Here we offer an analysis of mental illness expressed in the work of a key twentieth century writer: Virginia Woolf. A critical review of her literary legacy allows us to get closer to what might be one of the most intense literary portrayals of illness and its metaphors and, at the same time, to the representations, euphemisms, silences, and monsters depicted in the chapters of her life and in the unique voice of this essential author.

Keywords: illness, literature, writing, Virginia Woolf, women.

■■ INTRODUCTION

Most of the pathologies we suffer are often overburdened with mythology. Since ancient times, speculations about illness present it as an instrument of divine wrath or unknown obscure forces (think, for instance, about the plague that Apollo inflicted upon the Achaeans in the *Iliad* as a punishment for the abduction of Chryses’s daughter by Agamemnon). In fact, any condition considered a mystery at a given moment is perceived as morally suspicious; the name is even omitted in order to avoid unexpected danger – the protagonist’s mother in *Armance*, by Stendhal, is an example of this; she avoids the term *tuberculosis* for fear that uttering it will make her son get worse. Similarly, the evil nature of the word *cancer* leads many people to avoid or hide it, so sometimes it must be understood implicitly in literature (as in Tolstoy’s *The Death of Ivan Ilyich*).

In this work, we journey through the disorders and illness of Adeline Virginia Stephen, better known as Virginia Woolf. Her fiction – but also in her essays, diaries, and memoirs – reveals her profound ability for introspection, but also documents an insider’s perspective of illness, its related states of mind, and psychological highs and lows. This information is complemented with documents from the author’s most intimate circle, who outline her clinical and everyday universe – which are sometimes difficult to separate.

■■ CRISES

There has been ample discussion on Virginia Woolf’s condition. Today experts think she had bipolar disorder with hypomanic dysphoria and severe depressive phases (American Psychiatric Association, 2000; Baldessarini, 2000). She suffered the three major crises of her disease in the summer of 1895, May 1904, and July 1913, although she went through other severe episodes between these periods. She had the first episode when she was thirteen. It left her convalescing for over six months and forced her to stop writing her diary, which she had started four years before. In 1897, after an intense breakdown, she says that life was very hard for her and that she would need elephant hide to endure it, which the writer certainly believed she did not have (Woolf, 1975). The second severe episode, in 1904, was very serious and led to her first suicide attempt. However, the most acute period in her disorder extended from 1913 to 1915. Despite her significant instability, she married Leonard Woolf in August 1912. At the time, she had intense ups and downs, as reflected by her intake of 100 grams of Veronal on 9 September 1913, in another attempt to take her own life.

Her collapses, nightmares, and breakdowns would continue until summer 1915. Then, against all odds, she was quite well until 1936 (Woolf, 1980). In 1941 she again felt rather dejected, and was afraid that her
illness would get worse again and she would have to go to an asylum as on previous occasions. In fact, she was hearing voices – the preamble to a severe crisis – and on 28 March, after writing two farewell letters, one to Leonard and the other to her sister Vanessa, she walked into the river Ouse with her overcoat pockets full of stones. This was her last attempt to take her own life, and this time she was successful. This is a fragment of her letter to Leonard:

Dearest, I feel certain that I am going mad again. I feel we can’t go through another of those terrible times. And I shan’t recover this time. I begin to hear voices, and I can’t concentrate. So I am doing what seems the best thing to do. You have given me the greatest possible happiness. You have been in every way all that anyone could be. I don’t think two people could have been happier ‘til this terrible disease came. I can’t fight any longer. I know that I am spoiling your life, that without me you could work. And you will I know. You see I can’t even write this properly. I can’t read.

(Bell, 1996, p. 226)

■ FREUD AND WOOLF

Sigmund Freud and Virginia Woolf did not personally meet each other until 28 January 1938 in their retirement in Hampstead, a year before Freud’s death and three before she passed away. A few months before, Freud had arrived in England, weak, worn, and tired due to the jawbone cancer he had long suffered. During the visit, Virginia Woolf was excited by the analyst’s sharp intelligence. But as far as we know, the author was never psychoanalysed. At that time her diagnosis was manic-depressive disorder, and the episodes were treated with sleep cures, a balanced diet, and quiet environments, although she barely slept and ate even less.

One must wonder why she was not psychoanalysed, especially given that Leonard Woolf admired the Viennese doctor (the married couple published Freud’s work in Hogarth Press, taking both an economic chance and risking being accused of obscenity by the establishment). While Virginia was always quite unyielding to the ideas of psychoanalysis, she progressively changed after visiting Freud, and the episodes were treated with sleep cures, a balanced diet, and quiet environments, although she barely slept and ate even less.

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■ A HEAVY EMOTIONAL BURDEN

The writer’s existence was marked by events caused by an onerous emotional burden. The first of these loads was the result of her mother’s passing, for which she blamed herself her entire life. She also carried the guilt of the death of her father, Sir Leslie Stephen, and of other people she was close to and who passed away during this period. In this sense, one of the key events was the death of her half-sister Stella from peritonitis while pregnant. This had a severe consequence: Woolf’s father forbade Stella’s name from being uttered again. Having to remain silent about her emotions made it impossible Woolf to accept her grief. The prohibition also explains the subsequent poor relationship between Sir Leslie Stephen and his children. Her father’s death in 1904 created more feelings of guilt and she started hearing voices telling
There has been ample discussion on Virginia Woolf’s illness. Experts now think that she had bipolar disorder with hypomanic dysphoria and severe depressive phases. Above, Virginia Woolf’s portrait, painted in 1902 by George Charles Beresford.

“AT MANY TIMES IN HER WRITING, ESPECIALLY IN HER AUTOBIOGRAPHICAL WORK, WOOLF COMMENTS ON THE NEED TO USE CREATION AS AN ESCAPE FROM ILLNESS”
into pathological mourning after the death of her first husband; even her sister, Vanessa Bell, suffered a serious depressive episode after losing a child while pregnant, and a major crisis caused by her tempestuous relationship with Roger Fry.

WRITING AS THERAPY

At many times in her writing, especially in her autobiographical work, Woolf comments on the need to use creation as an escape from illness. As she said in April 1929, she considered writing to have a life of its own, and to be a witness of something real beyond appearances, which she could put into words, and in this transformation, they lost their power to hurt her. Writing became a way to escape from what distressed her, what horrified her (Woolf, 2013). Faced with a feeling of vulnerability, creation gave her the protection she sought, as a sort of buffer against the passing of time or the relationships with people she held dear, among others. But when that failed, she fell back into the pit.

In this sense, we can read *To the lighthouse* (1996) as a psychoanalysis of sorts, with dialogues she never had, as a space to say everything she could not say in life. Minow-Pinkey (1987) has also suggested that the illness of Septimus, the character in *Mrs. Dalloway*, constitutes a type of verbal insanity, characterised by the loss of the ability to distinguish between signifier and signified, confusing real objects and the words used to refer to them. The disconnect between words and their referents culminates with Septimus’s fall into the black hole of madness after being unable to feel anything for the death of his best friend, just like Virginia, faced with the death of many of her relatives and which was a frequent source of guilt for her.

At the very least, we must note the writer’s preference for water-related imagery, established in her work and her life, as well as her decision to end her life with water. In the pages of some of her books, we observe the relationship between water and nature’s apathy regarding the fate of humans, as well as the

peace of death. We can see this in *Mrs. Dalloway*: «while the sea darkens and brightens beneath him, and the waves which threaten to break, but only gently split their surface, roll and conceal and encrust as they just turn over the weeds with pearls».\(^2\) (Woolf, 2003, p. 61).

In 1925 she wrote a text at T. S. Eliot’s request, «On being ill», to be published in *New Criterion* in January 1926. In April, the New York magazine *The Forum* published a shorter revised version titled «Illness: an unexploited mine». In 1930 Virginia and Leonard recovered the original in an edition by Hogarth Press, giving us a text full of depictions of illness and the recurrent approach to the relationship between body and soul. In fact, in one of the first topics, she touches on the suspicious absence of illness among the great literary leitmotifs, and she wonders why literature does not describe the everyday tragedy for body and mind when we are convalescing. She even comments on the lack of words in the English language to reflect pain:

\[\text{Source: } \text{http://gutenberg.net.au/ebooks02/020099h.html}\]

During her first episode of the disease, the author noted that she heard birds singing in Greek, a scene she would recreate years later in *Mrs. Dalloway* and *The Years*.\(^3\)

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In *Mrs. Dalloway*, possibly one of her greatest works, Virginia Woolf talks about all her concerns at the time: mental health, the patriarchal environment and the role of women in society, and experiencing suicide, among other topics. With the chronicle of one day in June 1923 in the life of Clariss Dalloway, a middle-aged woman who is busy organising a
Her diagnosis was manic-depressive disorder, and the episodes were treated at the time with sleep cures, a balanced diet, and quiet environments, although the author barely slept and ate even less. Photograph of the writer’s room at Monk’s House, in her Rodmell countryside retreat in Sussex (England).

regular party with friends, she also tells the parallel story of Septimus Warren Smith, a depressive veteran and war hero. Through these two characters, Woolf shows the ebbs and flows of the mind, she brings the past and present closer or moves them further away, she uncovers impressions, feelings of angst, memories... She suggests a subjective reality captured by the tireless torrent of sensations accumulated in the mind, of reflections, of the author’s anguish, mixed with Septimus’s parallel storyline and the way he considers suicide as his only way out. Images follow one another in a mental discourse in which words are fundamental – the words spoken, and especially the words considered, a representation of the stream of consciousness.

■ BY WAY OF CONCLUSION

A depressive character can be observed both in her writing and in documents written by her closest allies; a sceptical and hopeless character, with recurrent suicidal thoughts and a fear of people. At the same time, she was terrified of loneliness, very self-critical, had constant feelings of guilt, suffered terrible headaches and insomnia, and was often disgusted by food. Some doctors attributed her health problems to literature. Some even recommended that she stop writing, since the major episodes she experienced, called «waves» and «horror» in the diary, frequently peaked after the great exertion writing represented for her. Virginia Woolf never listened to them and, even though her repeated and long attacks of illness affected her work, preventing her from writing for long periods, she had a strong will to create an admirable, vast, and original body of work. Her obstinate and insightful work method surprised even Leonard, her husband and editor, as we can see in his diaries (Woolf, 1970). However, from our modern perspective, her creative work may have helped Woolf to endure her ordeal; in her fight against her hounding illness, literature was the plank she held onto during her constant sinking. In this sense, we can understand the frequent exploration in her last pieces of work of the complexities of one’s self and her analysis of the characters’ consciousness. How could she stop learning about herself, writing about herself, and reading about herself? How could she abandon her own inner journey?

REFERENCES