Reading for Recovery: Illness and the Brontë Plots

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This essay investigates how illness initiates, develops and ends the plots of the Brontë sisters’ seven published novels, assuming that illness functions as the producer of what Peter Brooks calls ‘narrative desire’, a major force to lead the reader forwards. In his Reading for the Plot, Brooks defines plot as the organising line and intention of narrative, an “activity, a structuring operation elicited in the reader trying to make sense of those meanings that develop only through textual and temporal succession”.¹ He then argues that the reading of plot can be construed as a form of desire which carries us forward through the text, something similar to the Freudian notion of Eros which seeks to “combine organic substances into ever greater unities”.² Narratives both tell of desire and arouse and make use of desire as dynamic of signification. Desire always exists at the start of a narrative, often in a state of initial arousal, or having reached a state of intensity such that movement must be created. For example, the Iliad opens with the passionate quarrel between Agamemnon and Achilles over the girl Briseis, the Odyssey with Odysseus’s longing for home. Likewise, Lazarillo de Tormes (1554), one of the very earliest novels in the Western tradition, opens with the hope of the homeless pícaro, Lazaro, to survive the threat of starvation. By the nineteenth century, Brooks continues, the pícaro’s scheming to enable life has taken a more elaborate and socially defined form: ambition. As the vehicle and emblem of Eros, ambition provides a force that drives the male protagonist forward until it comes to a certain end, such as success or renunciation. The female plot, however, takes a more complex stance toward ambition: it shows “the formation of an inner drive toward the assertion of selfhood in resistance to the overt and violating male plots of ambition, a counter-dynamic which, from the prototype Clarissa on to Jane Eyre and To the Lighthouse, is only superficially passive”.³

What Brooks defines as narrative desire seems to operate in the Brontë narratives as desire for recuperation: the recovery of undermined health, the regaining of deprived power and the restoration of disturbed order. The ‘textual Eros’ of the Brontë novels then works literally as will to live on by surviving literal and figurative illness and overcoming the disorder it creates. ‘Female passivity’ exists at the beginnings of the Brontë narratives as the orphan protagonists’ physical, mental and social weakness which is directly and indirectly caused by the devastating
power of illness, something beyond the young protagonists’ control, and which they have to
endure, at least at the incipit of the novels, passively. The Brontë plots typically start with the
protagonists’ first rebellion against those who impose such passivity on them and their desire to
escape from their isolated position in a household. If, as Said argues, beginning determines much
of what follows, and exists as “the main entrance” to what the novels offer;⁴ the Brontë narratives
can be said to develop through the protagonists’ attempts to liberate themselves from the illness-
orphanhood structure they are enmeshed in at the beginning, and to empower themselves
physically, mentally and socially by undertaking adventures. In Marxist terms, while the orphan
protagonists suffer injustice in their socially isolated position, they can at the same time freely
design their own life.⁵ Their orphanhood is, in this sense, needed in the early part of the novel to
induce adventures narrated in the text, whereby illness is, in turn, needed to orphan the
protagonists.

Jane Eyre’s case epitomises the orphan-illness-adventure triad. Jane is an orphan in the
household of her unsympathetic relatives without her own sibling to share the plight of the
dependant, but with a set of physically and socially superior cousins massed against her. The first
two paragraphs of her autobiography express the young Jane’s relief at the impossibility of going
for a walk because of the bad weather, and reveal her present misery:

I was glad of it: I never liked long walks, especially on chilly afternoons: dreadful to
me was the coming home in the raw twilight, with nipped fingers and toes, and a heart
saddened by the chidings of Bessie, the nurse, and humbled by the consciousness of my
physical inferiority to Eliza, John, and Georgiana Reed.⁶

Jane in this way feels frustrated with her physical weakness which makes her daily routine
burdensome, with the psychological unhappiness created by Bessie who chides her, and with the
social inferiority which allows the nurse to do so. Physical weakness not only annoys the young
heroine now, but also killed her guardian, Uncle Reed, and completed her isolation. After both of
her parents died of typhus when she was a baby, Uncle Reed, the brother of Jane’s mother,
cherished her but he was innately weak and died. Despite the promise he exacted from his wife to
look after his niece well, Jane is detested by Mrs Reed and bullied by her children. It is when
Jane falls ill in the red room that she takes her first chance to escape the Reed household. Mr
Lloyd, the apothecary, who comes to examine her suggests to Mrs Reed that she should be sent
to school. Illness in this way initiates her adventure by sending her from Gateshead to Lowood.

The Professor also begins with a variation on this pattern of the orphan-illness-adventure.
The early part of the novel dramatises how William Crimsworth is re-orphaned and forced to live
through his own resources. The text gives no clear explanation for how his father died, but it tells
that his mother died six months later, giving birth to her son. After leaving Eton, Crimsworth
declines the offer of a position of rector by his uncles and breaks up with his only brother, Edward. *The Professor* seems initially to isolate Crimsworth from all his possible financial supporters, in order to send him to Belgium, rather than to represent the misery of being parentless. In his rivalry with Edward, Crimsworth’s physical inferiority is stressed: “my features were less regular --- I had a darker eye and a broader brow --- in form I was greatly inferior --- thinner, slighter, not so tall. As an animal, Edward excelled me far”.7 His counterpart, Frances Henri, is also a physically weak orphan whose eyesight begins to fail because of her hard work of lace-mending, and who looks to Zoraïde consumptive. Again, the text does not say how her father died, but her mother is thought to have died of consumption. In the course of the novelistic time, illness kills her only relative in the country, her aunt, with whom she lives.

*Villette* does not state how Lucy Snowe became an orphan, but it opens with the illness-orphan misery of another young female character, with the arrival of Paulina. Her mother’s death after catching a cold at a ball affected her father’s health so that he needs to travel on the advice of his doctors. Separated from her father, Paulina shows an extraordinary attachment to him, which Lucy calls a “monomaniac tendency”.8 After Paulina’s misery as a temporary orphan is fully dramatised, the Bretton family is forced out of their home because of a failed investment and Lucy starts working as a nurse companion of Miss Marchmont, a “rheumatic cripple” (*V* 43). Considering that she lives in Miss Marchmont’s house with such a deep emotional involvement, it can be said that, on her mistress’s death, Lucy loses her home and family-like figure. After Miss Marchmont’s death ‘orphans’ her again, Lucy, like Crimsworth, starts another phase of her life overseas, although she is more passive than Crimsworth in changing her scene: “It seemed I must be stimulated into action” (*V* 45). *Villette* in this way stages several beginnings with illness and orphanhood in Lucy’s life narrative before it finally sends the “tame and still” (*V* 45) heroine off to adventure.

The opening chapter of *Shirley* features neither illness nor orphanhood but the tea party of three curates.9 Once Caroline, a parentless girl who, like Jane Eyre, lives in her uncle’s house with emotional dissatisfaction appears, the narrative starts depicting the beginning of her psychological progress. Shirley Keeldar is the other parentless heroine of the novel, but how she was orphaned is unmentioned in the text. For Shirley, moving to Fieldhead may be an exciting change, but her new life there is not really dramatised as an adventure.

The beginning of *Agnes Grey* describes how Agnes is treated as a pet by her family. This is probably not only because she is the youngest of the family but also because she and Mary are the only two of six children that “survived the perils of infancy and early childhood”.10 Her father’s illness caused by the shock at his failure in a financial investment urges Agnes to embark on an independent life somewhere outside her home. While other Brontë orphan protagonists
leave their home either because they have lost it or because it is a false one, Agnes does so when her residence is, despite her father's decline, basically a comfortable place with her own affectionate family. Richard Grey's illness helps Agnes articulate her discontent with the life of a spoiled child and her secret desire for an adventure, even if becoming a governess is generally considered not very exciting: "How delightful it would be to be a governess! To go out into the world; to enter upon a new life [. . .]" (AG 69). Illness in this way awakens the heroine's desire and directly initiates her adventure.

In *The Tenant of Wildfell Hall*, illness initiates neither the framing narrative set in Gilbert Markham's letter nor the framed narrative, the inside story told in Helen's diary. Illness neither bridges the two narratives nor necessitates the incorporation of the inside story into the outside story. The only possible reminder of illness in the early part of the text would be Helen's mourning which could indicate a prior existence of illness, as death is often associated with illness in nineteenth-century novels. Although the framing narrative does not open with illness, it dramatizes a variation on the illness-orphan-rebellion structure: Helen starts a new life without anyone who can officially protect her.

In the other Brontë novel with a comparable Chinese box narrative, *Wuthering Heights*, by contrast, illness initiates both the outside story narrated by Lockwood and the inside story narrated by Nelly and links them so that the framing narrative necessitates the beginning of the framed narrative and the framed narrative, in turn, brings the ending of the framing narrative. While other Brontë protagonists leave home for the outside world, the key characters of the novel's framing and framed narratives, Lockwood and Heathcliff, come into Wuthering Heights as strangers. If he is not an orphan, Lockwood arrives as a complete outsider from somewhere southern who naively believes the younger Catherine to be Heathcliff's wife. His entry into Wuthering Heights is an adventurous act and his decision to reside at Thrushcross Grange, an adventurous plan. As early as on his second visit to Wuthering Heights, Lockwood witnesses the 'disorder' of the house and gets involved in it by becoming ill, first by his nose-bleed, then by nausea and a nightmare. Misunderstanding that Lockwood has tried to steal a lantern, the old servant Joseph sets dogs on him and excites him until he has a nose-bleed, which Thomas John Graham's *Modern Domestic Medicine*, the book the Reverend Patrick Brontë frequently consulted,\(^{11}\) includes as a disease under the title, "bleeding from the nose".\(^ {12}\) Another servant, Zillah, splashes icy water down his neck to "cure that",\(^ {13}\) and makes him feel weak and unwillingly stay overnight. In bed he suffers from nausea caused by the smell of a book which has caught fire from the candle and finds Catherine's scribble in the margin of her books.\(^ {14}\)

By weakening him in this way, illness and violence lead Lockwood to the inside story, functioning as the bridge between the present and the past. Catherine's diary entry also describes
illness and violence: Hindley’s abuse of Heathcliff and her physical response to her agony, a
headache, another disease included in *Modern Domestic Medicine*. Just after reading the
passage, Lockwood participates in the violence prevailing in the house by hurting a girl ghost in
his nightmare, which is also treated as a “nervous affection” in *Modern Domestic Medicine*. The
parallel made through illness between the two different times continues to develop later in Nelly’s
narrative, in which Lockwood’s experience is repeated, or has been experienced by the characters
of the inside story. For example, illness caused by servants’ violence is repeated in Nelly’s
narrative in a more radical form as Heathcliff’s tyranny. Metaphorical and literal confinement in
house is experienced by Catherine Earnshaw, Hindley, Catherine Linton, Linton Heathcliff and
Nelly.

After the nightmare, Heathcliff’s serious address to the ghost arouses Lockwood’s curiosity
and tempts him to ask Nelly to tell the story of the residents in the Heights. As Ronald R. Thomas
argues, Lockwood may be expecting therapeutic effects in the act of listening to the story and
trying to comprehend and master the disordering experiences which have brought on his illness
in the first place. His cold further consolidates the situation of his listening to Nelly’s story:
“This is quite an easy interval. I am too weak to read, yet I feel as if I could enjoy something
interesting. Why not have up Mrs. Dean to finish her tale?” (*WH* 90). In this way, the two
narratives of *Wuthering Heights* begin with illness: the early part of the framing narrative features
a succession of illness-related events, and the framed narrative is initiated by Lockwood’s desire
for recovery from psychological shock and physical weakness and narrated by Nelly during his
recuperation.

Nelly’s narrative, in turn, opens with the illness-orphan structure: Old Earnshaw returns
from Liverpool with Heathcliff who looked “really half dead with fatigue” and “starving” (*WH*
35). While Heathcliff’s bodily weakness catches Old Earnshaw’s attention and ends his
homelessness, his presence in Wuthering Heights disturbs the established order of the household
and invades the healthy familial body like a virus. Hindley and Nelly “plagued” him (*WH* 36)
and treat him as a disease. An illness episode, however, changes the power structure of the house
in favour of Heathcliff. Although Nelly is first sympathetic with Hindley, her playmate, who
hates Heathcliff as the usurper of his parents’ affections, she begins to accept the stranger when
she nurses the children who fall ill of the measles. Unlike Catherine and Hindley who are difficult
patients to look after, Heathcliff turns out to be “the quietest child that ever nurse watched over” (*WH* 36). Heathcliff wins his nurse’s approval and Hindley loses “his last ally” in the home (*WH*
37). The measles episode occurs in fact some two years after Heathcliff’s arrival, but the
narrating-Nelly inserts it soon after describing his “first introduction to the family” (*WH* 36) as a
significant incident to tell in her story. The inside story in this way opens with the conflict
between Heathcliff’s desire to empower himself which works as Brooks’s ‘ambition’, the vehicle and emblem of Eros, and Hindley’s desire to restore the disturbed order of the house and reestablish his position in the domestic power structure.

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After serving as the catalyst to start the protagonists’ adventures in most of the Brontë sisters’ novels, illness further exercises its power to precipitate events, create new scenes and change deadlocked situations. For example, illness strengthens the ties between characters. As Zoraïde attracts Crimsworth by exhibiting her worry about his cold, Jane wins Rochester’s trust by nursing the injured Richard Mason. Caroline Helstone is reconciled with her uncle during her illness. Illness also saves protagonists from confinement, releasing Jane from the red room and freeing the young Caroline Helstone from a garret room where her father confined her when she was ill. The most dynamic power of illness is seen in its creation of encounters or reunions between protagonists in all the seven novels. How fully and vividly these scenes are represented and how closely they are related to the main plot depend on the novel’s prevailing tone, on their importance to the narrator-protagonist, and on the cause, nature and seriousness of illness.

In The Professor, the illness of her aunt first estranges Frances from Crimsworth but then ties them closer. When they are finally reunited with each other in a Protestant cemetery, they are able to express their pleasure with much less inhibition than before, because of their long and frustrating separation:

“Well, my pupil,” said I, as the ominous-sounding gate swung to behind us, “well - - - I have found you again: a month’s search has seemed long and I little thought to have discovered my lost sheep, straying amongst graves.”

Never had I addressed her but as Mademoiselle before, and to speak thus, was to take up a tone new to both her and me. Her answer apprised me that this language ruffled none of her feelings, woke no discord in her heart”. (P 156-57)

Illness thus indirectly precipitates the marriage of the two otherwise shy characters.

In Shirley, illness reunites a mother and a daughter with its great catalytic power. In the face of Caroline’s illness, Mrs Pryor reveals her true identity as her mother, whereupon the patient soon regains her will to live. Mrs Pryor’s revelation of her identity followed by Caroline’s recovery is the only miraculous episode in the novel, but the dynamic power of illness plausibly places it in the realistic narrative of the novel. After reuniting the daughter and the mother, illness further brings other characters closer, prompting them to express their otherwise repressed feelings. Caroline secretly visits the injured Robert, Shirley expresses her care for Louis when he catches a fever, and Louis shows his concern for Shirley who is depressed after the dog-bite. These cases are, however, less dramatic and less powerfully dramatised than the reunion scene of
Caroline and Mrs Pryor and have no other force in directing the plot than making protagonists more intimate. Shirley’s dog-bite episode is not directly represented but recounted in the conversation between Shirley and Louis and fades out of the narrative with no description of what happens thereafter. The conversations between Shirley and Louis, and between Caroline and Robert create no immediate and decisive result such as a proposal, but, as in the reunion between Crimsworth and Frances, indirectly precipitate their marriage. The cause and seriousness of their illness are also different from those of Charlotte Brontë’s fully dramatised illness. Caroline, Crimsworth, Jane and Lucy suffer from serious psychosomatic illness, whereas Robert and Shirley are injured by accident and Louis’s fever is slight and brief. Although she names the novel after Shirley Keeldar, Charlotte Brontë gives Caroline’s psychosomatic illness the richest dramatisation in her narratives and the most dynamic power in her plot development.

*Villette*, a novel which includes more unrealistic elements than *The Professor* and *Shirley*, has two miraculous reunions directly created by illness. When Lucy collapses in front of the Catholic church, she is brought to La Terrasse and the narrative enters a new phase which features the heroine’s communication with her former foster family. Paulina and Graham are reunited in the midst of the fire panic when her shoulder gets dislocated and he offers help and cure. Both reunions occur in unusual settings and are caused by the main characters’ dysfunctional bodies, but they show a crucial difference in the degree of dramatisation and the relation to the main plot. The first reunion follows the full dramatisation of Lucy’s long and lonely sufferings and is followed by the scenes of nursing she receives in the Bretton household. It occurs as the result of a succession of interrelated events, her loneliness, illness, confession and collapse. The second reunion between Paulina and Graham occurs abruptly and accidentally and her injury is shortly cured by Dr John’s treatment without any long or detailed nursing scene. Even though Graham’s profession makes his contact with her natural, this reunion has no particular causal relation to the previous events. How fully the reunions are dramatised and how closely they are related to the main plot are essentially determined by their significance as events to the heroine and narrator of the novel, Lucy. While the first reunion forms one of the climaxes of Lucy’s life narrative, the second reunion leads mainly to the sub-plot of the relationship between Graham and Paulina which excludes her, although she is also present in the scene and reunited with Paulina. Vashti’s performance which is fully depicted can then be seen as possessing great narratological significance.

*Jane Eyre* has two encounters created by illness, but, unlike the two reunions in *Villette*, both of them prove to be crucial events to the heroine-narrator Jane. Adèle’s slight cold provides Jane with an opportunity for a walk, in the course of which she comes across Rochester, who sprains his ankle in a fall from his horse. Rochester’s curiosity, awakened by Jane’s attempt to
assist him, leads to his inviting Jane to tea, and his injury which forces him to stay at home promotes their further communication. Thus, the very minor everyday illness, a child’s cold, produces an unexpected ripple effect and creates the dramatic encounter indispensable for Jane’s life story. The second encounter between Jane and the Rivers family resembles the reunion between Lucy and the Bretton family and happens after a train of climactic episodes: the interrupted wedding of Jane and Rochester, the revelation of his mad wife, her rejection of Rochester, and her wandering on the moor. While Lockwood’s sudden visit is unwelcome to the residents of Wuthering Heights, Jane’s bodily weakness legitimates accommodating a stranger at Moor House, and starts a new phase of the novel. *Jane Eyre*, the novel which has the most romantic and sensational elements of all Charlotte Brontë’s published novels, gives illness the most dynamic power to create encounters highly significant in terms both of dramatisation and of plot-development.

In *Agnes Grey*, illness indirectly introduces the heroine to her future husband, thereby serving to demonstrate people’s faiths and reflect their personalities. When she visits one of ‘the cottagers’, Nancy Brown, who is suffering from an eye inflammation, rheumatism and spiritual uncertainty, Agnes hears her praise the new curate who, in contrast to Rev. Hatfield, shows great understanding of her sufferings. During Agnes’s second visit, Weston calls at the cottage with Nancy’s lost cat in his arms and witnesses Agnes’s kind deed to the sick. When they accidentally meet on their way to the consumptive Mark Wood, they naturally begin conversation. By revealing that they share the same interest in helping the sick, illness thus brings the otherwise reserved Agnes and Weston closer (Agnes has, in fact, already seen him in church). Considering that the Christian tradition always included ministering to the sick, it is no coincidence that they meet in relation to nursing the sick. Illness in this way makes their first meeting and conversation bound to happen sooner or later.

The reunion of the sick Arthur Huntingdon and his runaway wife, Helen, in *The Tenant of Wildfell Hall* is the only illness-related reunion of a married couple in the Brontë narratives and the only case in which one of the couple dies. Unlike in most of the encounters and reunions discussed above, illness in this reunion does not serve to develop their mutual attachment but, instead, resolves their marital relationship by killing Arthur. His final death liberates Helen legally and psychologically and ultimately enables her to marry Gilbert.

In *Wuthering Heights* illness creates three encounters for three future married couples which are equally important in determining the plot direction but dramatised in different styles. Catherine’s ankle injury by the Linton family’s bull-dog introduces her to her future husband, Edgar. The irreversible and fundamental transformation made during her five week-stay at Thrushcross Grange brings her perfect dyad and wild childhood with Heathcliff to an abrupt end.
In this episode, illness serves to change Catherine’s body and character as well as to develop her class consciousness. In the second part of the novel, illness introduces the younger Catherine to Hareton and to Linton Heathcliff. While Edgar visits his estranged sister Isabella who is seriously ill with “a kind of fever” (WH 190), Catherine secretly goes beyond the premises of Thrushcross Grange so far as Wuthering Heights and meets Hareton. Isabella’s death then brings Linton Heathcliff to the Grange for a short time and introduces him to his future wife. The two meetings are neither so dramatic nor dramatised in detail as the encounter between the elder Catherine and Edgar. The elder Catherine gets acquainted with Edgar as a result of her own injury which is caused in a shocking and brutal way, and the scene is vividly depicted in Heathcliff’s account to Nelly, whereas the younger Catherine meets her future husbands because of the illness of a more minor character, Isabella, whose death-bed scene is never dramatised in the text. The difference in the tone and dramatisation between the first meeting and the other two meetings is proportionate to the difference between the first generation characters with intense emotion and violent utterances and actions and the much milder and more passive second generation characters.

Apart from creating the protagonists’ encounters, illness in *Wuthering Heights* constantly changes the power balance among characters, especially with its ultimate outcome, death. The typhus episode at Lowood in *Jane Eyre* also shows a perfect example of this but it serves to empower the heroine. Jane must first endure poor quality food and obey rigid school regulations, but when typhus breaks out in the school, she enjoys an ample amount of food originally for the other students who are now either dead or too ill to eat, and plenty of free time as the teachers are too busy in nursing the sick to pay attention to healthy pupils. In *Wuthering Heights*, by contrast, the chain reaction of the power of illness always leads characters to tragedy and chaos. After the measles episode isolates Hindley, Old Earnshaw weakens and becomes irritable, especially when he sees Heathcliff ill-treated by someone, until he sends Hindley to school. Meanwhile Joseph becomes more insolent: “the more feeble the master became, the more influence he gained” (WH 40). Old Earnshaw’s death brings Hindley back to attend the funeral with his wife, Frances, with whom he is so infatuated that a hint of her dislike of Heathcliff fuels his old hatred. Hindley treats Heathcliff as a servant until Catherine says her marriage to him would be ‘degradation’. Frances’s death then creates another disease included in Graham’s *Modern Domestic Medicine*, intoxication, whose state is similar to that of apoplexy or palsy; it turns Hindley alcoholic and the house more chaotic.

The fall of the Earnshaw family is overall precipitated by the death of adults as children’s guardians. After Old Earnshaw’s death, there is no adult who can redress Hindley’s deterioration and restore peace in the house. Not only the Earnshaw children but also those of the Lintons are
orphaned. During their nursing of Catherine at Thrushcross Grange, Mr and Mrs Linton take her fever prompted by the shock of Heathcliff’s disappearance and die within a few days of each other. Later, nursing Catherine with a brain fever undermines Edgar’s health. The Linton family’s voluntary nursing of Catherine which kills or debilitates them makes a marked contrast to the successful nursing seen in Charlotte Brontë’s novels which cures sick heroines and unites them with family-like nurse figures. Without any adult to protect them and control their acts, the orphans in *Wuthering Heights* are simply thrown into disorder while Charlotte Brontë’s protagonists are liberated from a repressive family tie. The absence of parents, especially the father as patriarch, creates corrupt patriarchs such as Hindley and Heathcliff as well as class disorder which Lockwood witnesses at the start of his narrative.

While most of the relatively minor characters die from illness as passive victims, Heathcliff and Catherine Earnshaw consciously attempt to abuse illness in order to manipulate others. Heathcliff uses physical weakness to empower himself throughout the novel. He demands Hindley’s healthy colt by threatening that he would show Old Earnshaw his black arm and shoulder as the evidence of Hindley’s thrashings. He later manages to take all the property of the drunken Hindley. Heathcliff cajoles the younger Catherine into his home by lying that the frail Linton Heathcliff needs to see her, in order to marry them and acquire their property. Heathcliff’s idea of revenge on the Earnshaw and the Linton families, however, originates from his attempt to manage his own physical and mental pain. The young Heathcliff tries to endure his pain by imagining how he inflicts pain on Hindley in return: “I only wish I knew the best way! Let me alone, and I’ll plan it out: while I’m thinking of that [the revenge on Hindley] I don’t feel pain” (*WH* 60). After Mr and Mrs Linton’s death, Catherine also tries to take advantage of her illness to cope with her inner pain and claims to be “treated with consideration” (*WH* 88). Her attempt to gain power and peace through her illness culminates when she asks Nelly to warn Edgar that she is seriously ill and goes on hunger strike. While Heathcliff’s revenge is fulfilled as he intends it to be, Catherine’s desperate attempt to end the discord between Heathcliff and Edgar finally costs her her life. Her death further creates negative ripple effects and precipitates the deaths of Edgar and Hindley; it shocks Edgar and makes him sink into melancholy, while making Heathcliff more desperate and more cruel to Hindley. The younger Catherine and Hareton are thus orphaned not by accidental illness but by the older generation’s intention to die or kill.

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After triggering the encounters and reunions between the protagonists in the middle of the plot, illness finally creates married couples out of them at the end of all the seven Brontë novels except for *Villette*: Crimsworth and Frances, Jane and Rochester, Caroline and Robert, Shirley and Louis, Agnes and Weston, Helen and Gilbert, and Catherine and Hareton. Even in *Villette,*
Lucy is engaged to M. Paul and spends some happy years until the very ending of the novel. The marriages of the lonely protagonists after surviving illness indicate the final resolution of the predicament they have faced at the beginning of the novels: the recovery of health and the solution of orphanhood. The births of some of the couples’ children furthermore evidence their reproductive health and lessen their loneliness. The originally physically weak and mentally sensitive protagonists also surpass the healthy and repressive characters or overcome the pressure imposed by them. Crimsworth successfully manages his own school, while his brother Edward struggles with his business. Jane Eyre survives the nervous attack in the red room, her malnourishment and unhealthy surroundings at Lowood without contracting typhus or tuberculosis, and her exhausting and starving wanderings after her interrupted wedding, finally to marry Rochester, pushing aside Blanche Ingram with “the loftiest stature” (JE 172), and outlive John Reed, Aunt Reed and St. John. Caroline Helstone finally marries Robert, celebrated by healthy but sometimes patronising and oppressive people such as her uncle, Hortense, and Shirley. Lucy Snowe becomes engaged to M. Paul after her struggle with the “healthy, lively girls” (V 91) of the school and the active and spying headmistress, Madame Beck, who has no grey hair in spite of her age. Agnes Grey visits Ashby Park to console her old charge, Rosalie Murray, now Lady Ashby, who has once annoyed her governess together with her siblings. Helen Huntingdon survives her alcoholic husband and gouty uncle to marry Gilbert. After experiencing several cases of death at first hand, Catherine and Hareton gradually form a bond and outlive Heathcliff, released from his tyranny.

*Wuthering Heights*, the novel in which illness most powerfully determines the plot direction, of all the Brontë novels, demonstrates most typically and vividly the ending which solves the problems present at the beginning. Illness, which continuously leads characters to chaos and tragedy, for the first time functions to create peace and happiness: Hareton’s accidental injury by a splinter in his gun forces him to stay near the fire in the kitchen where Catherine spends much of her time until they form an unexpected intimacy. The ending of the novel also integrates its two narratives into one so that the whole narrative can come to an end. Throughout the novel, Lockwood’s narrative is intersected and contrasted with Nelly’s narrative through illness, whereby Lockwood shares illness experience with the inside story characters in a much less extreme way. He starts to listen to Nelly’s story with “cold” and “shivering” (WH 33) until it reaches the point of Catherine’s return from Thrushcross Grange after her recuperation from the illness caused by the shock of Heathcliff’s disappearance. Lockwood then falls ill and spends four weeks too ill to do anything, before resuming listening to Nelly’s story. When, after one week, he has heard the whole story of some thirty years, he is now “nearer health” (WH 155). In the inside story, by contrast, Catherine is fatally ill with her brain fever. Sharing the same bed in
different times, Catherine and Lockwood show ironical contrasts in their sickroom scenes. She has to suffer her illness in extreme loneliness without care or cure by her husband or her housekeeper who even suspects her of feigning it, whereas Lockwood comfortably stays in bed with Nelly’s nursing and Kenneth’s consultation, killing time by listening to Catherine’s tragedy. When he finishes writing down Nelly’s story, Lockwood is “rapidly recovering strength” (WH 298) and decides to leave the Grange. Nelly’s story, by contrast, reaches the present time where the younger Catherine is widowed, deprived of all her property and still bound to the Heathcliff family. While the younger Catherine entertains Linton Heathcliff with her stories and nurses him in vain, Nelly narrates the story and nurses Lockwood until he recovers despite “the doctor’s prophecy” (WH 298).

When he visits the country about a year afterwards, Lockwood is healthy both physically and mentally: he returns not to escape from society but to visit his friend’s home near Gimmerton. Finding in Wuthering Heights neither the sick resident nor disorder he has once confronted, Lockwood asks Nelly to tell how the house has reached such a recovery and hears about Heathcliff’s unexpected death. Brooks argues in his analysis of Balzac’s La Peau de chagrin that the lack of satisfaction of a desire gives death as the only alternative, but the satisfaction of a desire would also be death, because the realisation of desire diminishes the self of the protagonist and the consuming of narrative desire leads to the end of the narrative. In short, paradoxically, narrative desire is ultimately “desire for the end”. Heathcliff starts to turn weak when his revenge scenario comes near its completion, or, in other words, when he has successfully consumed much of his desire for revenge:

“It is a poor conclusion, is it not,” he observed, having brooded a while on the scene he had just witnessed. “An absurd termination to my violent exertions? I get levers and mattocks to demolish the two houses, and train myself to be capable of working like Hercules, and when everything is ready, and in my power, I find the will to lift a slate off either roof has vanished! My old enemies have not beaten me --- now would be the precise time to revenge myself on their representatives --- I could do it; and none could hinder me --- But where is the use? I don’t care for striking, I can’t take the trouble to raise my hand! That sounds as if I had been labouring the whole time, only to exhibit a fine trait of magnanimity. It is far from being the case --- I have lost the faculty of enjoying their destruction, and I am too idle to destroy for nothing [. . .]” (WH 323).

The dual narrative structure repeats this paradox Heathcliff faces at the end of his revenge plot. When Heathcliff as the origin of disease and disorder of the two families dies, the whole narrative is bound to close itself because its desire for recovery is now fulfilled. In both Lockwood’s and Nelly’s narratives, illness is cured, peace restored, and narrative desire realised and consumed.
When Nelly’s second story finishes narrating Heathcliff’s death, Lockwood has nothing more to listen to, and Nelly has nothing more to tell. What Lockwood can do is to leave Wuthering Heights for good with no anxiety or desire. The time and tone of the two narratives coincide and become reconciled with each other after overcoming metaphorical and literal illness and enter into an atemporal phase where the younger Catherine and Hareton might develop another story.

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The analysis of the relationship between illness and the plot in the Brontë novels has shown how the three sisters share the same use of illness as a plot-developing device by opening their narratives with orphaned protagonists’ weakness, then creating illness-prompted encounters and reunions in the middle, and finally solving the problem of illness and loneliness at the end of the narratives. The analysis has also demonstrated the three sisters’ different employment of illness. Emily Brontë creates the framework of her novel through illness, and within both framing and framed narratives, apart from the younger Catherine’s trivial illnesses in her childhood, all the illness episodes directly develop the plot. Illness often harms the health of, or even kills, those who nurse the sick. Charlotte Brontë uses illness as the most powerful agent to create miraculous but plausible plot changes. Illness first orphans her protagonists and then afflicts them but finally leads them to their well-being, bringing them to their family or family-like figures who nurse them.

Unlike her two sisters, Anne Brontë uses illness not exactly as an easy device to develop the plot in favour of the protagonists, but rather as the index of the potential wholesomeness and virtue of her heroines. Anne Brontë’s novels keep her female characters overall healthy and describe how they solve the problems created by their sick male family members without any of the miraculous effect of illness Charlotte Brontë often gives her survivor-heroines but with their own strength. Marion Shaw argues that Anne Brontë may be a more daring novelist than Charlotte Brontë but the religious cast in her novels perhaps disguises how feminist her heroines and narratives are. Shaw does not particularly indicate Anne Brontë’s representations of illness as reflecting her feminism, but her illness episodes certainly demonstrate, if ‘quietly’, what strength her heroines possess. In this sense, Anne Brontë might be seen as the most straightforward feminist novelist of the three sisters. As Agnes shows her surprise at and contempt for ‘Grandmamma’s use or ‘abuse’ of her own health as conversational topics, Anne Brontë has little idea of letting her heroines regress into or thrive on illness in their struggle for survival.

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2 Brooks 37.
3 Brooks 39.
5 Eagleton argues that, unlike Rochester who was coerced by his father into a marriage of convenience with Bertha, Jane gains liberty by releasing herself from the power-bond of her relatives: *Myths of Power: A Marxist Study of the Brontës*, Anniversary ed. (Basingstoke and New York: Palgrave, 2005 [1975]) 25.
9 Showalter sees the beginning with an all male gathering as a feminine novelist’s attempt at the portrayal of men: *A Literature of Their Own: British Women Novelists from Brontë to Lessing* (New Jersey: Princeton University Press, 1977) 135.
14 A childish handwriting in the margin of printed pages may be seen as another sign of disorder, if books represent the world of order as Frank Kermode indicates: *The Classic* (London: Faber & Faber, 1975) 124-26.
15 Graham 332.
21 Graham 159-61.
22 Eagleton argues that after Old Earnshaw’s death, Catherine becomes ‘a spiritual orphan’ while Heathcliff is a literal one,
23 Jacobs sees the ending as underlining the resolution of violence in Stoneman 82. Gilbert argues that the younger Catherine restores order to the Heights and the Grange by marrying Hareton: *The Madwoman in the Attic: The Woman Writer and the Nineteenth-Century Literary Imagination* (New Haven and London: Yale University press, 1984) 300. If books represent order in the novel, then Hareton’s secret book-collecting and learning to read may indicate his contribution to the house’s restoration of peace.

24 Brooks 52.


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