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***We're All Mad Here: Mental Illness as Social  
Disruption in Alice's Adventures in Wonderland***

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## Introduction

“But I don’t want to go among mad people,” Alice remarked.

“Oh, you can’t help that,” said the Cat: “we’re all mad here. I’m mad. You’re mad.”

“How do you know I’m mad?” said Alice.

“You must be,” said the Cat, “or you wouldn’t have come here.”

Alice didn’t think that proved it at all; however, she went on “And how do you know that you’re mad?” “To begin with,” said the Cat, “a dog’s not mad. You grant that?”

“I suppose so,” said Alice.

“Well, then,” the Cat went on, “you see, a dog growls when it’s angry, and wags its tail when it’s pleased. Now I growl when I’m pleased, and wag my tail when I’m angry. Therefore I’m mad.” (Carroll 57)

When reading *Alice’s Adventures in Wonderland*, the reader must consider the effects of how Carroll’s portrayal of beloved and famous—or infamous—characters like the Mad Hatter or the Cheshire Cat hinges on those characters’ explicit and labeled madness. By naming and including this playful idea of madness, Carroll entered a vibrant discourse during his era, when defining mental illness and disability was troublesome, and when people with mental illnesses were visible in both the public imagination and in the eyes of the state in ways they had rarely been before, due to the increase of asylums, diagnoses of mental illnesses and disabilities, and the attempt to legally categorize the main types of mental illness. As the episode with the Cheshire Cat briefly demonstrates, Wonderland madness defied many of the conceptions of madness that Victorian doctors formed; first because it could be applied to any and all characters and not only the characters labeled as mad, but also because it could be a positive and liberating, rather than a negative, force.

Carroll’s depiction of madness as defined by seemingly contrary actions, rather than inherent medical or hereditary conditions, also speaks to the nuanced consequences of breaking from rationality and order, proposing that madness evokes either impotent danger or liberated imagination. In the novel, Carroll contrasts violent madness as a rebellion against enforced order

and social norms with peaceful—and essentially harmless—madness as a result of freedom from those norms. In doing so, he critiques the strict order in Victorian society and its rejection of liminality and fluidity. The idea of madness that Carroll presents in his story is defined by playfulness, rebellion against norms, and linguistic creativity that defies social order. Ultimately, he uses madness as a means to critique the strict binaries and rigid social structures and hierarchies in Victorian society, including the delineation of “sane” and “insane.”

## **The Context of Wonderland: Asylum Spaces, Regulated Bodies, and Imagination**

Carroll wrote his novel in an era where questions surrounding the care, diagnosis, and treatment of mentally disabled individuals defined legislation, economic problems, and social codes. In his time, the discourse on the mentally ill stretched beyond those of psychology and medicine into the writings of authors like Dickens and Brontë. Part of what created this interest in mental health and disability that spanned disciplines was the newly prominent political problem of caring for disabled people who could not function in a capitalist society. While care within the family and community had existed for centuries, and hospitals such as Bethlehem, familiarly known as “Bedlam,” were established for mentally disabled people as early as the sixteenth and seventeenth centuries, the Victorian period saw an increase in the creation of asylums. Living standards for mentally disabled or mentally ill people rose within the spheres that either could afford to pay for this institutional care, or who were helped by wealthy and charitable donors, allowing mentally ill, mentally disabled, and physically disabled people treatment, if not increased liberties or rights. People could be and were forcibly committed to asylums, as the officials who examined them for mental illness had the final say as to their commitment, and once in the asylum could be imprisoned as securely as inmates in a prison—or even more so (Wright 268).

The asylum, then, was a place of treatment, not of freedom or care. But this increase in institutional treatment for people with mental disabilities also correlated with greater fears of the existence of potential disability in children. It is significant that before the creation of county asylums and private asylums, the most accessible care available to mentally ill or disabled people was care within the family, which often meant the mentally ill person was shutaway, whether literally or metaphorically, and kept out of the public eye (Wright 114). The asylum, on the other hand, brought mentally ill and physically disabled individuals into the public eye in terms of community surveillance for mental

illness and disability, as county officials and doctors were then required to evaluate people for symptoms of mental illness or disability, and neighbors and community members were interviewed as a part of the evaluation (Wright 117). As the asylum became an ever-more visible symbol of insanity present in the society, the debate over what caused mental illness and what could be defined as mental illness expanded past already existing disorders to certain socialdeviances, illegal behaviors, and habits that seemed illogical or fantastical. As a perhaps surprising result, there was a prominent discussion among psychologists as to whether children's daydreaming and imagination could result in psychological disorders later in life.

### **Asylum Structure and Castle Building: The Effects on Children's Play of Categorizing Insanity**

The issue of categorizing mental disabilities and mental illness was also a major concern and emphasis of the Victorian-era discourse surrounding mental illness. The rigid categories and definitions that arose from these concerns again reveal a rejection of fluidity and permeable boundaries, as legally these categories were used as labels that affected a person's rights and employment, often ensuring a separation of "sane" and "insane" people. In the Lunatics Act of 1845, three major subgroups of mental illness and mental disability were established: lunatics, idiots, and persons of unsound mind (Wright 16). An idiot was someone who, from birth, lacked the ability to reason. A lunatic was someone who sometimes could reason and sometimes could not. A person of unsound mind, however, was simply anyone who was "incapable of managing himself and his affairs" but was not a lunatic nor an idiot (Wright 16). These definitions clearly lack specificity. Although the three categories were defined as separate under the law, in practice there was little distinction made when asylums and other authorities decided who needed to be institutionalized.

The biggest factors for committing someone to an institution were whether that person was "dangerous," often meaning violent, and whether that person was "curable," meaning able to conform to societal norms. The idea of "castle building," defined by Stephanie Schatz as a child's imagination building worlds or characters that do not exist, was considered a disorder by several prominent psychologists. "Castle building" is a lovely term that in many ways describes Alice's journey to a fantastical land ruled by a monarchy, but also speaks to the fears of Victorian society surrounding imaginative play that superseded productive work. Victorian psychologists believed that if a child—any child, even one who had no prior mental condition—spent too much time daydreaming, mental impairments and an inability to distinguish reality from fantasy would

follow (Schatz 104). To prevent this, parents and other authorities like teachers were encouraged to ensure that children stayed too busy with work to daydream.

In the emphasis on productivity and the ability to function in a very specific way to fulfill gendered work roles, the specter of industrialized capitalist society rears its head. In lunatic asylums, mentally ill people might undergo some training for vocational work, but near the end of the nineteenth century, the assumption regarding mental illness was that mentally ill people could not be expected to work and instead had to be cared for by the society. Therefore, in the case of “castle building,” imagination and creativity in children threatened the development of a sane, neurotypical capitalist society in which members were expected to function in roles that were accepted as productive; the inability to function suggested by this pathological distraction was seen to destabilize and undermine the desired social order.

This concern explicitly reveals the fear of unexpected madness, as well as the fear of how prevalent and yet undetected mental illness could be. The asylum, whether designed for children or adults, was a tightly-regulated and often harsh space. The Earlswood Asylum, a facility for mentally disabled children in England, embodied the ideology of “moral architecture” common in asylum construction, where the very design of the space had to be as orderly and as coherent as possible so that the space in turn created order within the minds of the children inhabiting the asylum. In Earlswood, children attended lessons that included reading and writing skills, basic life skills, and social-behavioral skills.

A great deal of emphasis was also placed on controlling children’s physical bodies by “drilling” them, which involved repetitive physical routines meant to eliminate their physical tics and gestures (Wright 82). The theories that were common in creating the routines of these asylums viewed the mind as initially perfect and the body as the cause of the disorder, with both parts intrinsically linked; if the children’s physical tics could be cured, theorists believed, the mind would be cured as well. Vocational training, including teaching female patients to complete house keeping tasks and teaching male patients to do basic labor, was a major goal in order to both sustain the institution itself and to lessen the care the patients would need from their family once they were discharged.

The institution was meant to be an isolated, orderly, restrictive space, allowing for both the control and the surveillance of the patients within; patients’ creative expressions, whether written, verbal, or physical, were firmly limited. But soon after the establishment of the Earlswood asylum, the purpose of asylums and the types of patients they admitted would once again change, as the conception of mental illness and disability expanded beyond

that of idiocy and lunacy. Hereditarianism, the idea that a family's traits or background would determine the traits of their offspring, came to the forefront of psychological discussions. From the prominence of hereditarianism, conditions like alcoholism began to be considered mental disorders. As David Wright argues, "By placing social problems like alcoholism, prostitution, criminality, and pauperism on an equal footing with more recognized diseases, such as epilepsy and consumption, socially unacceptable behavior was legitimized as a medical category" (190).

Because of this conflation of social behavior with disability, asylums became, to some extent, moralizing tools against the continuation of these sorts of social behaviors. The asylum heads' goal became not to prepare mentally disabled children to function in abled society, but to ensure full control over "feeble-minded" children and adults who came from families suspected of these sorts of unacceptable behaviors or who participated in these behaviors. Mental disability at this point was then inescapably linked with defying standards of social acceptability, providing the basis for treating individuals who acted against social norms as having intrinsic "disorders."

The places where Carroll's historical context and his characters and locations of Wonderland overlap are many and varied. The architectural features of Wonderland often echo asylum features, while the outdoors of Wonderland represent a wilder space free from societal constraints. The "castle building" that Victorian child psychologists feared is literally encoded in Carroll's monarchy, with the mad Queen and the Duchess revealing critiques of the political system and of the gendered hierarchies implicit in both general Victorian society and Victorian mental health practices. Alice's body exemplifies the experience of both physical disability and mental disability in its refusal to conform to societal norms and expectations in a variety of situations.

Finally, the temporal schema of Wonderland both mirrors the asylum experience of controlled and stalled time and critiques Victorian time as a means of regulation of people's bodies and minds. Ultimately, the presence of mental illness in Carroll's text is not merely a comic relief in the midst of Alice's frustrations, nor is it meant to be a thrilling hint of danger in the wild world of Wonderland. Rather, the idea of madness that Carroll presents in his story is defined by imagination, creative freedom, and agency within seemingly deviant bodies that defy social order, ultimately using madness to critique the unyielding binaries and structures of much of Victorian society, starting with the delineation of "sane" and "insane."



## Freeing and Impeding Environments: Wonderland's Relationship to Alice's Physical Transformations

The organization of Wonderland itself contains a mixture of restrictive, hard-to-navigate spaces for which Alice must fit some standard size or body shape to explore as well as open, outside spaces in which Alice can wander freely. Alice's ability or inability to enter or leave spaces such as the tiny doors or the suddenly too-big hallway speaks to an inability to cross borders and to transition between social and class spheres with ease. But it also reveals a contrast between the spaces that appear dictated by rules or norms—those of the houses, the hallways, and the doors in Wonderland—and the spaces that allow free-flowing movement in physical action, in language, and in social behaviors.

Carroll's use of the human-made architecture as a means of confinement anticipates disability theory's focus on the idea of society as a space intentionally exclusive to or disabling for an impaired individual. That is, modern disability theory uses the term "impairment" to describe the physical or mental condition that affects the individual. The term "disability" refers to the ways in which the person's society causes the person's impairment to impede their abilities, whether physical or mental, to function in the able-bodied society.

A disabled or impaired person's limitations, then, are understood to come from the ways in which their society fails to accommodate their impairment, rather than the limitations stemming from some intrinsic flaw in the disabled person. In the areas that are dictated by social and bodily norms, Carroll's phrasing and chosen emphasis of Alice's thoughts on her body and her situation reveal an important perspective on monstrous and disabled bodies. Although her body grows and shrinks impossibly, and although at one point her neck becomes monstrously serpentine, when she does despair over her transformation, her despair is always focused on the ways in which the design of her surroundings impair or disable her ability to navigate her environment. This is a perspective that directly echoes modern disability theory, as articulated by theorists like David Mitchell, Sharon Snyder, and Tobin Siebers. This is not to suggest Carroll's anachronistic knowledge of modern theories of disability and impairment, but rather to show an awareness of those distinctions long before those laws took effect.

Alice's impairment caused by her physical size becomes evident with her entrance into Wonderland, when her initial navigation of the structures of Wonderland is dependent on having a body correctly sized and abled. The first space that Alice enters in Wonderland after falling down the furnished hole is the "long, low hall, which was lit up by a row of lamps hanging from the roof" (Carroll 16). The hall contains a series of doors, all of which are locked, leaving Alice trapped in the hallway. Although she finally finds a key that will fit in the smallest door, she can only open the door, not exit through it, because she herself



is physically too large. This hallway that Carroll uses as both Alice's and the reader's introduction to Wonderland signifies the sort of rational, architectural order and architectural security that would have been familiar to Alice and the reader. The locked doors secure the space of the hallway by preventing anyone without a key to pass.

There is a correct process that Alice must follow if she wants to leave the hallway, which is to unlock the door and become the right size; the idea of changing one's body to fit or pass into a space speaks to concerns about unwanted people entering restricted spheres. In this hallway, the locked doors prevent fluidity and create strict boundaries and clear thresholds, defining what is within the space of the hallway and what is not. It appears as a civilized, rational, ordered space. In Wonderland, then, this hallway is arguably the closest representation of the architecture of Alice's world; it is also perhaps the closest representation of the structure of an asylum. Many asylums had wards separated by doors that could be locked from the outside to prevent the movement of patients. The movement in the hallway was restricted by the control of the doctors and nurses. This hallway that Alice first encounters echoes the architectural organization of an asylum. However, here in this hallway, Alice is not yet in the "madhouse," but rather is in a liminal space that bars her from the unstructured, illogical world of Wonderland. The hallway, then, along with other examples of human architecture, like the White Rabbit's house, operates as one of the clearest architectural symbols of social order and control within Wonderland.

The symbol of human-made structures as methods of physical and emotional confinement continues when Alice enters the White Rabbit's house, as Carroll links Alice's discomfort with the design of the house itself and not with Alice's growing body. In the White Rabbit's house, Alice's transformation is cause for alarm, as her body outgrows the space of the home: "She put one arm out of the window, and one foot up the chimney . . . it was very uncomfortable, and, as there seemed to be no sort of chance of her ever getting out of the room again, no wonder she felt unhappy" (Carroll 44). Alice's growth works as a metaphor of social transgression, as her body physically exceeds the threshold of the room, with her arm out the window and her foot in the chimney. However, the significant aspect of this passage is that Alice's unhappiness is caused by the tightness of the room and her inability to leave the room, not by her enlarged body. Carroll locates Alice's discomfort within the space itself, so the blame for Alice's physical impairment is placed on the space and that which the space represents: the society that designed it.

In clear contrast to the controlled space of the hallway is the open and free space of the outdoors in Wonderland. When Alice enters the wood for the first time, meeting in quick succession the Caterpillar and the Pigeon, she is able to move about the wood freely, without the physical restriction that both the hallway and the White Rabbit's

house placed on her. Part of the liberation that the wood offers is its few clear boundaries; the grass around the houses turns into the wood quickly, and the wood is left behind just as quickly when Alice finds a new house. Her body's changes are also far easier in the wood in the sense that although Alice's suddenly huge height alarms her, she is not trapped as she was in the White Rabbit's house, nor is she seeking an exact size or shape as she was when she sought to go out the tiny door. This new freedom is exemplified through Alice's transformation and reaction: "As there seemed to be no chance of getting her hands up to her head, she tried to get her head down to them, and was delighted to find that her neck would bend about easily in any direction, like a serpent" (Carroll 62). In contrast to Alice's fear of growing too large while in the confines of the Rabbit's home, in the wood her transformation is cause for delight, because she has no physical barriers that would entrap her body and cause her physical discomfort.

We see again that in the wood, her fear about her body's changes came more from the structures around her impeding and imprisoning her movement rather than any fear of her body itself. Where her enlarged body was a problem, her serpent neck is a wonder; she plays with it, making it "bend about easily in any direction" (Carroll 62). Here Alice is not trying to conceal or cure her serpent neck, but instead finds enjoyment in what could be considered physical deviancy. Alice becomes further deviant here in playing with her own body, an act that goes beyond Victorian ideals of girlhood that portrayed the girl-child as angelic, almost beyond physicality (Leach 59).

The interaction between Alice and her own body constitutes an exploration of physicality beyond what would be socially acceptable. The wood, a place of far more freedom and far more fluidity than the hallway or the house thus becomes part of the "madhouse," a place where monstrous and disabled bodies are considered delightful rather than fearsome, a place where bodily norms are ignored, which the hallway, with all its locked doors and controlling of movement, appears to guard against. Where the asylum controls bodies and regulates movement, the madhouse frees its inhabitants from such impediments.

However, this is not to say that Carroll creates a binary in Wonderland between "sane" spaces like the White Rabbit's house and "insane" spaces like the Hatter and March Hare's tea table. Throughout the novel, Carroll strives to avoid creating clear-cut separation between any potentially binary ideas. Instead, there is deliberate, obvious slippage between the physically and architecturally "sane" spaces and the "insane" spaces. When Alice finds a door in a tree upon leaving the Hatter and the March Hare's tea party, she finds herself led directly back into the hallways of locked doors. In this transition between two spaces that seem in direct opposition to each other, the placement of this door in the middle of the tree is remarkable because it demonstrates a breaking down of what should be rigid barriers between the mad house of the tea party space and the rationality of the hallway.

The tea party space she has come from contains a house where “chimneys were shaped like ears, and the roof was thatched with fur” (Carroll 76); a table whose occupants seems to exist out of time and who employ deliberately illogical linguistic tricks; and the deliberate destabilization of symbols of order, like that of table etiquette. But the hallway of locked doors that she enters is arguably one of the spaces most restricted and contained by social order, as it represents the restriction of fluidity and of liminality; there can be no threshold because most of the doors cannot be opened. Carroll emphasizes this by showing that once Alice is back in this hall, away from the free space of the Hatter’s house, the first action she has to undertake is “taking the little golden key, and unlocking the door that led into the garden” (Carroll 77). As a result, the hall appears tightly controlled and logically shaped, with defined rules and patterns for moving in and out of the space, in contrast to the creative architecture of the animalistic home of the Hatter. The door between these places is not in an expected or rational setting, like at the entrance to a house, but instead is in a tree.

Carroll demonstrates to the reader that the door’s location is meant to be odd through Alice’s remark of “That’s very curious!” (Carroll 87). Thus Carroll reveals his linkage of things or ideas that seem in opposition to one another, in order to break binaries like “sane” and “insane” that appear impermeable. Because Alice is able to move easily between the supposed binaries of “sane” and “insane,” Carroll ultimately challenges these supposed oppositions. Finally, Carroll’s complication of the relationship between the “sane” and “insane” spaces as not in opposition, but in connection, to each other, offers a clear rebuttal to the norms of Victorian mental health in restricting and regulating displays of emotion when Alice’s tears become the vehicle through which she is able to leave the hallway. In the scene in which Alice, too large to fit comfortably in the hallway, begins to cry, the discussion Alice has with herself exemplifies for the reader the socially acceptable Victorian response and attitude towards displays of emotion: “‘You ought to be ashamed of yourself,’ said Alice, ‘a great girl like you . . . to go on crying in this way! Stop this moment, I tell you!’” (Carroll 23).

In shaming herself for crying, Alice takes on the role of an adult or a doctor as well as the role of the patient. As Victorian women could be diagnosed as mentally ill with the condition of hysteria, a condition where the woman was believed to be too outwardly emotional, Alice’s reaction to tell herself to stop shows that she recognizes her display of emotion as unacceptable, either socially or medically, just as a Victorian doctor would (Shuttleworth 27). She has internalized the gendered norms of her society regarding emotion, believing that a woman’s tears are evidence of something shameful. Emphasizing this internalization of gendered norms, Carroll again makes Alice’s negative view of her emotional outburst clear when she says, “‘I shall be punished for [crying] now, I suppose,

by being drowned in my own tears!" (Carroll 28). Alice's expectation of capital punishment for crying reveals her extremely of the negative view of excessive emotion that she holds. In what she understands about the consequences of displays of emotions, crying can be punished with death, thereby revealing her society's absolute and brutal consequences for failing to conform to societal norms.

Carroll quickly refutes the perspective that excessive emotions deserve punishment; although Alice expects to be "drowned in [her] own tears," the consequence of her crying is in fact the opposite of what she expected, as her tears float her to her liberation from the hallway. Implicit in this escape is a subversion of Victorian social and emotional norms, as Alice's freedom, when it comes, is not gained through using the correct procedure that the placement of the key and the locked doors imply is needed. To leave the hallway while following the acceptable social procedure for both regular Victorian society and Victorian asylums would have required Alice to stifle her emotions, control her body so that it fit the door, and use the key.

In asylums especially, exit from the asylum was granted only when a patient had either recovered or been "cured" enough to function according to social norms and etiquette (Wright 163). A "cured" patient would not cry and create a pool of tears. By employing Alice's tears as the means for her to free herself from the space controlled by social norms, Carroll refutes Alice's belief that emotions should be restrained and instead presents a perspective of excessive emotions—which could be and were considered symptoms of mental illness, especially in women and girls—as a liberating force.

## **Carroll Interrogates Social Insanity: The Rebellious Women of Wonderland**

The majority of the people and creatures that Alice encounters are male, but her encounters with other females are telling. One such interaction is with the Duchess, a bad-tempered member of the King and Queen of Hearts' court. Although the Duchess' first appearance makes her seem inexplicably and incurably violent, her final scene demonstrates how liberation from societal norms ends the seemingly insane violence against the society that enforces the norms, thereby defying the hereditarian ideals of Victorian medicine that would have named the Duchess' mind and body as the source of her violence. In the scene in which the Duchess is introduced, Carroll focuses on creating a dysfunctional and violent burlesque of a domestic setting, parodying the traditional role of a woman in the household and subverting the trope of a woman as mother to depict how enforced social norms lead to her rebellion, enacted through violent madness.

The Duchess in the private sphere of her home mirrors the violence of the Queen of Hearts; she is the only character besides the Queen herself to order Alice's head chopped off. When Alice first meets the Duchess, the Duchess is defined as a

head chopped off. When Alice first meets the Duchess, the Duchess is defined as a woman who cannot control her own household; the cooking has gone wrong, the cook is violently throwing pots and pans at the Duchess and the baby, and the entire house is in chaos. Furthermore, the Duchess' violence is depicted in this private setting of the home, where a Victorian woman should be gentle and nurturing: the ideal of a good mother. But in the scene, the Duchess, as she sings a song about beating the baby, keeps "tossing the baby violently up and down" (Carroll 71). In this setting, the Duchess' violence towards her own child is contrasted with Alice's concern for the baby, as Alice's reaction to the baby being put in danger reveals. "'Oh, please mind what you're doing!' cried Alice, jumping up and down in an agony of terror. 'Oh, there goes his *precious* nose'" (Carroll 70). The irony in this situation is that the child is deeply concerned about her fellow child, while the adult cares nothing for the safety of the baby; the child Alice becomes the figure of responsibility in this scene, inverting the normal schema for rationality that would have an adult as the rational figure, rather than a child. In demonstrating Alice's care towards the child, Carroll matures Alice and simultaneously reduces the Duchess to a child-like, self-centered state through depicting her carelessness.

This has serious implications for the state of the Duchess' presumed sanity; if she is functioning as more of a child than the literal children in the scene, Victorian psychology would consider her mentally ill. The Duchess also lacks compassion for the baby throughout this scene, ignoring its crying and in fact likely spurring on the baby's misery; the Duchess is essentially a caricature of a motherly figure. She seems to have no knowledge of how to either care for her child or run her household, designating her as unfit for those adult responsibilities. She becomes even more of a mockery of a mother when Alice takes the baby, and the baby turns out to be a pig. Carroll thus uses this discovery of the supposed baby's real form to reveal that the domestic structure as it stands corrupts both the mother and the children.

It is when the Duchess is freed from the space in which she must exercise the most responsibility and obedience to duty—her home—that she becomes a far gentler person and loses the violent form of madness that had defined her in Alice's first meeting with her. In fact, once she leaves her home and meets Alice out on the croquet lawn, the form her madness takes most closely echoes that of the Mad Hatter and the March Hare, in which the madness is displayed by confusing and illogical statements rather than extreme passions or violence. When Alice meets the Duchess once more, the very first thing the Duchess says to her is, "You can't think how glad I am to see you again, you dear old thing" (Carroll 103). Considering her actions in the first scene with Alice were to order Alice's head chopped off, abuse the pig-baby, and brusquely abandon her child with Alice, this opening line of their reunion initially seems deeply out of character for the Duchess.



But in this location, the Duchess appears to have found a greater amount of freedom. There is no pig-baby to be nursed, no furious cook throwing pots and pans, and no pepper infesting the air—essentially, there are no symbols of domesticity or motherhood surrounding the Duchess at this point. Her violence seems to be directly linked with the domestic sphere, a fact Alice considers as she muses about pepper as the cause of the Duchess' original rage. So the madness both the Duchess and the cook display through wild violence towards symbols of domestic responsibility—a baby and cooking pots, respectively—can be read as rage directed towards the gendered social responsibilities that both are trapped by. It is the social structure that has created their madness, not any inherent qualities within either individual.

To judge from the Duchess' cessation of violence, then, Carroll's suggestion for calming such wild passions that operate as a rejection of and reaction to social roles appears to be the opposite of what Victorian physicians would have recommended for violent, mentally ill people. The Victorian treatment, exemplified in the rituals of the Earlswood Asylum and in the general textbooks for treating violent hysteria, would include some form of control and ritual over the patient's actions and body, with the ultimate goal to be to train the mentally ill person to function in society. But in Carroll's text, the Duchess seems far more functional—and far less dangerous—when she leaves the sphere of routine and responsibility symbolized in her home in favor of playing croquet outside on the lawn. Outside, she lacks the power and the expectations that come with the power of the home, but is ultimately happier and far less destructive as a result. The outside world appears to be governed by far fewer domestic rules or social norms than the house; the Duchess is still defined by her class, but is otherwise allowed to exist outside of her responsibilities. She tells Alice a series of morals—all of which may be illogical and nonsensical, but not nearly as harmful as beating a baby or threatening to chop off a child's head.

But this explication of environment as the cause of the Duchess's madness actually attacks the Victorian notion of hereditarianism, which defined mental or physical conditions as inherent to the person and often tied to that person's family history and social status, or lack thereof. Carroll sets up the Duchess to appear as the product of hereditary factors from his description of her body as less than perfect: "the Duchess was *very* ugly" and "she was exactly the right height to rest her chin upon Alice's shoulder, and it was an uncomfortably sharp chin" (Carroll 103). However, he ultimately refutes hereditarianism as the cause of the Duchess' mad behavior because he shows her behavior to be linked to her environment and not her body. That the Duchess is far less dangerous when allowed to escape her constrictive responsibilities reveals Carroll's argument against the strict regulations that Victorian society favored for both mentally ill and neurotypical individuals.

## Conclusion

Although the madness present in Wonderland appears at first only a humorous device meant to shock and amuse the reader, Carroll's parallels between his mad world and his real world of Victorian England critiques the political and social constructs of his society and defends the creative nonsense and breaking of binaries and hierarchies that his characters and structures create. Under the veneer of humorous madness lies the critiques of asylum culture, of social norms that exclude disabled bodies and minds, and of gendered class and social structures, themes that appear both in Carroll's text and in the psychological and medical discourses of Carroll's time. The idea of castle building connects to Carroll's fantastic monarchy; the idea of asylum discipline and control connects to Carroll's portrayals of Alice's body; and the conception of mental illness and disability as socially created connects to Alice's mental and physical struggles to navigate socially constructed situations and spaces. Brought together, these deliberate connections shape Carroll's critique of Victorian institutions for and concepts of mental illness. Carroll's story, although meant for Victorian readers, resonates with many of the struggles that disability activists face today, in fighting for disability benefits, in fighting for the inclusion of disabled people in political and social spheres, and in critiquing a society built for able-bodied and able-minded people. *Alice's Adventures in Wonderland* is thus a text that resonates across eras, and speaks to both the progress and stagnation of attitudes towards disability and mental illness.



## Works Cited

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Carroll, Lewis. *Alice's Adventures in Wonderland and Through the Looking-Glass*. Edited by Tan Lin, Barnes and Noble Classics, 2004.

Kincaid, James R. "Alice's Invasion of Wonderland." *PMLA*, vol. 88, no. 1, 1973, pp. 92-99. doi: 10.2307/461329.

Leach, Karoline. *In the Shadow of the Dreamchild: A New Understanding of Lewis Carroll*. Peter Owen, 1999.

Phillips, Robert, editor. *Lewis Carroll's Dreamchild as Seen through the Critics' Looking Glasses*. Vanguard Press, 1971.

Schatz, Stephanie. "Lewis Carroll's Dream-Child and Victorian Child Psychopathology." *Journal of the History of Ideas*, vol. 76, no. 1, 2015, pp. 93-114. Project MUSE. [muse.jhu.edu.proxy.seattleu.edu/journals/journal\\_of\\_the\\_history\\_of\\_ideas/v076/76.1.schatz.html](http://muse.jhu.edu.proxy.seattleu.edu/journals/journal_of_the_history_of_ideas/v076/76.1.schatz.html)

Shires, Linda M. "Fantasy, Nonsense, Parody, and the Status of the Real: The Example of Carroll." *Victorian Poetry*, vol. 26, no. 3, 1988, pp. 267-283. [www.jstor.org/stable/40001965](http://www.jstor.org/stable/40001965).

Shuttleworth, Sally. *Charlotte Brontë and Victorian Psychology*. Cambridge UP, 2004.

Wright, David. *Mental Disability in Victorian England: The Earlswood Asylum 1847-1901*. Oxford UP, 2001.