

Mental Illness and Manic-Depressive Illness in Virginia Woolf's *Mrs. Dalloway*

Seyedeh Sara Ahou Ghalandari¹ and Leila Baradaran Jamili^{2*}

- 1- MA Student, Postgraduate Department of English Language and Literature, College of Humanities, Boroujerd Branch, Islamic Azad University, Boroujerd, Iran
- 2- Assistant Professor of Postgraduate Department of English Language and Literature, College of Humanities, Boroujerd Branch, Islamic Azad University, Boroujerd, Iran

Corresponding author: Leila Baradaran Jamili

ABSTRACT: There are enough evidence in Virginia Woolf's (1882-1941) diaries, letters and her life which show that she suffered from a mental disorder. Recent medical researches identify the realm of a bipolar disorder or manic-depressive illness known as a brain disorder that causes unusual shifts in mood, energy and activity levels. This paper discusses the particular form of Woolf's mental illness from Thomas C. Caramango's (1946-) view and pursues the process of this illness and shows how her art was under the direct influence of her mental disorder. The most important point is to represent this bipolar disorder and her challenge in the process of creating a bipolar structure in her novel, *Mrs. Dalloway*. The paper will suggest that the patriarchal society of England might play a significant role in increasing both her mental disorder and the mental problems and illness of her characters, especially Mrs. Dalloway and Septimus Warren Smith. To examine the relationship between Woolf's bipolar disorder and her literary creativity can help us to understand her personality, both from an artistic and psychiatric viewpoint. In *Mrs. Dalloway*, Woolf gives voice to her inner world by imagining the bipolar disorders and illness of her characters. She uses the technique of stream of consciousness and indirect interior monologue to represent not only her own illusory world but the hallucinated world of her characters.

Keywords: Mental Illness, Manic-Depressive Illness, Bipolar Structure, Bipolar Disorder, Stream of Consciousness.

INTRODUCTION

Virginia Woolf's mental illness and manic-depressive illness are the most important elements that play a significant role in Woolf's *Mrs. Dalloway*. Her illness always casts a shadow over the evaluations and critiques of herself and her works. She treats her illness not only as a patient but also as an experimenter who attempts to find the depth and the quality of her illness as if she wants to challenge her potentialities. The consequence of her effort is demonstrated in her novel. In fact, Woolf tries to show the quality of her illness in the form of a novel and through the life of characters such as Septimus Warren Smith, a shell shock war veteran, and Clarissa Dalloway, a politician's wife. Various aspects of Woolf's illness as well as how it was effective in the construction of a bipolar structure in *Mrs. Dalloway* are discussed in this paper.

Mental illness is a general term to describe various psychological abnormalities and disorders. In other words, most of psychological disorders are known under the name of mental illness. There are many different categories of mental illness, and many different facets of human behavior and personality that can become disordered. Manic-depressive illness is often known as a bipolar affective disorder characterized by severe mood swings from mania to depression. Thomas C. Caramango believes that manic-depressive illness "is a mood disorder that can profoundly modify cognition, personality, judgment, sleep patterns, and metabolism" (33).

Considering the relation between Woolf's illness and her art indicates that they are interrelated with each other. The paper clarifies how she portrays her experiences of manic-depressive illusion in *Mrs. Dalloway*, and shows the parallel experiences of two separate main characters, Clarissa Dalloway, and Septimus Warren Smith. She has tried to use what she learns from her illness in a practical way in this novel. For instance, the title of the novel, *Mrs. Dalloway*, and the first word with which the novel is started are the same. Nevertheless, Septimus, as a double for Clarissa to highlight the presence of the author in novel, might be located at the center of magnification. In fact, it shows how different aspects of her illness are demonstrated as well as how she indicates her own self in the characters of this novel. *Mrs. Dalloway* can be considered as a full manifestation of Woolf's self-reflection in her characters. It is an example of showing how Woolf used writing as self-healing.

MATERIALS AND METHODS

In this paper, the relationship between Woolf's illness and her art is discussed from social-psychological studies. In the realm of social psychology that is concerned with the interaction between individuals and groups and the effect of society on behavior, individuals in the social context would be studied. In this regard, the way individuals think or perceive can be related to society in which they live. The traces of such effects can be found in Woolf's *Mrs. Dalloway*. She demonstrates her experiences of her contemporary British society in this novel, and portrays a patriarchal society in which there is lack of proper understanding toward the concept of mental illness. She shows that Septimus' doctors are unable in the treatment of his illness. The paper attempts to indicate the affinity that exists between Woolf's experiences and what she portrays in *Mrs. Dalloway*.

The novel is studied according to Thomas C. Caramagno, a literary scholar who studies Woolf's illness and fiction based on recent findings about manic-depressive illness. He uses a science-literature model to show a new relationship between Woolf's art and her mental illness. In Caramagno's perspective, the most important attitude in relation to Woolf and her illness is to achieve an authentic and unbiased cognizance toward her and her fiction.

Considering Caramagno's theories, this paper wants to examine Woolf's mental illness and her art to find a relationship between them, through an analysis of her novel, *Mrs. Dalloway* and its characters. The socio-psychological problems of Clarissa Dalloway and Septimus Warren Smith are investigated in this paper. In other words, it indicates how Woolf's mental illness was operative in the construction of *Mrs. Dalloway* and the effect of her illness reflected on the characters' social life in this novel will be discussed.

RESULTS AND DISCUSSION

Virginia Woolf was born Adeline Virginia Stephen on 25 January 1882 at 22 Hyde Park Gate in London. She was grown up into an intellectual family and with a background of psychiatric problem. Her family's history shows that there often were various degrees of mental disorders between the members of family. She had one sister from her father's first marriage named Laura Stephen who was also known mentally disable. Woolf suffered from a mental illness which can be regarded as a bipolar disorder in mood. It can be considered as what Woolf portrayed in *Mrs. Dalloway* that is not irrelevant with her mental illness. She demonstrates her novel in a bipolar structure which can be assumed as a result of the especial feature of her illness. She tried to show a bipolar structure in her work, both in the content of the story by fluctuating between sanity and insanity and in its general structure. She depicts two distinct worlds through the characters' life.

There are similarities between Septimus' condition and that of Virginia Woolf's. She had a periodic mood swing and suffered from mental illness. She was often afflicted by mental breakdowns and finally, her life finished by her suicide, the same as Septimus. Septimus' madness as a result of war and Woolf's derangement could be the outcome of consecutive damages during her life; likewise war, as a socio-political sign, was part of it. Although either Septimus or Clarissa is part of Woolf's character and both of them are the embodiment of her own soul. Despite they can be construed in the form of two distinct stories or even dissimilar universes, they are completely interrelated with each other.

Woolf and her mental illness

In 1895 at age thirteen, she experienced her first episode labeled as breakdown. It was shortly following the death of her mother. This traumatic experience is considered as a tragedy in her life because after her mother's passing away, Woolf's whole world had changed and all gaiety came to an end in her life. There are various theories about Woolf's mental breakdowns. Her childhood traumas and her breakdowns are regarded as a response to the untimely death of her mother, the patriarchy of her father, and the sexual abuse inflicted by her half-brothers, although it is difficult to determine whether or not the abuse played a role in the development of her

mental illness. This is exactly what Caramango aptly calls “the biographer’s wishing to explain mentality through events” (9). In fact, it can be considered as an attempt to find the prime source of her illness lied in her life and specific events. Caramango argues that although some breakdowns can be triggered by a traumatic event many breakdowns or mood shifts cannot be traced. In fact, some breakdowns can be triggered by a traumatic event but such events cannot be the main cause of her illness. Moreover, Caramango mentions that Quentin Bell (1910-1996) records some traumatic events such as Thoby’s (her brother’s) death that created no illness as well as Woolf records in her diary a series of depressions unrelated to stressful events.

Caramango says that “Woolf’s various doctors failed because, until 1904, no one had even been able to catalog the often bewildering array of symptoms which, in many ways, seem to mimic those of neurosis” (26). Moreover, the part of the problem is made by Woolf’s own misdiagnosis about her illness. Her description of her illness resulted from her own experience and in another part from seeing similarities between herself and other family members. In her letters and diaries she sometimes had a description of her illness which is based on the prevalent model of her time of neurotic. However, they are full of self-accusation. Woolf identified her father as the source of her disorder. In one of her letters, she speaks of the influenza that is the cause of the nervous disorder and it is inherited from her father and earlier by her grandfather.

The old family doctor, George Savage, diagnosed her illness as “Neurasthenia (nerve weakness),” he attributed it to her father’s complains (Caramango, 11). At that time, this term referred to various types of mental disorders. It can be considered as a “Victorian euphemism that covered a variety of vaguely recognizable symptoms, just as the term neurosis lumped together various disorders for much of this century” (ibid). Savage believed that Virginia’s illness has rooted in a family background. However, modern science diagnoses her illness as manic-depressive illness or bipolar disorder. Woolf’s family history is important, both psychologically and genetically. The part of her illness refers to psychological problems and another to genetic. It may be interesting to know that the patriarchal society of England is significant in her illness. In a patriarchal society, the situation can be doubly difficult for a woman with a mental illness. In this sense, her illness and being female both threatened her with a profound sense of powerlessness. Victorian stereotypes about femininity were not ceased in depriving from right to education but also someone like Dr. Savage believed that education can be “mentally harmful for the lower classes and for intelligent young women rebelling against their natural roles as wives and mothers” (Caramango, 14). In this society, the theory of female insanity decreased the values of woman as usefulness, and Woolf as a woman was faced with an additional challenge.

The evidence for genetic transmission of her illness is so strong but her illness cannot be only considered from genetic view. The history of Woolf’s family shows an inherited link exists between the members of the family to exhibit affective illnesses. Caramango examines the traces of illness across three generations of Woolf’s family. He finds “five depressives, two nonspecific psychotics, two manic-depressives and one cyclothymic” (Caramango, 111). Her father, Leslie Stephen, was afflicted by “nonpsychotic mood swing of cyclothymia” (ibid 103) and also her mother, Julia, suffered from depression. Julia’s children from her first marriage showed any signs of affective illness against her children from her second husband who was also afflicted with affective disorder. Based on Caramango’s statement, there are two presumptions about Virginia’s inheritance. The first supposition refers to the idea that may be “Leslie’s and Julia’s genes” are combined which cause mental disorder in Virginia and another one refers to the fact that Leslie’s gene was alone affective in her illness (ibid 113). However, besides genetic traits, childhood events could play a role in her manic-depressive states. Generally, Woolf’s illness was partly genetically inherited but stressful situations activated her symptoms.

Caramango explains that “the German psychiatrist Emil Kraepelin” was the first person to recognize a pattern in manic-depressive illness (26). Mood disorder is the main characteristics of manic-depressive illness that can deeply change perception, feeling, belief, personality, and judgment. The mood swings can range from very mild to extreme, and they can happen gradually or suddenly. The process of illness can be first into mania and finally into depression. In fact, patients experience episodes of a wild excitement known as mania and typically alternating with episodes of depression. Manics are often hyperactive, talkative and show other symptoms of this type: “some patients with mania are cheerful, they laugh, play, dance day and night, they stroll in the market, sometimes with a garland on the head, as if they had been winner in a game” (Marneros and Angst, 3). What is usual between most of manics is the state in which they feel they cannot control the run of their thought. Patient’s perception is altered by mania and they are unable to distinguish between fact and fiction; moreover, their belief about their situation may be quite bizarre.

According to Caramango, the depressive signs can include the constant feeling of sadness led to despair and “from an uncontrollable tearfulness to a despondency beyond tears” (52). He explains that depressed patient feels loneliness and hopelessness and experiences disturbances in sleep, the loss of interest, appetite, problems in thinking and concentrating and also his mind seem to be obsessed with negative and suicidal thought. Woolf

records such episode in her diary that “I was walking down the path with Lydia. If this doesn’t stop, I said, referring to the bitter taste in my mouth & the pressure like a wire cage of sound over my head, then I am ill: yes, very likely I am destroyed, diseased, dead. Damn it! Here I fell down” (qtd. in Caramango, 53). In fact, manic-depressive illness changes the patient’s sense of self. Their minds seem to be obsessed with negative thought, guilty and feeling of hopelessness or helplessness. Woolf extremely felt that her condition was the result of her own guilt. Leonard, her husband, discusses that “[p]ervading her insanity generally there was always a sense of some guilt, the origin and exact nature of which I could never discover [...] she would sit for hours overwhelmed with hopeless melancholia, silent, making no response to anything said to her” (ibid 68). He believes that Virginia’s feeling about guilt has not got any simple origin.

It is clear that Woolf suffered from a mental illness which can be considered as a bipolar disorder. Through manic-depressive, she experienced two distinct and different worlds. She was completely aware of her instability, and recognized the multiplicity of her experiences. Throughout her life, one of the fundamental problems regarding her illness was various incorrect diagnoses about her illness. What is more important is that the real quality of her illness and also the interaction between mind and brain was ignored. In this process, the main source of her illness was seen in her life and specific events. Moreover, in Victorian society as symbol of a patriarchal society, Woolf as a woman writer with a mental illness was dealt with an additional challenge.

Manic-depressive illness and its role in Virginia Woolf’s *Mrs. Dalloway*

Virginia Woolf suffered from a bipolar disorder. Like most novelists, her characters were extension of her life and herself. In this novel, Woolf uses the stream of consciousness technique and indirect interior monologue as the methods to the narrative story to visualize her own feelings and mental desires. Shifting from interior thoughts of one character to another allows Woolf to express the subtlest aspect of bipolar illness. It is exactly the same point that she calls “dig[s] out beautiful caves behind my characters” (qtd. in Goldman, 54). What is important is that these caves are connected together. Nevertheless, the interiors monologues do not change from one character to another but there is a whole self that split into several characters and in fact its voice changed, like a puppeteer who talks instead of all characters; actually, they are presented by means of one person. Caramango believes that Woolf did not use the application of dialogue “to avoid creating distinguishable voices” (213) and instead, she prefers to apply authorial summaries of conversation.

Woolf had problem with the sense of guilt and she also arouses this sense in Septimus as well as Clarissa. Septimus’ sense of guilt and crime is further extended when he gets married to an Italian girl without really loving her. In Lyndall Gordon’s words, “[h]e sees no artificial distinction between the organized aggression that destroyed the man he most revered (Evans) and the random callousness of any Tom or Bertie in civilian life, their starched shirt fronts oozing thick drops of vice” (199). Furthermore, the sense of being guilty is very significant in Woolf herself in which she cannot find a logic and valid cause for her sense. Although Clarissa’s experience about guilt is not too extreme to Septimus she feels guilty about her decision not to marry Peter quickly and she reaffirms her decision that “she would still find herself arguing in St. James’s Park, still making out that she had been right—and she had too—not to marry him” (MD, 6). She more feels guilty for having “failed” (MD, 23) Richard but it is in an unclear or ambiguous way.

Woolf also experienced auditory hallucinations; she heard birds “sing in Greek” or King Edward VII “uttering muffled profanities” (Caramango, 47). It is more interesting that the bird imagery appears in her novels especially in *Mrs. Dalloway*. This partly refers to how her illness manifests itself in her artistic work. On the other hand, manics cannot be able to control the stream of their thoughts and, as Caramango says, Woolf in hypomanic “felt energized and creative, and fiction came easily to her” (46). Actually, writing and manic-depressive illness have got close affinity for as much as “manic-depressive illness periodically destroyed control” of the racing mind; on the other hand in the process of writing, “the only thing that matters is a thing that you cannot control” (qtd. in Caramango, 80). Caramango also quotes from Woolf that “my body was flooded with rapture and my brain with ideas. I wrote rapidly until 12” (ibid). The stream of consciousness Woolf used in her novels and also her special narrative techniques show that she used her illness in practical ways. In fact, her unique style of writing, which came to be known as stream of consciousness, can be considered as the symptoms she experienced through her illness. She applied those experiences that she achieved through her mood disorders. In fact, Woolf tried to express the nature of her illness in her writings.

The first page of *Mrs. Dalloway* starts with common experiences between author and her characters. The writer discloses the existence of deep connections between herself and the characters of her novel. Caramango believes that for Woolf “remembering madness involved plunging” in her mind (211). *Mrs. Dalloway* also begins with a plunging to madness, “What a lark! What a plunge!” (MD, 3). In fact, the narrator and characters are sharing a kind of experience. Woolf masterly enters into madness in the process of the story and glorifies its presence in the novel. *Mrs. Dalloway* decides to buy the flowers herself as if she is getting ready to welcome it. Clarissa

plunges in her mind to the past: "When, with a little squeak of the hinges, which she could hear now, she had burst open the French windows and plunged at Bourton into the open air" (MD, 3). Finally, Septimus Warren Smith experiences it in a depressive state by jumping from an open window to death. Septimus plunges to his death and Clarissa leaps with him but only in the world of imagination. In fact, from beginning to the end of the story, the novel can be regarded as the evolution of an experience started by Clarissa Dalloway and achieved perfection by Septimus Warren Smith. The experience obtained by each of them can be considered as a kind of perfection in different ways. Furthermore, it should not be forgotten that the main purpose of the writer is to depict a bipolar experience. Septimus is released from the world of ordinary experience and Clarissa progresses beyond the confines of self and social world and also triumphantly in control of her world.

Woolf represents Septimus as the psychotic person, and Clarissa in her "euthymic" states as the mixture of herself (Caramango, 33). In fact, the novel can be a full scale performance of her personality dimensions and a clear image of her illness. In Mrs. Dalloway, Septimus can be considered as a double for Clarissa nevertheless they are in two totally different stages but Septimus is the embodiment of her inner characteristics. First of all Woolf shows her own qualities by creating her work that is the mirror of herself and also the characters such as Septimus and Clarissa who are both double for each other and Woolf. Actually, Woolf leaves a legacy within her characters what she acquired through her illness. During her life, she had a ceaseless conflict with the bipolar feature of her illness and she has made the characters of her story as individuals who have been undergoing the same experiences.

Indeed, Woolf's thoughts reflected in Septimus, while she tried to maintain a relationship between them with her own illness. As a matter of fact, through Septimus, Woolf emphasizes the structure of perception so that it can be seen no more as an outer process but as a message. The birds were singing Greek to Woolf, experienced by Septimus; this is partly how her illness manifests itself in her artistic work:

He waited. He listened. A sparrow perched on the railing opposite chirped Septimus, Septimus, four or five times over and went on, drawing its notes out, to sing freshly and piercingly in Greek words how there is no crime and, joined by another sparrow, they sang in voices. (MD, 18)

During her illness, Woolf experienced the periods of madness in which she was hearing the voices such as the voice of her mother who was not alive or the birds outside her window were talking in Greek. She applies the same typical characteristic of her illness about Septimus. It can be observed that Woolf's misconceptions are the same as Septimus':

And saw faces laughing at him, calling him horrible disgusting names, from the walls and hands pointing round the screen. Yet they were quite alone. But he began to talk aloud, answering people, arguing, laughing, crying, getting very excited and making her write things down. Perfect nonsense it was; about death; about Miss Isabel Pole. She could stand it no longer. She would go back. (MD, 48)

The states, Woolf experienced in madness, such as seeing the dead people, ghosts and individuals mocking her, are objectified in her characters. Septimus also hears the song of birds in Greek and he thinks the birds communicate a divine message for him as well as he sees his friend, Evans who was killed in the war and heard the voices of dead people and saw those who were not in real world and were just in his hallucination. These states can be regarded as a combination of various aspects of Woolf's experiences in her manic-depressive states.

Until the late twentieth century mental disorders were seen as a battle of wills between a physician and a patient. In order to overcome neurasthenia, patients had to surrender their autonomy to their doctor. This cure was prescribed to Septimus in Mrs. Dalloway, like Woolf by her doctors. One of Woolf's doctors, Dr. George Savage, prescribed the method of treatment with respite, using the nutritious foods and raising weight for her. They believed that even the biological reasons can be the main cause of her breakdown. He defined her illness as nerve weakness and not an important illness. Woolf shows that Septimus' doctors advise the same methods in the process of his treatment:

Dr. Holmes examined him. There was nothing whatever the matter, said Dr. Holmes [...] When he felt like that he went to the Music Hall, said Dr. Holmes. He took a day off with his wife and played golf Why not try two tabloids of bromide dissolved in a glass of water at bedtime? [...] headaches, sleeplessness, fears, dreams—nerve symptoms and nothing more, he said. If Dr. Holmes found himself even half a pound below eleven stone six, he asked his wife for another plate of porridge at breakfast. (Rezia would learn to cook porridge.) But, he continued, health is largely a matter in our own control. Throw yourself into outside interests; take up some hobby. (MD, 65)

Dr. Holmes persists that Septimus has no serious problem. He believes that such states may occur to every person not simply Septimus. He prescribes that Septimus only has to pay attention to the outer world and find some hobbies for himself. He advises him to go to the theater and golf and attempt to raise his weight with overfeeding. Then he can maintain his health that is a matter under his own control. In fact, the doctors like Holmes

and Bradshaw reflected the doctors who cured Woolf throughout her life. Septimus, as a shell shocked soldier who is mentally insane, shows how there is a network of power in the society as well as medicine.

Woolf displays the part of her personality in the character of Mrs. Dalloway. She depicts a woman whose thoughts and feelings are similar to her own. Woolf shows in Clarissa her deep love to life and also her struggles to balance her internal life with the external world. Throughout the novel, Clarissa endeavors to find a balance in her social life in contrast to what she wishes to have. Woolf divided her illness into two main characters. At the beginning of the story, she informs the reader that Mrs. Dalloway has recovered from an illness. Her doctors diagnosed her illness as "influenza" (MD, 3). It can refer to Victorian stereotypes and lack of knowledge regarding mental illness at that time. Such a diagnosis can be seen by Woolf's doctors during the periods of her treatment. They believed that there is a connection between her breakdowns and physical stresses caused by influenza. Woolf also portrays her euthymic states in Clarissa as well as her madness in the characters of Septimus: "Arlington Street and Piccadilly seemed to chafe the very air in the Park and lift its leaves hotly, brilliantly, on waves of that divine vitality which Clarissa loved. To dance, to ride, she had adored all that" (MD, 5). Woolf shows Clarissa in an extremely happy mood, full of energy and vitality. Clarissa is depicted with pure emotions and what she really liked was just life.

In Mrs. Dalloway, Woolf delineates not only the part of her illness but also a pattern from her private life. The design of Mrs. Dalloway has been shaped in part with Woolf's deep personal concern. She shows Clarissa as a woman in a repressed social position:

The sheets were clean, tight stretched in a broad white band from side to side. Narrower and narrower would her bed be [...] Richard insisted, after her illness, that she must sleep undisturbed [...] So the room was an attic; the bed narrow; and lying there reading, for she slept badly, she could not dispel a virginity preserved through childbirth which clung to her like a sheet [...] through some contraction of this cold spirit, she had failed him. [...] She resented it [...] yet she could not resist sometimes yielding to the charm of a woman, not a girl, of a woman [...] And whether it was pity, or their beauty, or that she was older, or some accident—like a faint scent, or a violin next door [...] she did undoubtedly then feel what men felt [...] But this question of love [...] this falling in love with women. Take Sally Seton. (MD 22-23)

The reader is acutely informed of the relationship between Clarissa and her husband, Richard. He orders everything around Clarissa like Leonard, Woolf's husband. Woolf's doctors advise Leonard to limit her activities, visitors and to control her eating, sleeping, and asking her not to be tired mentally and physically when she was ill. Here Woolf shows a situation in which Richard keeps the same orders about Clarissa. He insists that Clarissa needs a peaceful place and has to sleep alone in a separate room. She points to her attic room that is like a nun's room and her bed that is narrow and also she feels that she still has her virginity despite being a woman. In fact, her descriptions reveal a significant view of her conjugal relationship. She felt that she brought failure to her husband because she could not reply his sensations. Despite her indifference toward men, Clarissa describes her attraction toward women, exactly like what men can feel about women.

By considering Woolf's mental illness it can be said that her mood swings had completely operational result for her and she herself realized that they could promote her imagination in order to create or embody her unconscious experiences. It is obvious that Woolf used writing as a tool for self-therapy and working was the only way to ease the inner tension. For Woolf, writing was an essential tool for elaborating her feelings, experiences, and conflicts. She externalized her inner world in her writing which served as a tool for exposing her inner conflicts and their transformation in her consciousness.

Woolf's bipolar structure in Mrs. Dalloway

The ambivalence that can be considered as characteristic of Woolf's illness followed her life. She had an ambivalent relation with her environment, life events, illness, with the people surrounding her as well as with herself. The examples of this can be found both in her books and in her diaries. As Caramango says her novels can help to "dramatize her struggle to read her perceptions correctly and to establish a bipolar sense of identity" (3). Woolf's main endeavor was the way to find "a moment of being" (Caramango, 3) in her life and art. In Caramango's opinion, Woolf hoped that this pure being "lay below her everchanging [...] consciousness" (38), which appears in her novel, Mrs. Dalloway.

It can be regarded as a work interrelated with herself and her illness more than the rest of her works. There are many voices in this work that accompany reader to the end of the story and simultaneously frequent moments full of the silence and reticence. This silence taken shadow over all parts of the work can be seen everywhere. In Mrs. Dalloway, Woolf says that Clarissa feels an especial silence "a particular hush, or solemnity; an indescribable pause, a suspense," or in another part, she writes "strange, on entering the Park, the silence" (MD, 3, 4). The sound of a car backfiring, a sky-writing plane, the song of a flower seller and the striking of Big Ben alongside the silence of the inner world of the characters and the reticence of the attic room of Clarissa Dalloway are the

positions that the reader is taken to the heart of noises and suddenly narrator shifts to the interior thoughts of the characters as if the reader is dropped into a vacuum. The characters themselves feel this bipolar sense of silence and uproar as Woolf says that "Clarissa was positive, a particular hush, or solemnity; an indescribable pause; a suspense (but that might be her heart, affected, they said, by influenza) before Big Ben strikes" (MD, 3).

Moreover, Woolf establishes the construction of her statements based on a bipolar structure. Being bipolar can be seen in the selection of words and juxtaposing the phrases: "though it was still so early, there was a beating," or "[s]he felt very young; at the same time unspeakably aged," or "a particular hush [...] before Big Ben strikes" (MD, 3, 4, 6). Actually, through a simplest form, the writer tries to persuade the reader to a bipolar world by the meaning that words convey to the mind. Woolf portrays the intimate thoughts of her characters with a bipolar feature. These states are similar to her illness, ups and downs that she was affected in manic and depressive episodes and reflected in her work. She exactly applies the experiences achieved through the process of her illness in Mrs. Dalloway.

Woolf creates her characters with a bipolar construction. Clarissa believes that religious ecstasy causes to defect the human spirit although when she was young, she experienced a kind of passionate feeling with Sally that she called her sense as "the revelation, the religious feeling" (MD, 26). The story is centered on two similar but separate characters, Clarissa Dalloway and Septimus Warren Smith. Goldman writes that "Mrs. Dalloway may have her name on the title, but the book is equally also about Septimus Warren Smith" (56). Woolf herself mentions in her diary that "Septimus and Mrs Dalloway should be entirely dependent upon each other" (qtd. in Caramango, 211). In fact, it is the combination of masculine and feminine characteristics. It may also be taken of Woolf's theory about the androgynous mind introduced in *A Room of One's Own* (1929). Goldman believes, in Mrs. Dalloway, "the narrative not only ranges spatially and subjectively, from consciousness to consciousness, it also ranges back and forth through time" (55). In her novel, she displays two forms of time; the time has regularly been announcing by Big Ben clock and also set past and present time through the consciousness of the characters. On the one hand, the life of characters is filled with the continuity of past moments; and on the other hand the present time has such a deep effect on their life that "she could not even get an echo of her old emotion" (MD, 25). Moreover, the repetition of the sound of Big Ben, throughout the novel, helps to fortify the concept of time that is irreversible.

Mrs. Dalloway shows the contradiction between "the preparations for Clarissa Dalloway's party with the madness of war survivor Septimus Warren Smith" (Mills, 79). The characters have got an unreal self that is the same social self and it lies behind their real self. Woolf puts adjacent upper- and middle-class English society, "[t]he veriest frumps, the most dejected of miseries sitting on doorsteps" and "[t]he King and Queen were at the Palace" (MD, 3-4). In fact, her manifestation of two classes of English society represents two different worlds. Mrs. Dalloway shows how Woolf tried to criticize English society and on the other hand she adores her nation and boosts upper-class. In her diary, she states her ambition for writing this work that was "to give life & death, sanity & insanity; I want to criticize the social system, and to show it at work, at its most intense" (qtd. in Goldman, 54). She exposes the superficial and pretended peace and tranquility of after war beside the harsh reality of war by its remaining vestiges:

The War was over, except for someone like Mrs. Foxcroft at the Embassy last night eating her heart out because that nice boy was killed and now the old Manor House must go to a cousin; or Lady Bexborough who opened a bazaar, they said, with the telegram in her hand, John, her favourite, killed; but it was over; thank Heaven—over. It was June. The King and Queen were at the Palace. (MD, 4)

In this stage, there is a question whether the war is over or it is only over for some people like upper-class. Woolf juxtaposes the serene life of ruling class and the life of people in middle-class who are still involving with the consequence of war. It shows that the war is not over but disillusionment and mental disorders are as indicative and vivid evidence of war. The novel depicts that English people are still faithful to their values despite they see the outcomes of war. However, Clarissa is satisfied that war is over and the king and queen are in their palace. It illustrates the empty and artificial life of upper-class.

Clarissa's sensation mostly involves a polarization. She is full of youthfulness beside a sense of oldness, the combination of exhilaration and disillusionment:

The air was in the early morning; like the flap of a wave; the kiss of a wave; chill and sharp and yet (for a girl of eighteen as she then was) solemn, feeling as she did, standing there at the open window, that something awful was about to happen; looking at the flowers, at the trees with the smoke winding off them and the rooks rising, falling; standing and looking. (MD, 3)

On the other hand, Woolf's performance of bipolar structure is twofold; she shows polarization both in bipolar feeling through combination of nostalgia and excitement of sensation and simultaneously she represents polarity of the past and present times. Woolf shows the bipolar structure when Clarissa receives news of a young man who committed suicide, it exhibits the combination of both pity and desire: "She felt somehow very like him.the young

man who had killed himself. She felt glad that he had done it; thrown it away while they went on living" (MD, 133). Clarissa's emotional fever is actually bipolar. She shows the climax of her feeling both to life and to death.

Woolf's regard for life is made via polarization. She mentions that Clarissa felt that "very dangerous to live even one day" as well as in another place Clarissa says that "Oh if she could have had her life over again" (MD, 6, 8). Woolf shows that Clarissa's belief in relation to life is associated with many ups and downs. In Mrs. Dalloway, Woolf approaches the question of death through bipolarity:

Did it matter then, she asked herself, walking towards Bond Street, did it matter that she must inevitably cease completely; all this must go on without her; did she resent it; or did it not become consoling to believe that death ended absolutely? but that somehow in the streets of London, on the ebb and flow of things, here, there, she survived. (MD, 7)

In fact, she has a bipolar intuition regarding life and death, while she adores life wholeheartedly, she ridicules her sensation, as well; and on the other hand, she has the same feelings in relation to death; a mixture of fear and attraction. Reading Mrs. Dalloway creates a sense in which the reader can have experience to live in a bipolar brain. Woolf utilizes the technique of polarization in her writing as a device for showing her presence in the novel. Regarding this point, the novel can be read both by the characters and the voice of Woolf herself.

CONCLUSION

The parallel relationship between mental disorders and creativity can be specified with the reciprocal associations which exist between conscious and unconscious state. In fact, individuals are able to elaborate the experiences of the psychotic states in the non-psychotic periods. Accordingly, creation may have at least partly an unconscious process for her but the product obtained by this process was through conscious. Her writing was not just an unconscious process. Actually, she tried to use the experiences she went through in the psychotic period in her art. She strongly and markedly evaluated her internal occurrences and transferred them into her works of art.

Woolf tries to show a complete figure of her illness in Mrs. Dalloway. She portrays the real nature of her illness and symptoms through the characters in this novel. It can demonstrate that how she was completely aware of her illness and its quality as well as she could distinguish mania and depression episodes and gain her own perspective from depression by contrasting it to her manic episodes. In fact, she had enough knowledge in relation to her illness reflected in her novel. She experienced two distinct worlds which are created by bipolar disorder. The bipolar structure in her novel can demonstrate how Woolf used her illness in a practical way.

She depicts her illness through the characters such as the sane woman protagonist Mrs. Clarissa Dalloway and the insane World War veteran Septimus Warren Smith. On the other hand, it can be regarded that Woolf portrayed the part of mania by means of Clarissa and depression with Septimus. Woolf, in fact, portrayed her own symptoms of mental illness in her characters, like Septimus, who experiences visual hallucination such as her own hallucinated world. She accomplishes this purpose through intimate thoughts of various characters to show different aspects of her experiences of manic-depressive illness. Actually, the novel gives Woolf the opportunity to explain her illness and to represent it.

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