look at the progression of Branwell's decline and been able to see the various factors that contributed to it.

In general, Emily was analytical and more logical than emotional in nature. Gaskell writes that Monsieur Heger believed "Emily had a head for logic, and a capability of argument, unusual in a man, and rare indeed in a woman," telling Gaskell in an interview that "[s]he should have been a man—a great navigator... her powerful reason would have deduced new spheres of discovery from the knowledge of the old; and her strong imperious will would never have been daunted by opposition or difficulty; never have given way but with life" (177). Her reasoning skills combined with her vivid imagination allowed her to see the bigger picture behind people's actions and create living characters with depth and soul. These same skills allowed her to view mental illness more objectively than Charlotte, so she was able to see what drove Branwell to madness, rather than simply being hurt and angered by it.

Within *Wuthering Heights*, four primary examples of mental instability can be seen in the characters of Heathcliff, Catherine Linton née Earnshaw, Hindley Earnshaw, and Hareton Earnshaw. Each of these characters exhibits a mental breakdown at least once during the novel, and this mental deterioration is clearly connected to circumstances in the character's life. As Boghian writes, "All these displacements and losses of privileges and dispossessions, followed one by another throughout the novel, generate suffering and frustration in the characters' souls, having as a result their bodily and also mental illnesses, manifested into their revengeful behaviour and horrifying exploits one to another" (71). Although Emily was often criticized for the dark nature of her plot and characters, as the reviewers were "shocked, disgusted, almost sickened by details of cruelty, inhumanity, and the most diabolical hate and vengeance" (qtd. in Peters 203), she presents a brutally realistic picture of the possible consequences of unhappy

childhoods and the negative influences other people can have on one's life, whether intentional or unintentional.

## HEATHCLIFF

Where Heathcliff came from is never discovered, but the circumstances of his early childhood lead him to become dark and sullen, sometimes seemingly emotionless, even as a boy. He is shown to be an intelligent child, however, and his mind flourishes under the guardianship of Mr. Earnshaw, Sr., even if the preferential treatment he is given is not good for his pride and overall temperament. After Mr. Earnshaw dies, however, and his son Hindley takes over as master of Wuthering Heights, Heathcliff is reduced to the status of a servant and robbed of education, abused by Hindley at every opportunity. This treatment and deprivation of education and opportunity leads to the deterioration of his mind and body, which hurts him more than an innate lack of intellectual ability:

[T]here was no prevailing on him to take a step in the way of moving upward, when he found he must, necessarily, sink beneath his former level. Then personal appearance sympathized with mental deterioration: he acquired a slouching gait and ignoble look; his naturally reserved disposition was exaggerated into an almost idiotic excess of unsociable moroseness; and he took a grim pleasure, apparently in exciting the aversion rather than the esteem of his few acquaintance. (*Wuthering Heights* 67)

Heathcliff lowers himself to the level to which he was forced, and this degeneration is presented both mentally and physically. Valerie Pedlar notes that within Victorian psychological study, “the idea of madness being imprinted on the body, manifest in physiognomy or posture, was widely accepted” (4). Heathcliff's unkempt appearance and poor posture would therefore have been directly connected to his mental state, both metaphorically and, according to contemporary

research, literally. The physical manifestation of one's mental state is a theme Emily repeats throughout the novel.

After the rejection of his childhood love, Catherine Earnshaw, he disappears and does better himself educationally, living up to his intellectual potential, but by this point, the events in his life have formed a deep sense of misanthropy within him. When Catherine dies shortly after the birth of her daughter, also named Catherine, Heathcliff completely descends into a darkened mental state, obsessed with taking his revenge on his former abuser, Hindley, and his rival for Catherine's affection, Edgar Linton. He becomes cruel, manipulative, and even more reclusive, and he is forever haunted by Catherine's memory. Still, despite his deplorable qualities, his humanity is seen through the clear trail of cause and effect, as the events in his life lead him to the place he ends up, and the reader may even be able to sympathize on some level with the tragic love story in which he is a victim.

Heathcliff's behavior mirrors Branwell's in several ways, including his violent temper and overall dark disposition; however, perhaps the most interesting similarity is found in Heathcliff's response to Catherine's death, which strongly resembles Branwell's reaction to his sister Maria's death. Van Der Meer notes that "some of Branwell's poetry, said to be based on his closeness to Maria and the profound loss he felt at her death, seems to echo the tone and the content of some of Heathcliff's monologues after Catherine's death" (212). Again, the connection between the emotional and the physical plays an important role, as both men feel a physical response to their pain and do not feel any desire to go on living after their loss. In his poem "Caroline," Branwell writes, "I could not think or see:/ I cared not whether I was borne:/ And only felt that death had torn/ My Caroline from me" (qtd. in Van Der Meer 215). In a similar manner, Heathcliff laments, "I have to remind myself to breathe—almost to remind my

heart to beat! And it is like bending back a stiff spring... it is by compulsion, that I notice anything alive or dead” (313). Just as Maria’s death significantly impacted Branwell’s worldview, Catherine’s death is a turning point for Heathcliff, solidifying not only his plan for revenge but also his own mental downward spiral. He even challenges her to haunt him as a wandering spirit, saying, “Catherine Earnshaw, may you not rest as long as I am living; you said I killed you—haunt me then... Be with me always—take any form—drive me mad! Only *do* not leave me in this abyss, where I cannot find you... I *cannot* live without my soul!” (165). As requested, her memory does haunt him, and it does drive him mad. Marchbanks offers helpful insights on Heathcliff’s relationship with madness, both personally and in the people around him:

The anti-hero Heathcliff, like the depressed and self-destructive Branwell, oscillates between desiring and spurning such madness, craving the restlessness of lunacy when generated by his dead lover’s haunting spirit and later spurning such mental disorder when triggered by the irritating presence of young Cathy II. No such ambiguity hinders his eagerness to inflict mental disorder on others, however. Winning Hindley Earnshaw’s property out from beneath him and displacing him as lord of the manor drives Heathcliff’s ‘kept’ enemy from despair and alcoholism into madness. Eventually, Heathcliff can candidly tell Joseph that the insane Hindley belongs in an asylum, the socially acceptable location for someone Heathcliff needs to get out of the way without becoming legally entangled in his inevitable demise. (62)

After being downtrodden and forced to a level of idiocy far below his actual intellectual capabilities, Heathcliff rebuilds himself and his mental prowess, only to turn around and inflict the same abuse on Hindley, and eventually Hindley’s son Hareton, that Hindley had inflicted on him.

During the final days of his life, Heathcliff grows even more mentally unstable. Restless, he wanders about the grounds in an unnaturally merry state, though still lashing out in bad temper at anyone who attempts to speak to him. Although not explicitly stated, the text strongly implies that he is haunted by visions of Catherine's ghost, as he is observed staring at some unseen object. He laments that "there is *one* who won't shrink from my company! By God! She's relentless. Oh, damn it! It's unutterably too much for flesh and blood to bear—even mine" (323). These visions drive him mad and render him unable to sleep or eat, eventually leading to his death. In this way, his final request of Catherine is fulfilled. While Branwell may not have experienced such vivid hallucinations, Heathcliff's state of nervous agitation closely resembles his own final days. Additionally, upon walking into Heathcliff's room and shining a light on him, Nelly Dean recalls, "I cannot express what a terrible start I got by the momentary view! Those deep black eyes! That smile, and ghastly paleness! It appeared to me, not Mr. Heathcliff, but a goblin," and she wonders, "Is he a ghoul or a vampire?" (318). Such a description contains striking parallels to Jane Eyre's vampiric description of Bertha Mason, as well as to Branwell's appearance in his final weeks, which likely inspired both.

Still, Emily tries to clarify that such a mental and physical state was not Heathcliff's fault, but rather that he was a victim of some outside forces. As Heathcliff tells Nelly, "It is not my fault that I cannot eat or rest... I assure you it is through no settled designs. I'll do both, as soon as I possibly can. But you might as well bid a man struggling in the water rest within arms' length of the shore! I must reach it first, and then I'll rest" (321-22). These lines suggest that Emily recognized that Branwell was struggling and was desperate for respite, but was unable to obtain it, rather than blaming him for his troubles like her sisters did. When the doctor is unable to determine the cause of Heathcliff's death, Nelly avoids telling him about his refusal to eat or

drink, for she is convinced that “he did not abstain on purpose: it was the consequence of his strange illness, not the cause” (324). In other words, she does not believe he brought his fate upon himself and does not want him to be judged as having committed suicide. She also does not blame his illness on his sins, even though he had acted in cruelty throughout most of his life. Instead, she believes that he had been truly suffering as the result of an illness outside of his control. Emily seems to have believed the same of her brother, or at least was open to such a view, even though it was contrary to what her sisters and most of society believed.

#### CATHERINE EARNSHAW

Catherine also clearly exhibits mental instability, though under very different circumstances. Marchbanks notes that as “[t]he product of a permissive, hands-off parenting style, Cathy I demonstrates the ability to induce delirium, sickness, and prolonged mental illness in herself at will” (62). Though less villainous, Catherine is in many ways a less sympathetic character than Heathcliff, for much of her suffering appears to be self-inflicted. She is the one who chooses to marry Edgar Linton instead of her love Heathcliff, and she is the one who works herself into such hysterical fits, which produce her illnesses, when she does not get her way. However, the reader can still sympathize with the pressure placed upon her by her family and society, especially regarding her choice of a husband, and her subsequent misery resulting from her separation from her love. Boghian notes that “[Cathy’s] frustration for having lost the freedom of being with her soul-mate Heathcliff, makes her fall into despondency, this state of mind bringing her physical illness (the brain fever) and then, her death” (73). Catherine’s response shares some parallels with Branwell’s response to Lydia Robinson’s rejection. Just as Catherine continues to pine after Heathcliff and falls into a state of delirium, Branwell continued to obsess over Mrs. Robinson, which also triggered his own mental deterioration, at least in part.

Emily's recurring emphasis on the connection between physical and emotional responses is strongest in Catherine's situation. According to Gorsky, Emily "connects psychological illness to emotional causes and to physical illness," noting that "the recognition that Cathy cannot have both Edgar and Heathcliff provides the catalyst that transforms her chronic unhappiness into acute emotional illness, manifested as depression, anorexia, and perhaps unconsciously willed death" (qtd. in Boghian 68). The belief that physical illness caused mental distress was not uncommon for the time period, but the reversal of this theory was not typically discussed. Based upon her personal knowledge of the Brontë family, Gaskell wrote that "though [Branwell's] depression was the result of his faults, it was in no other respect different from [Charlotte's]. Both were not mental but physical illnesses" (112). Having witnessed both her brother's and her sister's struggle with depression, Emily took this idea a step further, showing the connection between mental and physical illnesses without limiting the causation of the mental illness to the physical sickness, but rather showing how various emotional causes produce the mental illness, which then manifests itself physically.

#### HINDLEY EARNSHAW

Hindley Earnshaw is the character in this novel that most closely mirrors the traits of Branwell Brontë, at least later in his life. As a child, Hindley felt neglected and overlooked by his father, who preferred Heathcliff, an orphan child he took in, over his own son. As a result, Hindley grows bitter and jealous, and takes out his frustrations on Heathcliff after his father's death. After his wife dies, "he grew desperate: his sorrow was of that kind that would not lament. He neither wept nor prayed; he cursed and defied: execrated God and man, and gave himself up to reckless dissipation. The servants could not bear his tyrannical and evil conduct long" (65). He falls into violent alcoholism and gambling addiction, even almost killing his own son Hareton, whom

Heathcliff saves— much to Heathcliff’s chagrin upon reflection. Afterwards, Hindley tells Heathcliff, “I wouldn’t murder you to-night; unless, perhaps, I set the house on fire: but that’s as my fancy goes” (75). Such threats of harm during the night would have been a familiar occurrence in the Brontë household, especially when Branwell began sleeping in his father’s room, and the threat of fire was likely based on the fire set by Branwell, just like the fires Bertha Mason set in *Jane Eyre*. Hindley’s alcoholism and violent tendencies worsen over time, and after he attempts to murder Heathcliff, Heathcliff declares that “should [Hindley] last another month, I’ll have him to an asylum” (175). Hindley ends up dying as a result of his addiction, just like Branwell eventually did, at the age of twenty-seven, which was the age Branwell was at the time that *Wuthering Heights* was written.

In portraying Hindley’s flaws, which so closely resemble those of Branwell, Emily does not make him an unsympathetic character. Like with Heathcliff, she shows the man behind the addictions and rage, rather than simply presenting him as a fiend. Furthermore, through Nelly Dean’s comparison of Hindley and Edgar Linton, she is able to show that if circumstances had been slightly altered, they could have ended up on the same path:

I used to draw a comparison between [Edgar Linton] and Hindley Earnshaw, and perplex myself to explain satisfactorily why their conduct was so opposite in similar circumstances. They had both been fond husbands, and were both attached to their children; and I could not see how they shouldn’t both have taken the same road, for good or evil. But, I thought in my mind, Hindley, with apparently the stronger head, has shown himself sadly the worse and the weaker man. When his ship struck, the captain abandoned his post; and the crew, instead of trying to save her, rushed into riot and confusion, leaving no hope for their luckless vessel... Linton, on the contrary, displayed



the true courage of a loyal and faithful soul: he trusted God; and God comforted him. One hoped, and the other despaired: they chose their own lots, and were righteously doomed to endure them. (180-81)

Although these two men are innately similar, Linton is able to overcome the trials in his life, while Hindley is crushed beneath them. Nelly's analysis states that Hindley is the weaker man because of this inability to cope with his problems, but she does not end with that conclusion. Instead, she ascribes Linton's relative success to his reliance on God. This comparison bears a striking resemblance to Charlotte and Branwell's situation. Both siblings faced immense suffering in their lives, with the death of their mother and eldest sisters, and both suffered from deep depression. However, as Nelly says, "One hoped, and the other despaired" (181). Charlotte placed her trust in God, despite her obstacles, and her reliance on him brought her through the dark times in her life. Gaskell notes that "[i]f her trust in God had been less strong, [Charlotte] would have given way to unbounded anxiety, at many a period of her life. As it was, we shall see, she made a great and successful effort to leave 'her times in his hands'" (94-95). As a result, she was able to push through and accomplish the necessary tasks to provide for her family, whereas Branwell, like Hindley, crumpled under the weight of his struggles and fell into addiction and despair. Emily would have been a firsthand witness to both situations and seen their similarities, as well as the extreme difference in results. Although Charlotte was the one who could relate most strongly to Branwell's struggle, Emily was able to see the situation more objectively, noting how if either sibling's response had been slightly altered, they both could have ended up in the same place, for better or for worse.

#### HARETON EARNSHAW

The story of Hareton Earnshaw presents a unique situation, for he is intentionally forced into a

state of idiocy through the way he is raised. Rather than being a true developmental disability, “idiocy” within this novel constitutes a loss of intellectual reasoning ability, which in Hareton’s case is combined with illiteracy and rudeness of manners. According to Marchbanks, “In Emily’s Gothic novel, lunacy constitutes the most imminent type of mental difference, one toward which any number of characters are either drawn by an irresistible attraction or shoved by a domestic antagonist... In *Wuthering Heights*, cognitive disability provides a companion menace to the more traditionally Gothic threat of mental illness” (62). Catherine faces this threat, as the doctor says of her illness that “the threatening danger was not so much death, as permanent alienation of intellect” (130). For Hareton, this threat is a permanent part of his life, beginning at a young age. In one of his drunken fits, Hindley raises young Hareton over the bannister and ends up dropping him. Nelly admonishes him, saying that “if he’s not killed, he’ll be an idiot!” (75). After Hindley’s death, Heathcliff attempts to systematically undo the effects of his unintentional good deed of saving Hareton, turning him into an idiot and thereby solidifying his revenge against Hindley. After all, Heathcliff himself had been reduced to idiocy as a young man due to Hindley’s abuse, so he now seeks to inflict the same pain that he had suffered on Hareton, as Marchbanks writes:

He takes hold of his enemy’s son and begins shaping Hareton into an idiot-like simpleton, thus broadening his program of revenge against the father by counteracting his own unintentional rescue of the boy years earlier. The thick web of constricting language and limited expectations that Heathcliff spins around Hareton cramps the latter’s mind, completely changing the course of his development. Heathcliff lays hold of a lad with what Nellie considers a promising physiognomy and ‘a wealthy soil that might yield

luxuriant crops under other and favourable circumstances,' and shapes him into a proud, illiterate, morally obtuse brute, one wholly dependent on Heathcliff's instruction. (63)

Such a view contradicts the assumption that mental illness was genetically inevitable, showing how different upbringings and life circumstances produce different results in state of mind.

Heathcliff tells Hareton after his father's death, "Now my bonny lad, you are mine! And we'll see if one tree won't grow as crooked as another, with the same wind to twist it!" (183). Without the negative influences of his alcoholic father and emotionally abusive Heathcliff, Hareton could have grown to be a man of at least average intelligence. However, this fact simply adds to Heathcliff's malicious entertainment, as he tells Nelly, "If he were a born fool I should not enjoy it half so much. But he's no fool; and I can sympathize with all his feelings, having felt them myself. I know what he suffers now, for instance, exactly: it is merely a beginning of what he shall suffer, though. And he'll never be able to emerge from his bathos of coarseness and ignorance" (214). Even though Heathcliff is able to sympathize with Hareton's suffering better than anyone else, for he too had been forced to endure it, this sympathy does not prevent him from taking pleasure in inflicting the same pain on his former abuser's son, an eye for an eye.

Young Catherine, the daughter of Catherine Earnshaw and Edgar Linton, initially looks down on Hareton and mocks him for his simple mind. Right in front of him, she remarks, "He's just like a dog, is he not... or a cart-horse? He does his work, eats his food, and sleeps eternally! What a blank, dreary mind he must have!" (300). However, Nelly rebukes her, saying, "Had you been brought up in his circumstances, would you be less rude? He was as quick and as intelligent a child as ever you were; and I'm hurt that he should be despised now, because that base Heathcliff has treated him so unjustly" (242). Just as Hindley Earnshaw and Edgar Linton had initially been on similar paths but end up in different places in life, Hareton Earnshaw and

Catherine Linton had the same potential as children, but the different circumstances of their childhoods lead them to develop psychologically and emotionally in very different ways. Still, Nelly is able to see past Hareton's hard exterior and recognize his potential underneath the damage Heathcliff had inflicted upon him:

Still, I thought I could detect in his physiognomy a mind owning better qualities than his father ever possessed. Good things lost amid a wilderness of weeds, to be sure, whose rankness far over-topped their neglected growth; yet, notwithstanding, evidence of a wealthy soil, that might yield luxuriant crops under other and favourable circumstances. Mr. Heathcliff, I believe, had not treated him physically ill... He appeared to have bent his malevolence on making him a brute: he was never taught to read or write; never rebuked for any bad habit which did not annoy his keeper; never led a single step towards virtue, or guarded by a single precept against vice. (192-93)

Catherine later attempts to bring Hareton out of his state of idiocy by educating him and nurturing him. This process is neither quick nor easy, for undoing years of damage and neglect takes time; however, the two young people are able to work together and support each other, eventually reaching their goal. As the text reads, "Earnshaw was not to be civilized with a wish, and my young lady was no philosopher, and no paragon of patience; but both their minds tending to the same point—one loving and desiring to esteem, and the other loving and desiring to be esteemed—they contrived in the end to reach it" (305). This transformation is initiated by Catherine's efforts and attention, but she would not have been successful if Hareton had not also tried to change. He desires to improve himself and is willing to put in the necessary work. In the end, "[Hareton's] honest, warm, and intelligent nature shook off rapidly the clouds of ignorance and degradation in which it had been bred... His brightening mind brightened his features, and

added spirit and nobility to their aspect” (311). Here Emily once again connects emotional wellbeing with physical features. Just as ignorance and maltreatment left Hareton, and earlier Heathcliff, hunched over and dark and sullen in appearance, care and education make him more attractive physically. As a result, he is almost unrecognizable: a new person, mentally, emotionally, and physically. Overall, Marchbanks writes that “Cathy II effectively transforms the Heights from an asylum that breeds idiocy and madness into a nurturing, educational care environment; her acceptance of Hareton and the confidence she shows in him despite his coarse ignorance help reclaim him from the limited role of hard laborer to which Heathcliff had relegated him” (63). Hareton’s rehabilitation shows hope for change and that mental illness can be treatable rather than permanently damaging.

The resulting conclusion is that if a mentally ill individual receives the care and treatment he needs, he may be able to overcome his circumstances and live a more fulfilling life. The fact that Emily includes this possibility for change within her novel suggests that she harbored hope that Branwell might one day be rehabilitated as well. Such hope was supported by French physician Philippe Pinel, who believed that mental illness was treatable and ultimately curable. Pinel specifically noted the work of Dr. Willis, a director of an asylum who “paid special attention to the diet of the house” and “punished, with severity, every instance of ill treatment.” By treating the residents kindly but also maintaining disciplined order, Willis was able to cure “nine lunatics out of ten” (“Moral Treatment” 53-55). Such results proved the impact that a positive environment could have on the mentally ill. While Charlotte eventually lost hope in Branwell, Emily may have continued to hold onto the belief that through the loving care of the family, he could turn his life back around. Marchbanks also takes this idea further, suggesting that if the sisters had shown greater sympathy for Branwell’s struggles early on, or if their father

had been more proactive in putting an end to Branwell's drug and alcohol habits before they had a chance to spiral out of control, they might have had a greater chance of saving him (63).

Whether different circumstances would have resulted in a different end, no one can know.

### Conclusion

The Brontë sisters' novels were the product of bright and promising, though deeply troubled, young minds. These novels may be at times depressing in nature and uncensored in their portrayal of the darker impulses which can prompt people to harm those around them. However, as Gaskell notes, this portrayal did not result from any malevolence in the sisters' minds, but rather from an attempt to work through the pain that they had experienced in their own lives:

It is well that the thoughtless critics, who spoke of the sad and gloomy views of life presented by the Brontës in their tales, should know how such words were wrung out of them by the living recollection of the long agony they suffered. It is well, too, that they who have objected to the representation of coarseness and shrank from it with repugnance, as if such conceptions arose out of the writers, should learn, that, not from the imagination—not from internal conception—but from the hard cruel facts, pressed down, by external life, upon their very senses, for long months and years together, did they write out what they saw, obeying the stern dictates of their consciences. They might be mistaken. They might err in writing at all, when their afflictions were so great that they could not write otherwise than they did of life. It is possible that it would have been better to have described only good and pleasant people, doing only good and pleasant things... all I say is, that never, I believe, did women, possessed of such wonderful gifts, exercise them with a fuller feeling of responsibility for their use. As to mistakes, they stand now—as authors as well as women—before the judgment-seat of God. (272)

The novels were indeed viciously attacked, as reviewers condemned Catherine and Heathcliff as “the Jane and Rochester animals in their native state... too odiously and abominably pagan to be

palatable even to the most vitiated class of English readers,” and claiming that *Jane Eyre* was “pre-eminently an anti-Christian composition” (qtd. in Fraser 321). However, their intention in showing the darker potential of the human mind was not to glorify sin or horrify the reader—in fact, quite the opposite, at least for pious Anne. Instead, they were simply processing some of the pain and suffering they had experienced. Much of this pain stemmed from their brother Branwell, for although he had once been their shining hope, he became the source of their deepest shame. As his illness progressed, both mentally and physically, the responsibility to care for him fell to his sisters, giving them a unique perspective on mental illness.

#### SUMMARY

Even though they all shared a similar experience, the sisters presented different views of mental illness in their novels, as influenced by their different responses to the current debates regarding mental health and their different perspectives on Branwell’s situation.

**Charlotte.** Charlotte presented an outdated perspective on mental illness, showing the afflicted person to be animalistic and uncontrollably violent in nature, sub-human in both character and worth. This viewpoint was common in the Pre-Enlightenment period and continued into the late eighteenth century, as physicians such as Pargeter viewed the mentally ill as “scarcely human” (Laffey 1291). During the Enlightenment Era, however, this perspective began to change, as rationalists overturned the belief that the mentally ill were demon possessed and started to explore the medical and psychological explanations behind these conditions. The fact that Charlotte seems to reject the more recent findings in psychological research in favor of the outdated and harshly negative assumptions suggests that she may have held preconceived biases regarding mental illness, which did not allow for more open-minded thought on the subject. Of course, she may have simply been unaware of the more recent discussions, but this possibility is



unlikely given the wealth of newspapers and periodicals her father subscribed to, which kept all of the Brontës informed on current events and discoveries (Fraser 21), as well as her sisters' differing opinions.

Instead, Charlotte's perspective was likely influenced by her experience with her brother, with whom she once shared a close relationship. Branwell's descent into mental illness, alcoholism, and drug addiction hurt Charlotte deeply, and she was bitterly disappointed in the brother she once idolized and his failure to live up to her and their family's expectations. As Gaskell writes, "The deep-seated pain which he was to occasion to his relations had now taken a decided form, and pressed heavily on Charlotte's health and spirits" (218). These emotions blinded her to the pain and hardship that Branwell was also experiencing, for in her anger, she viewed him as weak and lazy, rather than a victim suffering from an illness outside of his control. She also may have viewed him as weak because she shared many of the same struggles, including depression, but she was able to persevere and still fulfill her duty to her family, whereas Branwell crumpled underneath the pressure. Likewise, she shared his temptations, as she was in love with a married man just as Branwell loved a married woman, but while Branwell gave in to temptation and had an affair, Charlotte did not act on her passion— although whether she acted out of self-control or was only restrained by unrequited love is questionable. Given these similarities, Charlotte may have also hated in Branwell the faults that she recognized and hated in herself. These feelings of bitterness and anger were then transferred into her animalistic portrayal of Bertha Mason in *Jane Eyre*, and Rochester's conflicted sense of duty is reflective of Charlotte's own feelings in caring for her brother.

**Anne.** Anne's perspective on mental illness resembles some of the contemporary literature on the subject, though she sided with the religious thinkers rather than the more progressive

rationalists. This subject was highly debated at the time, as the rationalists pushed against the traditional religious perspectives, arguing in favor of purely medical explanations, whereas the religious thinkers felt that sin often played a role in causing mental illness, although most no longer believed it was caused by demon possession. Early nineteenth century German physician Johann Heinroth believed that mental illness was the direct result of a person's sinful behavior, thereby placing the blame for any afflictions on the mentally ill individual himself (Pietikäinen 115). Additionally, James Cowles Prichard (*A Treatise on Insanity*, 1837) popularized the idea of moral insanity, a specific type of mental illness that affected a person's morality rather than intellectual reasoning, and while he believed insanity was at times caused by a malfunction in the brain itself, he accepted that it could also be brought on by moral failings. Anne took a similar approach, as she portrayed mental illness to be the inevitable result of conscious, immoral choices, specifically involving the overindulgence in alcohol.

Anne's chief objective when writing *The Tenant of Wildfell Hall* was to warn people of the dangers of following the path she had watched her brother go down. She hated her work, for as Gaskell notes, "the subject—the deterioration of character, whose profligacy and ruin took their rise in habits of intemperance, so slight as to be only considered 'good fellowship'—was painfully discordant to one who would fain have sheltered herself from all but peaceful and religious ideas" (281). However, she felt it was her Christian duty to share her experience with the world, so others may benefit from the lessons therein. As Charlotte wrote, "When reasoned with on the subject, she regarded such reasonings as temptation to self-indulgence. She must be honest; she must not varnish, soften, or conceal. This well-meant resolution brought on her misconstruction, and some abuse, which she bore, as it was her custom to bear whatever was unpleasant, with mild, steady patience" (qtd. in Gaskell 281). A naturally gentle and sensitive

character, Anne was deeply distressed by Branwell's actions and mental state. However, her concern was not for herself but for his eternal fate, and even if she was unable to save her brother, Anne was determined to save as many people as she could from making the same mistakes he had.

**Emily.** Emily took a more progressive, rationalist approach by viewing an individual with a mental illness as a whole person and examining the factors that contributed to his current state. She created different characters, each with individual desires and flaws, demonstrating various mental and physical illnesses, and these ailments can be clearly explained by a combined examination of the events in the characters' lives and their individual nature. She also showed that different people can respond differently to similar circumstances, thereby supporting the fact that there is no "one-size-fits-all" approach to mental health. This approach was supported by some contemporary physicians such as Philippe Pinel, who believed that a person's home life was a major factor in determining his overall mental health. Pinel also believed in the possibility of rehabilitation when a patient is placed in a positive, nurturing environment, a belief Emily seemed to share, as demonstrated by the drastic change in the character Hareton.

Emily was not emotionally driven like Charlotte, nor was she religiously motivated like Anne. Instead, she took a more objective view of the situation, as she was generally emotionally distant and rational in nature. Rather than being personally wounded by her experience with Branwell, she was able to analyze the situation and see that there were more factors involved than his own immoral choices. How much of his situation she understood is unknown, since she did not speak of it directly. After all, according to Gaskell, the sisters "spoke of him to each other as little as possible" (219), for they did not want to confirm or acknowledge their inner fears regarding their brother. Instead, like her sisters, Emily turned her thoughts into fiction, where she

explored the darker regions of the human mind. Within her work, she experimented with the different factors that could make a person become mentally ill, but she also showed how these people could be helped. This hope suggests that she believed in the possibility of Branwell's eventual reform, if he was given a nurturing environment at home.

#### MODERN APPLICATION

Although great progress has been made since the nineteenth century, a deep negative stigma surrounding mental illness still exists today. Looking at the factors that influenced the Brontë sisters' perceptions of the mentally ill can reveal reasons for the perpetuation of this stigmatization, particularly within people who do have personal experience with mental illness. After all, those who have not had any personal experience have less reason for personal investment in the issue, and therefore would be more susceptible to simply following cultural attitudes and practices. However, when a person holds to a cultural belief that seemingly contradicts his or her personal experiences, as in the case of Charlotte Brontë, looking into the reasons for this way of thinking can help uncover some of the root causes of the cultural stigma. To a certain extent, this stigma results from a lack of understanding, for those who are not familiar with mental illness are more likely to be afraid of it and promote misconceptions about it. Still, if a lack of familiarity were the only basis, those who do have experience with mental illness would be less likely to hold such beliefs; therefore, more causes must contribute to the stigma, such as anger or grief regarding the situation. The reverse is also true, as seeing how one such as Emily Brontë was able to explore the ways a person's circumstances shape his character and overall mental state may help others achieve the same understanding.

Just as Emily showed that people can follow different paths even when their initial circumstances are similar, people can also react differently and form different opinions regarding

the same situation. While some people are more objective than others, it is impossible to look at a situation with completely fresh eyes, for everyone has their own set of preconceived biases as influenced by their own life experiences, worldview, and general personality. This difference in perspective is likely the reason the Brontë sisters each ended up with a different outlook on their brother's situation, and it is the reason many people today struggle with accepting mental illness. Trying to undo lessons that have been subconsciously learned over the course of one's life is not easy. However, when approaching mental illness, the reader can also learn from Emily's work, for she showed the utility of a holistic approach in understanding the human mind. After all, people with mental illnesses are people— human beings with their own life experiences, worldview, and personality, just like everyone else. In order to understand where they are coming from, all these factors need to be considered.

On the other hand, studying Charlotte and Anne's works shows the potential danger in failing to take this holistic approach. Charlotte demonstrates what happens when someone becomes too preoccupied with her own emotions to see what the other person is going through. Instead of viewing the other person as a human being who is suffering and in need of help, she sees that person as a villain in her story, simply causing her pain through his actions. This perspective breeds bitterness and resentment, which can be seen in *Jane Eyre*, and places the blame on the afflicted person rather than offering him help. Likewise, Anne's approach, though well-meaning, is founded on the assumption that mental illness is the result of a person's own moral shortcomings. Both perspectives contribute to the negative stigma surrounding mental illness, as they imply fault or wrongdoing on the part of the afflicted person.

This negative stigma can have profoundly negative effects on people who are struggling to cope with a mental illness. Robb and Stone write that “exposure to and knowledge of negative

attitudes about mental illness can lead to self-stigma... [which] occurs when ‘people internalize the prejudice and discriminate against themselves.’ As a result, people with mental illness may delay or fail to seek treatment for their symptoms because they fear being stigmatized” (“Implicit Bias”). In addition to causing symptoms to potentially worsen or stay the same, failure to seek treatment or even talk about this experience with anyone can leave a person feeling alone and hopeless. Self-stigma can also lead to “lower self-esteem and self-efficacy, poor medication adherence, worsening symptoms, and suicidal ideation” (Robb and Stone). These consequences are the reason society needs to prioritize changing its attitude towards mental illness— to not only allow people with mental illnesses to be viewed and accepted as human beings by the people around them, but also to allow them to accept themselves and feel the freedom to seek any help or treatment they may need. Robb and Stone go on to note that “[t]he two most effective approaches for attitude change have included education interventions and contact interventions. As the names imply, education interventions involve teaching participants about the facts of mental illness whereas contact interventions involve participants directly or indirectly interacting with someone diagnosed with a mental illness.” As demonstrated by the Brontë sisters, interaction does not always negate biases, but that is where education can play an important role, for if a person goes into a conversation informed and open-minded, he is less likely to judge the person with whom he is interacting.

Open discussions about mental health are important in order to promote understanding and eliminate the taboo nature of this topic, which will then help decrease the stigma that surrounds mental illness. Literature can be a powerful tool in achieving this goal, both by providing authors an opportunity to be a positive voice and by equipping readers with the critical thinking skills necessary to recognize the different biases being presented in a work rather than

simply accepting them. The Brontë sisters offer a perfect example, for they demonstrate the different reactions and potential problems that can arise from a personal experience with mental illness. Studying their works in light of their experience with their brother Branwell accomplishes a threefold goal: discouraging people from making the same mistakes in blaming people with mental illnesses for their suffering, promoting a more comprehensive understanding of the factors in a person's life that can sometimes lead to mental illness, and encouraging deeper critical thinking regarding the portrayal of mental illness in future reading and studies.

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