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# ILLNESS, DISABILITY, AND RECOGNITION IN *JANE EYRE*

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ILLNESS AND DISABILITY pervade *Jane Eyre* according to what seem like typically metaphorical patterns. From the death of Jane's parents to typhus to the loss of Rochester's sight and hand, from minor figures like the unnamed students at Lowood school to the hero and heroine themselves, problematic bodies are repeatedly introduced and then rehabilitated or eradicated from the story in ways that bring presumed deviation under control. Illness tends to suggest the novel's assumption of a progress narrative. When Jane and Helen Burns get sick, for example, their conditions signify at once the problem of institutional corruption (as in families or schools) and the belief that compassion and benevolence will redress that failure, along with the conventional symbolism of the ill as both vulnerable and pure. Other cases, such as Mrs. Reed after her stroke, demonstrate the flip side of the illness dichotomy, where recovery is thwarted by "ill"-will, so that Mrs. Reed's inexorable physical decline manifests her unregenerate attitude and greed. The more static conditions of disability—madness, blindness, and disfigurement (though of course these too are subject to change)—would seem to mock the novel's faith in improvement, being resistant to the salutary effects of care. The troubled bodies of Bertha and Rochester thus call our attention to a different institutional frame-

work, marriage, within whose boundaries the unsightliness of dysfunction can be hidden or recuperated. Fascinated by, and clearly somewhat anxious about, the nature of corporeality, *Jane Eyre* participates in what scholars have cited as a particularly Victorian preoccupation: the porous boundaries of the body, its internal unpredictability, its need for regulation, and its relationship to identity.<sup>1</sup>

Multiple instances of sickness and recovery haunt the novel as reminders of its complicity in the symbolic production of an ableist reality. At the same time, however, *Jane Eyre* reveals the cost of denying or suppressing difference—longing, in moments staged as confrontations with illness and disability, for alternatives. Making use of the psychoanalytic theory of recognition, this chapter argues that Brontë records the possibility of a form of interaction that acknowledges and accepts the frailties of the body. If, as Julia Miele Rodas writes, “disability in Victorian fiction indicates [ . . . ] a desire to experiment with places and roles” (“Mainstreaming,” 373), in *Jane Eyre* that experimentation takes the form of encounters with bodily difference that point toward intersubjective respect. Rochester’s impairments, for example, as perhaps the most notable in the text, have been read as an emasculation whose recovery is signified by the son he can partially see, but they may also be regarded as accidental injuries that have little bearing on his chances for a happy life. The neatly predictable outcome of the novel’s marriage plot suggests that such injuries are intolerable unless compensated by legitimate class and relational status. But in Jane’s concluding avowal that “Reader, [she] married him,” we might also locate hope for an environment in which disability is *neither* hidden nor overly exposed as a way of managing the horror it supposedly represents. Far from covering over the problem of Rochester’s body (and Jane’s, for of course she has been damningly described as plain), marriage makes them at once obvious and inconsequential to relational success.

Such a reading of the central relationship in *Jane Eyre* suggests that the novel, attentive as it is to bodily shape, facial features, and extremities of sickness and injury, renders these as axes of heightened intersubjective possibility, where subjects are tested for their capacity to tolerate and respect. In his discussion of the origins of the novel as entangled with the inception of an able/disabled binary, Lennard Davis claims that “to truly acknowledge the existence of another identity dilutes the general category of identity” (*Bending Over Backwards*, 101). Yet recognition as defined by psychoanalytic theory insists that true acknowledgment of another’s subjectivity is

1. See in particular Frawley; Holmes; Rodas; and Tromp.

possible—indeed, that it is the basis of political and cultural understanding. Jessica Benjamin has described recognition as an intersubjective space in which individuals “bridge difference,” “hold multiple positions,” and “tolerate nonidentity rather than wipe out the position of self or other” (*Shadow*, 107). To “recognize” is to take up a kind of “double position,” in Benjamin’s terms, from which the self maintains a sense of separateness without denying to the other an equivalent freedom of identity and self-expression—or, to put this another way, an individual acknowledges the other as a legitimate subject without losing selfhood to the coercive pressures of sameness. Anomalous bodies, tending to inspire both fascination and fear in the nondisabled and thus forcing the encounter with difference in an exaggerated way, may maximize what Benjamin calls the “continual misfiring of recognition, the very plurality that strains subjectivity” (*Shadow*, 101). But they also demand the hard work of acceptance—not only, or not even, of the apparently monstrous *other* but of the innately strange *self*. Brontë’s novel represents such an ethic of understanding across the boundaries of plurality that is the foundation of recognition.

Representations of disease, disability, or atypical bodies throughout *Jane Eyre* complicate the idea that these are inevitably problematic conditions, rather than being incidental to problems of social arrangement. I use *incidental* in both senses of the word: the afflictions of the body are secondary to or less significant than the problems of this world, but disability is also attendant upon those problems and thus worthy of attention insofar as it underscores the need for social change. This is not precisely equivalent to the so-called social model of disability (articulated by Tobin Siebers, Tom Shakespeare, Paul Longmore and Lauri Umansky, among others)—that disability is a function of cultural, architectural, and sociopolitical arrangement, rather than a medical problem centered in the body—but it seems arguably a precursor of such arguments.<sup>2</sup> In its emphasis on intersubjective regard as a means of disrupting hierarchical binaries of dis/ability, too, the novel seems intriguingly forward thinking, reminding its readers of the need for more engaged ways of thinking about bodies, selves, illness, and relationships.

*Jane Eyre* has often been described as at once a naturalistic and a visionary novel, one whose story must be understood as having an imaginative rather than strictly mimetic logic. In Helene Moglen’s words, “Brontë did not

2. The literature on the move from a medical to a social model of disability—and beyond these to phenomenological and even “posthuman” models—is extensive. In addition to Siebers, Longmore and Umansky, Couser, and Shakespeare, others who have written on this subject include Iwakuma, Hughes and Paterson, and Oliver.

write of what was, but of what could be” (107). Against the text’s unsurprising participation in the structures of normalcy, then, can be set its depiction of what might obtain between people in a world where “irregularity”—a word that recurs frequently in the novel in reference to the shape and symmetry of people’s bodies—does not need to be repaired. In the context of illness and disability, this overlap often takes the form of tension between *reasonable* bodily reactions to circumstance and *unreasonable* psychological reactions either to those bodies or to interpersonal engagement between differently embodied subjects. The novel openly displays troubled bodies—not to make them the intriguing or pitiable spectacles of readerly stare, but rather to return, time and again, to the scene of potential recognition.<sup>3</sup>

### UNCOUPLING THE METAPHORICAL AND THE REAL

Some of the more obvious metaphorical associations of illness are disrupted in discussions of Jane’s parents and Helen Burns. Jane’s clergyman father, for example, who dies administering to the “poor of a large manufacturing town,” would seem to represent a clash between spiritual uprightness and the injurious conditions of industry (21; ch. 3).<sup>4</sup> This situation clearly foreshadows Jane’s future at Lowood School, where she and the other girls will also be exposed to a toxic institutional environment brought about by greed. The illnesses of Jane’s parents and the virtuous Helen Burns thus seem to symbolize the plight of subjects vulnerable to forces greater than themselves, the combined injustices of patriarchy, class hierarchy, and social intolerance. Helen in particular seems an obvious instance of what Cindy LaCom has called the “typically ethereal,” “sexless” and selfless invalid of nineteenth-century English novels (192). In this compacted metaphorical loop, piety is both sign of and compensation for severe illness, which is further cause for devotion (the injustice of sickness made comprehensible through the mechanism of faith); moreover, in different but simultaneous ways, illness and religious fervor make the individual unapproachable, untouchable by average folk whose recoiling from the threat of contagion can be masked as shame in the face of the other’s incomparable goodness.

But to the extent that the novel is critical of the kind of zealous piety voiced by Helen, and later by St. John Rivers, her death as well as that of

3. Garland-Thomson’s *Staring* offers a detailed taxonomy and cultural history of staring and a brief discussion of recognition in terms of specifically visual exchange (158–59).

4. The version of the primary text referred to in this chapter is Charlotte Brontë, *Jane Eyre*, ed. Richard J. Dunn. 2nd ed. (New York and London: Norton, 1987).

Jane's parents suggest that adherence to one totalizing discourse, such as religion, cannot simply be substituted for another, such as industry or class superiority. Innocence and moral purity do not provide existential protection; on the contrary, they seem almost to constitute naïve capitulation to explanatory narratives. "By dying young, I shall escape great sufferings," Helen tells Jane with a kind of abject logic; "I should have been continually at fault" (71; ch. 9). Unlike Helen, who "live[s] in calm, looking to the end" (51; ch. 6), and by implication her clergy parents, Jane is resolutely of *this* world, her sense of indignation and independence trained not on the consolations of the afterlife but on effecting change in the conditions of this life (again, unlike Helen, Jane "questioned" [71; ch. 9]). Jane's very survival, in fact, puts in relief the novel's more realistic politicizing of the deaths of Helen and the Eyres. ("It is possible," as Cindy LaCom argues, "to read disability both literally and as a metaphor that makes meaning" [199].) The living and working conditions Jane's parents and her Lowood classmates have encountered will inevitably take their toll on bodies, and if there is a problem to be solved, it is thus one of systems rather than individuals.<sup>5</sup>

In focusing our attention on the condition of bodies in social and material settings, Brontë situates much of the imaginatively charged work of her story in the threshold space between subjects, a space where recognition can obtain or fail. This relational moment, to quote Benjamin, "corresponds to the political question, Can a community admit the Other without her/him having to already be or become the same?" (*Shadow*, 94). The success or breakdown of recognition between selves thus has consequences beyond those individuals, leading to (because also informed by) attitudes of mutuality and respect or domination and negation within the social group. It is the ambiguous body, Brontë suggests—excessive or depleted, ill or frail, disfigured or disabled—that places these already complex social dynamics at a kind of maximum intensity, forcing a confrontation with difference but also encouraging alternative responses to what might be feared or misunderstood.

To be sure, *Jane Eyre* identifies nearly all its characters in terms of physical attributes, usually with powerful characterological assessments attached to those descriptions, what David Mitchell and Sharon Snyder call the "strict mirroring relationship" of body to subjectivity (*Narrative Prosthe-*

5. Writing of *Shirley*, Torgerson argues that while Brontë's "true empathy is with the plight of the middle class, not the lower classes" (54), the novel nevertheless maps out the possibility for social and public health reform through the metaphor of disease. A similar strategy seems to be at work in *Jane Eyre*.

sis, 58).<sup>6</sup> In juxtaposition, however, those judgments tend more to cancel or contradict each other than to uphold a consistent taxonomy of metaphorical meaning. In the early scenes of the novel, for instance, Jane's body takes on acute symbolic import in contrast to her cousin John, but it is not reliably clear what body types or tendencies mean. In her combination of physical vulnerability and intellectual resistance (manifested in a refusal to "remain silent" [5; ch. 1]), Jane seems representative of the middle classes bridled by a bloated, rapacious caste system, of which John, in turn, is the obvious emblem. Jane spares no rhetorical excess in her account of him: John is "large and stout for his age, with a dingy and unwholesome skin; thick lineaments in a spacious visage, heavy limbs and large extremities. He gorged himself habitually at table, which made him bilious, and gave him a dim and bleared eye and flabby cheeks" (7; ch. 1). His "disgusting and ugly appearance" is part and parcel of his violent nature (8; ch. 1); as Jane explains, "He bullied and punished me [ . . . ] continually: every nerve I had feared him, and every morsel of flesh on my bones shrank when he came near" (7; ch. 1). It could hardly be made more apparent that John's spoiled arrogance signifies the appetites, the privileges, of a system run amok.

Yet what does it mean that John also "ought now to have been at school; but his mamma had taken him for a month or two, 'on account of his delicate health'" (7; ch. 1)? Is delicate health not the particular burden of the morally good? Perhaps the difference is maternal coddling as opposed to orphanhood. Perhaps sickness is always the sign of untenable social relationships and beliefs about social value. Here again, bodily excess and extremity, however symbolically they point toward anxieties beyond themselves, are also literal. John's health, like that of Jane's parents or Helen Burns, is embedded in habit and the accidents of circumstance; surrounded by food and opportunity, John indulges himself, as Helen, weakened by deprivation, lacks the physical resources to withstand tuberculosis. Both are caricatures of inequity, yet neither is only that, since their respective physical conditions are also unremarkable in the context of the material worlds they inhabit. Jane, too, reminds us that there is no inevitable correlation between spiritual and physical "health," between the outline of the body and that of the "self," for while we might expect her to appear self-restrained and temperate in order to accentuate the symbolism of her brutish cousin John, she is instead a set of apparent contradictions: feisty, plain, subject to prolonged "absence" through illness, audacious, and per-

6. On the role of phrenology in *Jane Eyre*, see Mitchell and Snyder, *Narrative Prosthesis*, *passim*; Torgerson (1–17); Pickrel (167); and Donaldson ("The Corpus of the Madwoman," 103).

sistent. What, if anything, is thus inarguably good or bad in these physical representations? Jane's story repeatedly returns us to the possibility of embodiment simply being, rather than representing some puzzle that needs to be solved.

*Jane Eyre* also interrupts a stereotypical slippage between facial features and physique and temperament or psychology. Beauty may be fetishized, as when, for example, Jane extols the "perfect beauty" of Rosamond, that "earthly angel" (319; ch. 31). Yet beauty is also problematized by unexpected combinations of body and self. Ultimately, beauty guarantees characterological goodness no more than ugliness is the sure mark of a sullied soul. Neither Blanche Ingram nor St. John Rivers, both of whom have what Elizabeth Donaldson calls "classically beautiful bodies" ("The Corpus of the Madwoman," 103), is a particularly pleasant or forgiving person, and when Miss Abbot remarks that if Jane "were a nice, pretty child" she might be better cared for, the error is clearly Abbot's rather than Jane's (21; ch. 3). John Reed is ugly, but so is Rochester. In contrast to these two, it might seem surprising that Mrs. Reed, Jane's formidable aunt, is described as unexpectedly average: she is "stout" but "not obese," of "sufficiently regular" features, and with a "constitution [as] sound as a bell—illness never came near her" (30; ch. 4). "Robust" and "strong-limbed" as she is, Mrs. Reed exhibits neither the repugnant physicality of her son John nor the exaggerated beauty of her daughter Georgiana—who, in turn, with "her pink cheeks and golden curls, seemed to give delight to all who looked at her, and to purchase indemnity for every fault," though she is really no less despicable than her brother (12; ch. 2). Perhaps most unexpected are Brocklehurst's remarks before the assembled students at Lowood; he notes that "no signal deformity points [Jane] out as a marked character. Who would think that the Evil One had already found a servant and agent in her?" (57; ch. 7). But in so observing, the manager of Lowood unwittingly refutes his own belief in the metaphorical properties of body feature. With subtle irony, Brontë has one of her more detestable characters articulate a central principle of the novel: that the signs of the body bear no stable relation to personal character.

## WHEN RECOGNITION SUCCEEDS OR FAILS

The novel thus suggests that while its characters are obsessively focused on physical features as manifestations of interiority and, by extension, social value or worth, they are not particularly accurate in their assessment of those metaphors. What are the implications of such inaccuracy for the

attainment of recognition between selves when that encounter is fraught by anxiety about or intolerance of illness or disability? Bodies may matter to interpersonal engagement in the story, but do they matter in predictable ways?

As feminist readings have emphasized, one of the more significant relationships in *Jane Eyre* is between Jane and herself. She is described throughout the novel, and by different sources, as “strange,” but she initiates this epithet herself, during her banishment to the so-called red-room (10; ch. 2). In a mirror-moment that precedes the “species of fit” that renders her unconscious (15; ch. 2), Jane encounters a “strange little figure there gazing at [her], with a white face and arms specking the gloom, and glittering eyes of fear” (11; ch. 2). This “tiny phanto[m], half fairy, half imp” seems an obvious symptom of Jane’s psychological struggle with her circumstances, an emanation of both her anger and her sense of powerlessness in the face of the Reeds’ cruelty (11; ch. 2). The vision is also, I think, a mark of Jane’s inability to recognize herself as a legitimate, legitimately embodied, subject. “I was a trifle beside myself,” she says; “or rather *out* of myself” (9; ch. 2). The misrecognition has partly to do with being at such odds with her relatives—in her words, “I was like nobody there,” “a heterogeneous thing” (12; ch. 2). That anxiety about unlikeness is here experienced as dissociation from the image in the mirror; with the insult of a wound inflicted by John Reed still stinging on her body, Jane cannot reconcile her outrage at being wronged with the horror of her physical and emotional vulnerability.

At the same time, of course, readers will understand that heterogeneity is precisely what differentiates Jane from others in the best sense, allowing her to be more flexible and tolerant, less rigidly didactic or opinionated. Her failure to take in her reflection as herself—a failure rendered in terms of bodily anomalousness, of being “strange”—is thus a missed opportunity to make contact with the diverse and less familiar parts of herself. It seems important that Jane’s first vivid experience of self-reckoning takes the form of this frightful misrecognition, as if to insist on the powerfully internalized effects of others’ regard. The problem here lies not so much in a need to integrate the contradictions of subjectivity into a unified “whole” (remembering the Victorian connection between a “whole” body and a “wholesome” soul [LaCom, 190]) but rather in Jane’s inability to “contain shifting and conflictual versions of self” (Mitchell, *Hope*, 105). From this perspective, the mirror-moment is significant less because it reveals Jane to be split, her frustrations “acted out” through projection (the standard reading of the scene since Gilbert and Gubar), than because it points toward the possibility of sustaining the tensions and contradictions of selfhood—its strangeness

and irregularity—*without* collapsing these through the negation of sameness. If this moment is originary, ushering Jane toward eventual realization of her adult selfhood, I would argue that the task it underscores is not one of subduing bodily unruliness in the service of psychological “health,” but instead learning how to maneuver between subject positions that do not necessarily adhere to an orderly, unstrange whole.

Granting Davis’s point that Jane’s oft-remarked and lamented plainness makes her an unusual nineteenth-century heroine (*Bending Over Backwards*, 96), we might also consider that what really makes Jane “strange” is her refusal to acquiesce, to succumb to others’ desires or authority. But could *strangeness* not also seem plain—that is, does the novel not reclaim the anomalous from the borderlands of recognition? The spectacle of Jane’s night in the red-room, her nervous shock and subsequent convalescence, for instance, culminate in a rather underwhelming manner: “no severe or prolonged bodily illness followed this incident” (16; ch. 3). We might again notice a foreshadowing in that this episode prefigures Jane’s later period of illness at the home of the Riverses, which is also depicted as an explicable if not exactly ordinary event, given the extremity of her hunger and exhaustion. So, too, does the graphically described, piteous state of little girls’ hands and feet at Lowood, indicative of their material conditions, resolve somewhat naturalistically: “our ungloved hands became numbed and covered with chilblains,” Jane’s “feet inflamed,” and the act of “thrusting the swelled, raw, and stiff toes into [her] shoes” is “torture” (51–2; ch. 7); but later, those same “wretched feet, flayed and swollen to lameness by the sharp air of January, began to heal and subside” (65; ch. 9).

What is suggestive about such scenes is that their dramatic force has to do less with the display of strange bodies, bodies under duress, than with the potential for engagement between individuals and contact among bodies. Importantly, no illness or pain or impairment is represented as fully singular or solitary, in large part because the travails of the body (including those of Bertha Mason Rochester) so often necessitate caretaking. Beth Torgerson has suggested that “Brontë’s personal experience of illness as both caretaker and survivor enriches her use of illness as motif” (15); from a disability perspective, care has an ethical dimension that extends the orthodox feminist critique of caretaking as an unpaid form of labor for which women, nearly exclusively, are held responsible.<sup>7</sup> If the aftermath of Jane’s night in the red-room seems in one sense vaguely anticlimactic, it is also marked by the “inexpressible relief” Jane feels in the presence of the apothecary Mr. Lloyd,

7. On this point, see Lloyd. On the ethics of caretaking, see Engster.

in addition to Bessie's "softly" tending to her need to sleep, eat, and drink (15–16; ch. 3). And if her obviously metonymic feet suffer cruel neglect at the Lowood school, at Thornfield they are solicitously looked after by Mrs. Fairfax: "If you have got your feet well warmed," she says, "I'll show you your bedroom" (85; ch. 11). It is as if each episode emphasizes the possibility of intersubjective regard to imply, when that possibility goes unrealized, that the problem resides not with corporeal excess or insufficiency but with an emotional, psychological incapacity that derives from the pressures of ideology and discourse.

Mrs. Reed again provides an instructive instance. On the night before Jane's departure from Gateshead, Mrs. Reed approaches Jane in bed to ask that she be remembered as Jane's "best friend," but Jane responds with silence, "turn[ing] from her to the wall" (35; ch. 5). Later, after Mrs. Reed's stroke, the scene is reversed: standing beside the bed, Jane "fasten[s]" her hand on her aunt's, but Mrs. Reed "[takes] her hand away" and "turn[s] her face" away as well (202; ch. 21). The chiasmic repetition in these scenes seems to juxtapose wellness and disease, virtue and vice—the young girl's healthy, if unnurtured, body houses a pure soul; the older woman's impaired body, grown "stout" and "not strong," weakened by stroke and further diminished by an "apoplectic attack" brought on by the shock of John Reed's suicide, has been stricken for her sins (195–96; ch. 21).

There is, however, a more complex discontinuity at work, having to do with opposing motives or psychological intent exhibited as a more or less open interactional style. It is the obvious *gestural* tension between these scenes that matters, inviting us to gauge not better or worse bodies in relation to honest or dishonest selves but rather more or less capacity to approach boundaries, experience generosity, and receive expressions of care. The crucial difference is one of recognition rather than relative health. Mrs. Reed extends to Jane an inauthentic declaration of affection and in turn rebuffs a genuine willingness to forgive past betrayals; it is only Jane who can say, "I had once vowed that I would never call her aunt again; I thought it no sin to forget and break that vow now. My fingers had fastened on her hand [ . . . ] had she pressed mine kindly, I should [ . . . ] have experienced true pleasure" (202; ch. 21). Impairment and physical trauma do not make Mrs. Reed more or less spiteful and mean; on the contrary—and despite the rather dramatic piling up of her bodily predicaments—they seem simply to coincide with an *ongoing* nastiness in her character.

Perhaps the most obvious instances of the breakdown of recognition involve Bertha. When Rochester explains to Jane the sordid history of his connection to the Masons, he delivers a string of demeaning epithets that

exaggerate his difference from that family as if he were violently expelling from himself any vestige of what they come to represent, which is being “mad,” “lunatic,” “a complete dumb idiot,” “feeble,” “common, low, narrow,” “coarse and trite, perverse and imbecile,” “violent and unreasonable,” “absurd, contradictory,” “pigmy” in intellect, and “giant” in propensity (and that is just one page [269; ch. 27]). This is no exciting “brush with otherness” that Benjamin describes as pertaining to the playful and “complex interaction” between selves responding to, translating, and recognizing each other, but rather a stark projection of “all that is bad and dreaded” onto the Other (*LSLO*, 87, 86). As is well understood, Rochester responds to the retroactive “degradation” of his desire for Bertha through radical repudiation, “conceal[ing] it” and its embodiment in the “goblin’s cell” of his attic (272; ch. 27). To put this in terms of intersubjectivity, Rochester’s inability to “own—assume responsibility for containing—” his own desire and destructiveness forces the mechanisms of splitting and subjection, and what Benjamin calls “the barbarism of incorporating the Other into the same” (*Shadow*, 99). Confining Bertha in the upper reaches of his own English manor house, Rochester allows himself the illusion of “the self-enclosed world of the subject,” nursing his narcissistic wounds through guilt, shame, and the pleasures of confession (*Shadow*, 98).

The other, more prosaic “nurse” in this context, Grace Poole, fails Bertha in a less dramatic way but one that returns our attention to the importance of caretaking. Rochester calls Grace a “good keeper” despite the fault of her drinking (272; ch. 27), but later, when we learn along with Jane of the events that led to the Thornfield fire and Bertha’s death, Grace emerges as *careless*, negligently lax. The innkeeper too describes Grace as “an able woman in her line, and very trustworthy” except for the “one fault—a fault common to a deal of them nurses and matrons—*she kept a private bottle of gin by her*”—but he goes on to assert that while such a habit may be “excusable” given a nurse’s “hard life [ . . . ] still it was dangerous” (376; ch. 36). Since the proximate cause of Bertha’s nocturnal excursions is that Grace Poole falls asleep after drinking, we might attribute at least some of the destruction that ensues to a neglectful watcher. But this is not to lay the “blame” for Bertha’s death at Grace’s doorstep. Grace Poole is merely the passive and occasional guardian of a “female grotesque” (to use Mary Russo’s phrase) for whom Rochester, at least in one instance, plays a kind of barker, pulling aside the curtain to an astonished audience on this “strange wild animal [ . . . ] covered in clothing,” a “clothed hyena” with “hind feet” (258; ch. 26). Such language exactly replicates the kind of advertising that compelled Victorian spectators to exhibitions of human oddities to recon-

firm their status as properly arrayed and bounded selves, if also to experience the (perhaps unconscious) thrill of proximity to their own mysterious and unpredictable corporeality.<sup>8</sup> Rochester makes just this type of conflation obvious in his grindingly ironic juxtaposition of “*my wife*” and “this young girl” (258; ch. 26). In the horrified “retreat” of the gathered polite company, anything like sympathetic “affiliation,” to use Rebecca Stern’s word, collapses entirely.

If both Grace Poole and Rochester demonstrate the breakdown of recognition in their relations with Bertha, is there anyone who does—or could—succeed? Or does Brontë suggest that madness, unlike ailments more conventionally understood to be of the body, precludes the very subjectivity upon which the notion of recognition depends? The argument that *Jane Eyre* repeatedly interrupts stock associations between atypical bodies and oddities of personality or sins of conduct may be complicated by the representation of Bertha to the degree that she is identified as morally suspect from the start, her psychological condition presented as the exaggerated consequence of her inordinate fleshly appetites, her refusal to curtail her body’s willful behavior. In feminist readings, Bertha becomes Jane’s “truest and darkest double” (Gilbert and Gubar, 360), the embodiment of Jane’s “anger, female sexuality, and frustration” (Torgerson, 61). More intriguingly, Rodas has pointed out the extensive similarities between Bertha and Rochester, arguing that a “migration” of identity occurs between wife and husband (“Brontë’s *Jane Eyre*,” 149). But if such analyses seek to retrieve Bertha from the status of extreme Other by locating the putative evidence of her madness in supposedly “healthy” characters, they may also risk a kind of *scholarly* breakdown of recognition, depriving Bertha of separateness as a character in her own right.

Importantly, in the “spectacle” scene invoked above, Jane does “recognize” Bertha. She tells us that when Bertha “parted her shaggy locks from her visage, and gazed wildly at her visitors,” she “recognised well that purple face—those bloated features” (258; ch. 26). Literally, she has seen this face before, but her language also implies that she understands Bertha to be a separate subject; Bertha’s “features” are entirely her own, not metaphorical extensions of Jane. The failure of relational recognition might then reveal that Jane is not always the good caretaker she proves herself else-

8. On the exhibition of anomalous bodies in both Victorian England and nineteenth- and early twentieth-century America, cf. Tromp, Garland-Thomson’s *Freakery*, Altick, Graham and Oehlschlaeger, Bogdan, and Fiedler. What Garland-Thomson calls “baroque staring” would also characterize the horrified but compelled looking at Bertha of the scene cited above (*Staring*, 50–51 and passim).

where to be (Gilbert and Gubar have also likened her to the negligent Grace Poole [351]). For her part, Bertha, though violent in her reactions, is clearly quite cognizant of the events transpiring in the house below her. Would she be “capable” of the kind of recognition at issue here if others did not react to her by recoiling? This is not to ignore the extremity of her acts but to understand them in a certain context, where the problem is interactional rather than individual and pathological. In this, too, *Jane Eyre* might be said to intimate a basic tenet of disability scholarship concerning mental illness (argued perhaps most trenchantly by James Overboe), that designations of “madness” serve the perpetuation of narrowly defined conceptions of personhood.<sup>9</sup>

Against the failed intersubjective situations of Bertha’s experience in Rochester’s attic and Mrs. Reed’s deathbed episode, as if to emphasize their inadequacies, the novel juxtaposes Jane’s period of convalescence with the Riverses. Jane’s collapse at the siblings’ door marks an overdetermined threshold moment. In a self-imposed state of homelessness, weakened and “starving” like a “dog,” Jane is once again unrecognizable to herself, not just strange but a “stranger” (288; ch. 28). Through the window at Moor House, she spies Diana and Mary—“ladies in every point” (292; ch. 28)—and overhears them studying German and conversing. Inside are education, gentility, and domestic organization; outside is a harsh world in which Jane is an “outcast” (290; ch. 28) without connection to name, place, or “friend” (287; ch. 28). Jane—her very existence as an embodied subject—hangs in the balance, in a most extreme state of peril, “trembling, sickening; [ . . . ] in the last degree ghastly, wild and weatherbeaten” (296; ch. 28).

What brings Jane back to “herself”? Her situation is importantly distinguished from Mrs. Reed’s (or from her own prior experience at Lowood) again not so much by sickness as by environment of sickness and quality of care. Although the housekeeper Hannah initially reacts with suspicion, rebuffing the person she calls “a beggar-woman,” St. John addresses her as a “young woman” and ushers her into his own home ahead of himself in a gesture of mannered politeness (296; ch. 28). Hannah “exclud[es],” St. John “admit[s]” her; Diana and Mary then go further, the one holding bread soaked in milk to Jane’s “lips,” the other removing Jane’s bonnet and helping her to eat (296; ch. 28). With each successive action, physical distance between the siblings and the “stranger” narrows, until Diana’s face is near enough that Jane can feel “her hurried breathing” and Mary’s hand “lifted her head.” The willingness to touch is crucial in that it breaches the

9. In addition to Overboe, see also Ingram; Wilson and Beresford; and Lewis.

radical separateness that maintains what the novel elsewhere presents as distinct identity categories: the privilege of wellness against the untouchables of disease and disability. Writing about touch in the context of disability, Janet Price and Margaret Shildrick argue that “touch *frustrates* hierarchy,” because it “crosses boundaries rather than creates distance” (“Bodies Together,” 69).<sup>10</sup> Touch can thus be read as an ethically inflected act of engagement that has the power to disrupt devaluing fantasies of autonomy, superiority, and normalcy. In this sense, Jane’s recovery has as much to do with making contact with others, with the sisters’ readiness to touch, converse, and care, as with the three days she spends “motionless” in a “torpid” sleep (298; ch. 29).

Slumped in the shadows after Hannah has “clapped” and “bolted” the door (295; ch. 28), Jane resigns herself to dying. But once she has “crossed the threshold of this home,” “and once was brought face to face with its owners,” she says, “I began once more to know myself” (297; ch. 28). Selfhood is defined here as requiring acceptance as a legitimate subject from a community of peers (precisely what is denied Bertha); when the siblings interact with Jane, rather than fearing or reviling her, Jane is restored to “[her]self,” to recognition or self-knowledge. More radically, Jane is reborn at Moor House when she renames herself as Jane Elliott. It might seem that bodily trouble then becomes meaningful only insofar as it can be survived and transcended, that the extremity of hunger and fatigue Jane experiences matters (or can be endured) only because it brings her to this act of naming and determining herself, away from the overbearing effects of Rochester’s attentions but within the confines of her proper class and domestic position. But Jane’s entrance into Moor House has another significance, in that it puts each of the characters into contact with the *strange* as much as with the familiar. Despite but also because of the presence of the unknown, Jane and the Riverses achieve recognition, demonstrated by the trust and respect that allows them to forge relationships and that defines intersubjective touch.

### READING THE “IRREGULAR”

While Jane lies in bed recuperating, she overhears St. John, Diana, and Mary discoursing about her physical appearance. In contrast to Mr. Brocklehurst, who once expressed surprise at the absence of “deformity” in one so clearly depraved as Jane Eyre (57; ch. 7), St. John remarks that Jane’s

10. For more on this topic, see also Shildrick; Chinn.

“unusual physiognomy” is “certainly *not* indicative of vulgarity or degradation” (298; ch. 29; emphasis added). Whatever recourse the siblings have to phrenology in assessing Jane’s character, illness is also a contributing factor in how they react to Jane’s looks: They call her “emaciated, pallid,” “fleshless and haggard,” and one sibling remarks, “when in good health and animated, I can fancy her physiognomy would be agreeable” (298; ch. 29). At the same time, they each call attention to an underlying continuity in Jane’s face that derives from the structure of her features rather than the transient effects of sickness. St. John says, for example, that “ill or well, [Jane] would always be plain”—though in his coolly rational way this does not entirely sound like an insult—and one of the sisters goes further: “She has a peculiar face [ . . . ] I rather like it” (298–99; ch. 29).

It seems provocative that illness is represented as negligible in its impact on a woman’s attractiveness, and also that whatever assumptions about character the siblings make on the basis of Jane’s “plain” and “peculiar” features, they nonetheless see something appealing there. Brontë may have held to the precepts of phrenology, but scenes like this also imply that her consideration of bodies is not so restrictively determinative, perhaps even locating “character” in some altogether other place—such as the threshold space of recognition between selves. It is part of the novel’s subtly contestatory nature to suggest that what makes people who they “are” derives from *how* they are in their intersubjective relation with others. This might put some pressure on our understanding of the novel’s references to physiognomy, to the degree that what so often becomes foregrounded is the interpretive moment more than cranial or facial structures themselves. To consider the source of at least some of *Jane Eyre*’s most explicit expressions of the practice, for example (such as the insufferable Lady Ingram’s announcement that she is “a judge of physiognomy, and in [Jane’s] [ . . . ] sees all the faults of her class” [155; ch. 17]), is to remember that bodies become meaningful in a discursive and ideological field sustained not by its truthfulness or accuracy but by a generally agreed-upon investment in its material benefits. The basic tenets of disability theory hold that the meaning of bodies is interpreted, not innate, and that bodily anomaly has currency only insofar as it is used to maintain the culturally powerful category of normalcy.

And yet the novel overall consistently problematizes the boundary between “outsider” bodies and “normate” bodies in part because so many bodies move in and out of states of health, injury, illness, damage, and because the categories of *normal* and *irregular* come under such scrutiny. Both Jane and Rochester, for example, are described in terms of their unbalanced features, but the novel complicates easy assignation of motive, moral

character, or social worth based on those features. When Jane laments that “[she] felt it a misfortune that [she] was so little, so pale, and had features so irregular and so marked” (86; ch. 11), we might balance that self-judgment with her many fortunes in the story—or, to avoid the compensatory logic of such an equation, simply understand the statement as the hyperbole of a young woman who has been well schooled in the story of her insufficiencies. Rochester’s features have an equally prominent role in the text. Jane reports that “he had a dark face, with stern features and a heavy brow” (99; ch. 12); she comments that his face “was dark, strong, and stern” (101; ch. 12), that he is not “graceful” (105; ch. 13), and twice Jane remarks on the fact that he is “broad-chested” (105; ch. 13) or of “considerable breadth of chest” (99; ch. 12). According to Jane, Rochester’s eyes are “great, dark” (and she repeats this twice in rapid succession as well, 115; ch. 14). If nothing else, so much repetition tells us that Jane is paying very close physical attention to her employer, but there seems no clear or inevitable meaning attached to any of these characteristics.

While forthright Jane does tell Rochester she doesn’t “think [him] handsome”—in fact, she says she is “sure most people would have thought him an ugly man”—her descriptions of him emphasize mood or facial *expression* more than facial structure (115–16; ch. 14). For instance, “his eyes and gathered eyebrows looked ireful and thwarted just now” (99; ch. 12), his “full nostrils” indicate “choler,” and his “mouth, chin, and jaw” are all “grim [ . . . ] very grim” (105; ch. 13). Those “great, dark eyes,” too, are “not without a certain change in their depths sometimes” (115; ch. 14). The focus on body language in these moments reminds us that corporeality signifies in the subtlest of ways, and that interpretation not only happens all the time but manufactures complex states of mind out of minimal information. It also underscores the bodily conversation taking place between people; as Jane observes Rochester’s expressions and attempts to understand what they mean, and he carefully observes Jane’s attentions to him to determine her interest, their relationship evolves on a gestural and largely unarticulated level. Such moments call attention to the dynamics of psychological filtering—that is, we perceive what people look like by what we understand their emotional states to be or, maybe more urgently, by how emotional they make us feel. Subjects enter “the transitional space of communication” constantly, and always with the possibility for understanding another’s mood, needs, personal history, grief, pain, and desire (Benjamin, *LSLO*, 169).

We might then compare the Rivers’ physical assessments of Jane with Rochester’s fanciful characterizations of her as otherworldly. In his description of their first encounter on the road near Thornfield, Rochester asserts

that Jane has “rather the look of another world.” The sight of her makes him think “unaccountably of fairy tales,” and he wonders “whether [she] had bewitched [his] horse” (107; ch. 13). Well into the novel, Rochester is still likening Jane to one of the “good genii” (133; ch. 15), “a dream or a shade” (215; ch. 22), an “almost unearthly thing” (224; ch. 23), a “pale, little elf” and “mustard-seed” (226; ch. 24), “a very angel” (228; ch. 24), his “cherished preserver” (133; ch. 15) and “ministrant spirit” (179; ch. 19), “‘provoking puppet,’ ‘malicious elf,’ ‘sprite,’ ‘changeling’” and so on (241; ch. 24). Paul Pickrel contends that Rochester “delight[s]” in thus naming Jane “when he knows her better” (173), but these are hardly actualizing terms of deep familiarity or understanding; on the contrary, such epithets, affectionate and even admiring as they may seem, reduce Jane to an anomalous half-human, a magical, diminutive being who lacks substance. Indeed, Rochester’s language explicitly invokes that of Jane’s own description of the “spirit” figure she once saw in the mirror, the figure that reminded her of stories told by Bessie in which “tiny phantoms [ . . . ] com[e] out of lone, ferny dells in moors, and appea[r] before the eyes of belated travelers” (11; ch. 2). Confining Jane to the pages of those fairy tales, Rochester fails to recognize Jane in both a literal and psychical sense, revealing that his opinion of her is sometimes as faulty and dissociative as her own.

Recognition is by no means an inevitable or easily achieved state of engagement between people, and in *Jane Eyre*, even the most apparently “good” characters (such as Jane herself) sometimes fail to grant a legitimate subject position to others when bodily distress seems to amplify difference. Although the Rivers siblings, for example, in contrast to Rochester, seem to engage in frank appraisal of Jane’s relative assets, identifying her through material clues such as clothing or accent rather than projecting their needs onto her, it could also be argued that they only fully accept Jane insofar as she seems—by those very material markers—to comply with the expectations of their social world. (As one of the sisters remarks, “She is not an uneducated person, I should think, by her manner of speaking; her accent was quite pure; and the clothes she took off, though splashed and wet, were little worn and fine” [298; ch. 29]). Unlike the Riverses, Rochester never engages with Jane in episodes of sickness that manifest her body’s inconsistency and need for care, and he is guilty of reducing her to a spectral emanation in the sway of fantasy. Jane makes her own mistakes, falsely elevating Rochester to an “idol” (241; ch. 24). Yet these “irregular” characters do find each other across the threshold of their respective differences. It is “the process of recognition,” as Benjamin writes, that “breaks up” the mechanism of projection and “modifies omnipotence” (*LSLO*, 86). “I

never met your likeness,” Rochester tells Jane, admiring rather than despising her uniqueness (229; ch. 24), and at no point does he attempt to tame the “strange” that she consistently represents.

## ALTERNATIVE CONCLUSIONS

If Rochester does, however, also seem to revel in the power struggle of romantic gaming and to want to keep Jane tethered to him, “figuratively speaking,” with a chain (238; ch. 24), what happens to address, to redress, the imbalance between its protagonists? Perhaps the obvious answer is, disability happens. As Gilbert and Gubar put it years ago, it is Rochester’s blinding that levels the field: “when both were physically whole they could not [ . . . ] see each other because of the social disguises [ . . . ] blinding them, but now that those disguises have been shed, now that they are equals, they can (though one is blind) see and speak” (368). Such a formulation insists on disability as just the kind of “narrative prosthesis” that Mitchell and Snyder cite; without some diminishment in status, this “surface manifestation” (*Narrative Prosthesis*, 59) on his body, there is apparently no way to register the readjustment of Rochester’s psychological position vis-à-vis Jane. Gilbert and Gubar construe embodiment in the most conservatively metaphorical way, with disability and scarring figured as loss of “wholeness,” sight as the privileged mechanism of psychological understanding, and blindness (according to the blindness binary) as ignorance and insensitivity, intuition and insight. Disability is the threshold moment—nothing between Jane and Rochester can remain the same after its calamitous transformations—but compensation arrives (“*though* one is blind”) in their rapprochement as “equals.”

Yet Gilbert and Gubar go on to complain that while *Jane Eyre* seems to announce the possibility of a “democratically equal” marriage (354), by the end of the novel that “optimistic portrait of an egalitarian relationship” is effectively banished (369), its viability interrogated by the remote and seemingly asocial setting of Ferndean. This suggests not only that “such egalitarian marriages as theirs are rare, if not impossible” (369) but also that the very injuries they present as sufficiently mitigating Rochester’s domineering ways also make him unfit for society; the broken man and his improperly independent wife must retreat to the woods. David Bolt has taken to task the “classic [feminist] exposition” of Jane’s culminating empowerment for its complicity in denigrating disability (269); the ways in which Jane interacts with the blinded Rochester—gazing upon him, guiding him by the hand,

later seeing “for” him—equate female authority with Jane’s visual advantage. Furthermore, Bolt contends, in restoring sight to one of Rochester’s eyes, “the conclusion of *Jane Eyre* [ . . . ] endorses the ocularcentric belief that a person cannot live happily ever after without sight” (285). The fulfillment of Jane’s subjectivity, from this perspective, comes twice at Rochester’s cost: first blinding him to grant her specular authority, then “sacrific[ing]” the blindman to restore visual dominance.

If the ending of *Jane Eyre* seems to fail its critics in these different ways, I would propose that continuities of plot also *disrupt* the ways in which disability seems either the necessary conduit toward feminist parity or a reen-trenchment of ableism. Donaldson protests that “when madness is used as a metaphor for feminist rebellion, mental illness itself is erased” (“The Corpus of the Madwoman,” 102), and, by a similar logic, when Rochester’s injuries are used as metaphors for emasculation on one hand or magical healing on the other, disability is erased. If, however, we read those injuries in the context of recognition and the novel’s sustained interest in challenging too quick assessments of subjectivity based on bodily traits, it becomes possible to understand the end of *Jane Eyre* as a continuation, rather than a reversal, of its protagonists’ relationship.

Conventional readings of what happens to Rochester in the burning of Thornfield have a tendency to emphasize loss of sight over the loss of his hand, as well as the pathos of blindness as a signifier of his social and sexual weakening. As Martha Stoddard Holmes puts it, “the blinding of Rochester [ . . . ] is melodramatic” (22); disability, she argues, “is melodramatic machinery, a simple tool for cranking open feelings” (3). But it seems worth remembering that well before he becomes “[a] poor blind man, whom [she] will have to lead about by the hand,” “[a] crippled man [ . . . ] whom [she] will have to wait on,” bearing his “infirmities” and “deficiencies” (Brontë, 392; ch. 37), Rochester has repeatedly put before Jane the fact of his own “ugliness,” his “deformities” (127; ch. 15). And though Bolt argues convincingly for the unequal dynamics inherent in Jane’s staring at Rochester in his blindness, we might remember that Jane has been staring at Rochester all along, as evidenced by the boldly delivered *blazon* she delivers when she falls in love and tells us that “beauty is in the eye of the gazer” (153; ch. 17). To quote Janet Gezari, the novel “reconceiv[es] sight so that the very terms subject and object are false to the experience of Jane and Rochester” (68). Indeed, admitting that Rochester’s “colorless, olive face, square, massive brow, broad and jetty eyebrows, deep eyes, strong features, firm, grim mouth—all energy, decision, will,—were not beautiful, according to rule,” Jane singles out his “pith” and “power,” his “interest” and “influence,”

as Rochester's most appealing characteristics (153; ch. 17). The "irregularity" of their looks is precisely what attracts each to the other, and the novel seems to work hard to establish disfigurement and disability not as a traumatic turning point that separates prefire Rochester from the enfeebled man for whom Jane's love is really a form of pity but rather a continuum of bodily types and aspects that have little to do—but also everything to do—with their love.<sup>11</sup> Such structural continuity works against the notion that disability marks a breach in the forward-motion of a life. On the contrary, these two discordant bodies come together throughout the novel.

Similarly, Jane neither heals Rochester nor saves him—not just in the magical or fantastical way in which he construes her effect on him but also the recuperative sense of narrative closure provided by marriage. To read the final pages of the novel this way is to insist on injury as a crossroads where debility will either sequester Rochester at Ferndean, a helpless and broken man, or require marriage as his only hope of regaining social and masculine position. But by the time Rochester is wounded and blinded by the fire, the novel has long established a pattern of "refusing," to quote Gezari again, "the logic of opposition" (68). Jane is indeed called forth to resume her place with Rochester, but of course, Rochester leans on Jane before his injuries, too ("I've got a blow;—I've got a blow, Jane!' he staggered. [ . . . ] 'Jane, you offered me your shoulder once before; let me have it now'" [179; ch. 19]), just as her willingness to offer her care—at least to Rochester, Mrs. Reed, Adèle, or Helen Burns—never wavers. Does the novel foreground these troubled bodies to repair them within the boundaries of good family and class hierarchies, or does it show us what happens when subjects recognize each other as valuable and worthy of engagement, no matter what the contours or behaviors of their bodies? As Jane says of her interactions with Rochester in the first years of their marriage, *before* he has regained some sight in his one eye, "We talk [ . . . ] all day long; to talk to each other is but a more animated and an audible thinking. [ . . . ] [W]e are precisely suited in character—perfect concord is the result" (397; ch. 38).

Given that *Jane Eyre* entertains a progress narrative based on fantasies of "benevolent" people who can intercede on behalf of the weak, the poor, the downtrodden, the oppressed—as Lennard Davis puts it, "the desire for a cure is also the desire for a quick fix" (*Bending Over Backwards*, 99)—it seems interesting that the novel, so fascinated by the promise of recovery, would end on forms of physical disability and disfigurement that do

11. Torgerson writes that nineteenth-century medicine produced a "new understanding" that health and disease were not "polar opposites" but rather "occurred along a continuum" (13). On scars as forms of disfigurement, see Jeffreys.

not entirely “heal.” A competing narrative throughout the text has to do with the power of a woman who *thinks* about what she wants (75; ch. 10). “Restlessness was in my nature,” Jane tells us; “I believed in the existence of other and more vivid kinds of goodness” (95; ch. 12). It is in this realm of the *what-else* that *Jane Eyre* situates its engagement with forms of recognition and resists the seductive promise of cure. Many critics have reiterated this sense of *Jane Eyre* as a novel invested in changing patriarchal social structures, what Beth Torgerson calls “a little breathing room for [Brontë’s] middle-class heroines” (133). But more than just Brontë’s women are at stake; is there also more room for the anomalous body? When Jane says she “know[s] what it is to live entirely for *and with* what [she] love[s] best on earth” (396; ch. 38; emphasis added), she refers to a man she married when he had not regained sight in an eye, when he had lost the use of a hand—a man she recognized, in effect, both as disabled and regardless of disability. In this she reminds us of the possibility of alternative relationships and states of being, ones in which the oddities and excesses of the body simply take their place alongside other aspects of identity.