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"I am at last vanquished by sickness": The Narrative of Illness and Disability in Mary Darby Robinson's Letters

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Abstract

This essay will analyse how Mary Robinson recounted her disability and illness in her last letters to her friends. The investigation will explore how she perceived herself as a woman, a mother, a professional writer and a patient in distress, using her pen to construct her multilayered identity. At the same time, it will delve into the relationship between the body and the mind, and how the act of writing in her last months has served the social and therapeutic purpose of enabling a physically fragile subject to make her voice and anguish heard.

Keywords: Disability Studies, English Literature, Mary Robinson, Narrative Medicine, Women's Studies

Mary Darby Robinson was an unconventional woman; an actress, a proto-feminist activist and a writer who spanned most literary genres. She penned an extraordinary number of poems, several novels, letters, and a tragedy, *The Sicilian Lover*, which was unfortunately never staged. Anne Janowitz rightfully defines her as the first celebrity of the modern age (2004, 9), anticipating Lord Byron of a few decades. Her controversial figure sparked the public's interest when she was noticed by the Prince of Wales while interpreting the role of Perdita. He immediately fell in love with her and soon asked her to be his mistress. As a young single mother who started an acting career to support herself and her daughter, she was not in the position to decline such a convenient offer. The scandalous relationship between the two lasted less than a year but severely damaged her reputation for the rest of her lifetime. From that moment on, her personal life was highly scrutinized, and she was frequently mocked in satirical vignettes¹ or harshly attacked for her untraditional lifestyle.

¹ Two graphical examples of the harsh, almost pornographic, mockery she endured are Thomas Gillray's *The Thunderer* (1782) and the anonymous

She was widely considered a disreputable woman, partly because she was an actress who often performed *breeches roles* in male garments that openly displayed her physicality. Moreover, her alleged love affairs with wealthy, powerful men fueled this perception. Not all of the male personalities she was linked to at the time were later confirmed by her biographers. However, we know with certainty she was the partner of Lord Banastre Tarleton for sixteen years on and off, although the two never officially married.

In 1784, she was travelling to join him when a critical accident completely changed her life. According to her *Memoirs*,²

[b]y an imprudent exposure to the night air in travelling, when, exhausted by fatigue and mental anxiety, she slept in a chaise with the windows open, she brought on a fever, which confined her to her bed during six months. The disorder terminated at the conclusion of that period *in a violent rheumatism, which progressively deprived her of the use of her limbs*. Thus, at four-and-twenty years of age, in the pride youth and the bloom of beauty, was this lovely and unfortunate woman reduced to a state of more than infantile helplessness. (Robinson 1894, 195-96)

Her *Memories* and biographies differ regarding the dynamics that led to her infirmity. Most biographers³ believe the fever was a complication of a miscarriage she suffered during the journey, as speculation emerged that she was pregnant with Tarleton's child at the time. From that point onward, Robinson permanently ended her acting career and intensified her writing. Meanwhile, she frequently travelled to thermal towns in England and across Europe to seek relief from her chronic pain. Indeed, her *Memoirs* recount that she was far from discouraged by her unfortunate circumstances: "Yet, even under so severe a calamity, the powers of her mind and the elasticity of her spirits triumphed over the weakness of her frame" (196). It was in 1787, when she returned to England from the warm baths of St. Amand, that "may be dated the commencement of her literary career" (207). However, it should be noted that she had already penned a few compositions before that time. Her first collection of *Poems* was written in 1775 when she was in Fleet prison with her toddler daughter and her husband, Thomas Robinson, while *Captivity, A Poem; and Celadon, A Tale* date back to 1777.

As her popularity as an author increased, and aware of her talent and poetic genius, Robinson turned her pen into her main source of income in the last decades of her life, especially after she stopped receiving the allowance promised by the Prince of Wales.⁴ As pinpointed by

caricature titled *Florizel and Perdita* (1783). In *The Thunderer*, she was portrayed as breast-naked and with her legs wide open, sitting on a torture device used to punish prostitutes. In *Florizel and Perdita*, she was depicted once again as breast-naked next to the Prince of Wales and her husband, who is defined as "The King of Cuckolds" and holds on his horns Mary's alleged lovers: Lords North, Fox and Tarleton. See Mellor 2000.

² It should be specified that such a version is not Robinson's but her daughter Maria's. Robinson stopped writing her *Memoirs* around 1781, conveniently right before the account of her relationship with the Prince of Wales (but after he began courting her). The text was later completed "by a friend" who recounted the continuation of her life and sent the work for publication in 1801. This supposed "friend", according to Robinson's scholars, is most probably her daughter Maria Elizabeth Robinson who took care of her until she died in 1800 (see Janowitz 2004, 10).

³ Bass reports that when Robinson went into labour while travelling to reach Tarleton on the coast, she turned back to London, but "[s]omehow the midwifery was bungled, and in the ordeal she was paralyzed" (1957, 224). Duncan Wu explicitly mentions the miscarriage as the cause of her paralysis (1997, 178). Anne Janowitz talks about a "bodily trauma that may have been a complication from a miscarriage, or a rheumatic fever – the evidence is not clear" (2004, 56). Davenport suggests that "on the basis of this very limited evidence, diagnosis can only be speculative" and that "it is impossible to know what caused Mary's miscarriage, if indeed she had one" (2011, 319-20).

⁴ A few years after their relationship was over, there is evidence that Robinson managed to obtain, through the aid of Charles Fox, a steady annual allowance of 500 pounds from her former lover (Bass 1957, 202). In the

Ashley Cross, in the last ten years of her life she produced “four verse collections, six individual long poems, a sonnet sequence, seven novels, two plays, a translation, three political essays, hundreds of poems for different newspapers and a draft of her memoirs” (2017, 1-2). While she excelled at recognising the most marketable trends of the time – covering every profitable genre and producing easily sellable compositions – Robinson was also praised by critics and fellow writers as a talented poet. In a letter to Southey, S.T. Coleridge defined her as “a woman of undoubted genius” and explained to his friend:

There was a poem of hers in this morning's paper which both in metre and matter pleased me much. She overloads everything; but I never knew a human being with so *full* mind – bad, good and indifferent, I grant you, but full and overflowing. (Coleridge quoted in Griggs 1930, 91; italic in original)⁵

In that circumstance, Coleridge asked Southey to include Robinson's “Haunted Beach” in his *Annual Anthology* (1799), struck as he was by her “fascinating metre” (*ibidem*). Even poet John Wolcot openly declared his appreciation for Robinson's intellectual abilities. He wrote to her only a few weeks before her death that she possessed “stamina for a hundred years, and a poetical mind that cannot be soon replaced” (Davenport 2016, 330). Another friend and admirer of the poetess was philosopher William Godwin, with whom she shared radical ideas and a long-standing esteem towards Mary Wollstonecraft, her work and feminist activism. Robinson's *A Letter to the Women of England, on the Injustice of Mental Subordination* (1799), written a few years after *A Vindication of the Rights of Woman* (1792), openly mentions on its first page how Wollstonecraft's genius was not adequately appreciated, nor her death sufficiently mourned. Godwin himself assisted Robinson in times of need and introduced her to Mr. James Marshal, with whom she maintained an intense correspondence in the final months of her life. Marshal proved to be an affectionate friend, economically supporting her after she was imprisoned for a debt of 63 pounds in May 1800, only a few months before she passed away.

In the autumn of 1800, despite undergoing various therapies and being confined to bed, which limited her work activities, Robinson's health quickly declined. Although she continued publishing until her final days, her last tormented months can only be traced through her extensive private correspondence. This correspondence provides not only a revealing insight into her personal struggles but also a significant, although fragmented, autobiographical account of her illness. Her declining health is central in a selection of letters to Mr. Marshal, penned between August and November 1800 and collected by Sharon Setzer in 2009. An additional account of the same period appears in the miscellaneous epistles edited by Hester Davenport in 2010. This essay will examine this fascinating collection of letters, integrated with excerpts from her *Memoirs* and her most reliable biographies, in order to delineate an original portrait of Mary Robinson as both a patient in distress and a “wounded storyteller” (Frank 2013) – an often-overlooked aspect of her life.

Although not directly written by Robinson, the final section of her *Memoirs*, compiled by her daughter, is the only published work detailing Robinson's physical ailments, health challenges and daily struggles. While the first part “seems like a novel” (Nachumi 2009, 286), the second part is where “Maria Elizabeth details her mother's gradual decline” (*ibidem*) turning the work into an actual “straightforward memoir” (*ibidem*), though not entirely reliable (Fawcett

following years, the payment was often late or unsolved, so much so that she had to ask favours from some of her friends to either intercede with the Prince or to help her out economically.

⁵ See Coleridge E.H. (ed.) 1895, 322.

2016, 196; Brewer 2016, 210). Notably, none of Robinson's poetic and prose compositions directly address the health issues that affected her existence and the emotional toll of living with chronic illness and physical impairment. According to Davenport's biography, Robinson never mentioned the term "paralysis" to describe her condition, despite it being accurate. Instead, she claimed she suffered from "a severe rheumatism" (2011, 317). Even her final novel *The Natural Daughter* (1799) – regarded as a continuation of her *Memoirs* and a testament to her "multifarious subjectivity" (Ty 1998, 83) – makes no mention of her condition. However, the novel features a protagonist who partially mirrors Robinson's life⁶ and offers a nuanced depiction of disability through the portrayal of a soldier's physical mutilation in war. In the novel, the author cleverly criticises the destitute condition of veterans and the sentiments of disgust and indifference that impairments provoke in society. At the same time, she implicitly addresses the lack of a real welfare system that could tend to the needs of disabled people.⁷ Of course, the two contexts and types of impairment cannot be directly compared. However, Robinson's critique of the way disability was perceived and treated in a social order where the healthy and the physically whole were the norm is undoubtedly autobiographical.

Disabled and impaired people, as well as social outcasts, feature as characters in many of her compositions. Their presence often represents an opportunity for the author to criticise society and advocate for equality, but also a subtle way to inscribe marginalised figures into history, to give them a voice and agency. As an ill-reputed woman who lived almost twenty years in a state of limited mobility, carried by her servants "from room to room, or from her house to her carriage like an infant" (Boaden 1825, 135), Robinson was accustomed to all the negative preconceptions that fed social discriminations.⁸ Although she fitted into the prejudiced notion of the "crippled" as morally defective people punished by God (Turner 2012, 36-37), she certainly defied the social stigma that deemed the disabled as idle and unproductive. Indeed, Robinson's impairment did not prevent her from working busily and having a social life until her conditions allowed her to do so. In fact, her daughter suggests that Robinson's physical limitations fuelled her creativity and spurred her literary pursuits – "this check to pleasure and vivacity of youth, by depriving her of external resource, led her to the more assiduous cultivation and development of her talents" (Robinson 1894, 196). Despite her undeniable genius, it was undoubtedly a combination of various factors that significantly influenced her devotion to writing. Her impairment coincided with the necessity for more practical help and a greater need for a regular income, on which her ability (or disability) relied entirely. The absence of a pension she could spend to hire attendants and cover expenses probably compelled her to write and publish as much as possible until her final days. As Brewer aptly argues "Robinson understood disability as a social construction" viewing herself "as abled as long as her financial resources and caregivers permitted her to have a social life, write prolifically and, visit London's cultural sites" (2016, 210). Ironically, even when helped and cared for, Robinson experienced

⁶ The novel's protagonist, Martha, marries a man who soon proves untrustworthy and abandons her. Without money nor protection, Martha becomes an actress and a writer to economically support herself and her *protégée* Frances – a toddler she decides to adopt when, for different reasons, both her parents go missing. Indeed, according to Sharon Setzer, "Robinson's heroine [...] is in many respects Robinson's fictional double" (1996, 532).

⁷ The financial help received by people who were permanently or temporarily unable to work rested mainly on private charity, as the Poor Laws issued since the Elizabethan period failed to establish a structured national welfare system and left the management of funding to parishes, with a huge difference from one another. For more details on the matter see Hansan 2011 and Turner 2012.

⁸ For a matter of length it will not be possible to widely discuss the issue of disability, its cultural representation and social stigmatization in the eighteenth century. For further references: Turner 2012; Bradshaw 2016; Joshua 2020.

first-hand the difficulties of depending entirely on someone else's physical strength. For instance, she fell from her servant's arms during one of her transfers and was severely injured, as reported by *The Oracle* in 1793:

The fixed malady of this Lady prevents her walking; she is always carried by one of her servants to a carriage [...] when he was bringing her in his arms to the coach, on the instant the flight of stone steps at the door of the house [...] suddenly gave way. He fell, and his LADY of *course*. – Mrs. ROBINSON has been very severely cut upon the head, and a contusion somewhat alarming is discovered. (116; italic in original)

Thanks to her letters, we know a similar incident happened again in September 1800, when “a coachman inadvertently bashed her head against the low ceiling of her bedchamber” (*ibidem*). She recounted the event in two different letters: in the first, to Mr. Marshal, she jokes about the idea that her coachman may have mistaken her for a “truss of Hay” in “lifting [her] out of the slanting room where [she] slept” (Davenport 2016, 324). In the second, written to Jane Porter on the following day, she describes a “violent blow to the *head*, which very nearly put a period to [her] sensations” (325).

The reasons why Robinson refrained from expressing her feelings about her paralysis in her published works can only be speculated. However, one possible explanation for her reticence could lie in her complicated relationship with the press and the gossip surrounding her figure, which began with her affair with the heir to the throne and never abated. Such gossip primarily took the form of articles and caricatures that undermined her reputation and “authorial ambitions” (Fawcett 2016, 177). Besides her portrayal as a prostitute, Robinson was also publicly ridiculed for her disability. A prime example is the vignette *Perdita Upon her Last Legs*, printed in 1784, in which Robinson appears as a crippled mendicant, dressed in worn-out clothes and begging for money from the Prince of Wales. As Fawcett highlights,

The old posters on the wall behind them, advertising Robinson's former roles in *Jane Shore* and *Florizel and Perdita*, present a cruel contrast between the actress once known for her dynamism on the stage and her social ambitions off of it and the beggar in the foreground, now paralysed in her fixed pose and her inescapable poverty. (178-81)

Her controversial popularity certainly placed her under a more intense spotlight and exposed her to harsher condemnations than other personalities of the time. Davenport appropriately highlights this contrast: “there are few women whose health is the subject of press bulletins, but Mrs. Robinson was a celebrity” (2011, 14). The public obsession with her appearance played a crucial role in diminishing her figure once it was no longer conforming to the standards of health and attractiveness. As Lindgren suggests, “when a body is both female and diseased or impaired” – or both, as in Robinson's case – “it can be viewed, and experienced, as doubly corporeal, doubly devalued and [...] doubly shameful” (2004, 147). Nevertheless, it should be noted that mocking deformed bodies was a well-established habit in English society as a common practice rooted in Aristotle and then Cicero's definitions of “ridiculous” and “laughter”⁹ (Turner 2012, 63). The 18th century witnessed a change in such ridiculing attitudes, promoted by Conduct literature and brand new “codes of ‘polite’ manners” (*ibidem*). However, jest books and other forms of comic productions continued their unrelenting mockery, reinforcing no-

⁹ Turner reports that “Aristotle defined the ridiculous as a ‘species of the ugly’, whereas according to Cicero laughter proceeded ‘from the castigation of deformity and disgrace’ ” (2012, 63).

tions of “otherness” based solely on aesthetic and functional principles. Within this framework, Robinson’s case is rather unique. She was not only a disabled woman ridiculed in magazines but also a multifaceted celebrity whose life and persona were extensively publicized and discussed. Writers and the press of her time appropriated and scrutinized her many identities from multiple angles, depending on which aspect of her life or personality was their focus. As Munteanu accurately resumes, Robinson was both a *persona* and many *personae*:

Ann Mellor, for instance, argues for the existence of four competing versions – the actress as whore, the unprotected wife, the star-crossed lover and the successful artist. Analogously, Eleanor Ty identifies four different but certainly related constructions of Robinson’s identity – the tragic actress, the beautiful whore, the transcendent muse, and the novelist of sensibility. Linda Peterson suggests that Mary Robinson’s *Memoirs* combines two representations of its author – the beautiful mistress (more precisely the fall from innocence to infidelity) and the devoted daughter/mother. (2009, 124-26)

Even her *Memoirs*, which are not entirely autobiographical, present a filtered narrative of her final years. The lens through which the narration unfolds is that of Maria Elizabeth as a witness of the events but also as a caregiver and a daughter, burdened with the weighty legacy of such a provocative figure. Biographers often interpret this second part of the *Memoirs* as an attempt to cleanse and restore Robinson’s reputation (Mellor 2000, 282; Brewer 2016, 244), focusing on her career as a talented and renowned writer while glossing over her troubled love life and financial issues. From this perspective, Robinson’s letters provide a precious record through which the author could construct her own identity apart from her literary production and free from the external gaze that had shaped and constrained her.

In the final months of her life, Robinson was both physically impaired and suffering from excruciating illnesses. She depended on her daughter and servants for most daily tasks, needing to be carried around yet often confined to bed due to the pain and weakness that plagued her. Her death was not directly connected with her paralysis but appears to have resulted from a series of other pathologies which forced her to bed rest in the autumn of 1800. Her *Memoirs* explicitly state that:

Her body was opened, at the express wish of Drs. Pope and Chandler. The immediate cause of her death appeared to have been a dropsy on the chest; but the sufferings which she endured previously to her decease were probably occasioned by six large gall-stones found in the gall-bladder. (Robinson 1894, 240)

Her letters offer a unique insight into this painful period, capturing the anxieties and struggles that deeply marked her final months. Free from the requirements and impositions of the publishing world, her epistles reveal her unfiltered self and are grounded in the reality of her patient-like existence. Whether through letters, emails, private journals, or published autobiographies, what matters is the “clarity available only from putting into language that which we sense about ourselves” (Charon 2006, 70), not only in terms of feelings but rather in a broader sense of bodily perception and sensations. Robinson’s letters not only provide a detailed account of her last months but also serve as an unconventional form of autobiographical narration of her illness and her body in pain. Ironically, a body that had been publicly scrutinized for decades – as an object of both admiration and ridicule – ultimately found a suitable outlet in a more private form of communication. The spontaneous, fragmentary and informal nature of letters perfectly aligns with the accidental quality of Robinson’s storytelling: a form of recounting that unintentionally managed to convey every part of herself. Although unplanned, Robinson’s fragmented accounts of her physical condition simultaneously reclaim possession of her own body and recover a new voice for it to be heard. This reappropriation is

particularly significant in Robinson's case for two interrelated reasons. The first is the extent to which her body had been publicly sexualised, objectified and derided. As Cixous reminds us in her beautiful essay "The Laugh of the Medusa",

By writing herself, woman will return to the body which has been more than confiscated from her, which has been turned into the uncanny stranger on display [...]. Censor the body and you censor breath and speech at the same time. Write your self. Your body must be heard. (1976, 880)

The second reason is the need to reclaim a voice distinct from her personas as author, actress and intellectual: the voice of Mary, the suffering woman seeking comfort and understanding in the face of illness. Frank highlights this impulse, emphasizing that "seriously ill people are wounded not just in body but in voice. They need to become storytellers in order to recover the voices that illness and its treatment often take away" (2013, xx).

Through her correspondence, Robinson becomes the sole narrator of her illness. She starts with brief mentions in early August, when she informs Mr. Marshal that she is "languid, with sickness" and that her "health is in no degree better; on the contrary" she thinks that she becomes "every day weaker and incapable of either mental or corporeal exertion" (Setzer 2009, 310). She underlines how her "head is so disordered" that she fears that her "brain will catch the contagion of pain" (*ibidem*), rendering her unable to write. A similar sentiment appears on the 5th of August in a letter to her friend Jane, where she reports that the "warm weather has produced such languor in [her] spirits and constitution" that she is "scarcely capable of holding her pen" and she is "half dead with a nervous head-ache" (Davenport 2016, 314-15). At that time, Robinson clearly perceived her body and her mind as two separate entities. She even feared that the former could involuntarily infect the latter, as if her suffering were contagious. It is not uncommon for patients who experience physical pain to perceive their mind as a disconnected unit, an entity that is lucid and functional despite their ailing body. For healthy people, the separation between body and mind is either positive or neutral. However, when sickness occurs, this disconnection often becomes negative and accompanied by "a sense of the body as an other to the self, a problematic object that interferes with the self's projects" (Lindgren 2004, 149). In the summer of 1800, Robinson's letters precisely capture this negative dualism and reflect her identification with her mind and soul rather than her physique. The body, which belongs to the "external" world, is often "*acted upon*, subjected to nature, independently of the mind" (Irvine and Spencer 2016, 80). The mind, instead, "*exists outside nature*" (*ibidem*) and contains the patient's true self and soul. Robinson's experiences align with this feeling of disembodiment that can benefit patients with chronic illness or disability. Indeed, such a mindset helps them reconsider the "relation between body and mind or body and self" (Lindgren 2004, 147). By identifying with her healthy and productive mind rather than her aching body, Robinson could maintain a sense of control over her existence. The image of Robinson unable to write or even to hold a pen – a tool that was a natural extension of herself – is particularly revealing. Her body no longer responded to her so much so that her physical limitations interfered even with her most familiar activities.

Writing was central to Robinson's existence. Her pen provided a steady income, showcased her talent, legitimised her as one of the most prolific Romantic authors, and enabled her to be heard when denouncing social injustices. In her last months, however, writing became an act of survival. It connected her with friends while she was bedridden, allowed her to express her contradictory feelings, and helped her come to terms with an illness that wore her body down while slowly taking a toll on her mental sanity. The account of her illness necessarily corresponds to the narration of her ailing body, the *lieu* of the disease. However, Robinson often saw writing as a way to express her soul, emphasizing the body-mind (or soul) duality that characterises most

patients' stories. For example, her letter written on the 10th of October reveals an unrestrained overflowing of thoughts and feelings, marking a noteworthy departure from her previous epistles.

I never again wish to quit the little chamber where I am now pouring forth the true language of my soul. I am weary of its conflicts; – I am disgusted with all things; – self-alienated from all society – and, thank God! Secluded from a world which has, during three long years, been *hateful* to me. (Setzer 2009, 320; italic in original)¹⁰

Her words convey a profound sense of misery and mental exhaustion. Nonetheless, despite her frustration and discontent, what brings her solace in this difficult time is the chance to voice her true story, not from a body she no longer recognises as her own but from her soul. Her use of the term “true language” emphasises the authenticity of the voice she reclaims, unfiltered from external interferences. In the same letter, she tells Mr. Marshal, rather peremptorily, that he cannot blame her for her “repining”, as he cannot understand her “sorrows, [...] pains, regrets, anxieties, and disappointments” (*ibidem*). Robinson also mentions death as a relief from her earthly pain and liberation from an existence of suffering. She boldly admits that she sees herself as “guilty of a crime” by wishing to die rather than endure “a few more melancholy days on this earth [...] where [she is] destined to know nothing but calamity” (319).

As her condition worsened, her letters became an outlet for her most private thoughts and fears, especially regarding death, as well as a way to release all her frustrations. Her relationship with her caregiver, her daughter Maria Elizabeth, is a recurrent theme and a source of distress. Indeed, Robinson blames her for all her suffering. She confesses that she feels no blessing in her daughter's presence, stating that Maria “*lamented that* [her mother] *did not die*” after sending her back to her bed “overwhelmed with pain and sorrow” (321). However, in a previous letter to Jane Porter on the 27th of August, the author conversely describes Maria as her “adored Girl [who] is an indefatigable nurse” (Davenport 2016, 318). She goes on to add that it was her daughter's “affectionate solicitudes” (*ibidem*) that kept her alive. The same praise appears in a letter to Elizabeth Gunning dated 31st of August, where Robinson compliments her daughter, her “nurse in a long state of declining health”, and “how sweetly she can solace, how attentively she can watch the varying emotions of a wounded memory” (322). Such conflicting descriptions are not unusual. Caregivers' duties are often perceived as unnecessary impositions by bedridden patients who may not always appreciate the reasons behind treatments, recommendations or restrictions. Robinson explicitly writes that she feels like a “*prisoner and a slave*” (Setzer 2009, 321) but admits that she could not live “without this tyrannical child” (*ibidem*). Her words capture the complex attachment that often develops between patients in need of constant assistance and those who can provide it. A relationship further complicated by the “varying emotions of a wounded memory” (Davenport 2016, 297) – that is, Robinson's mutable feelings and suffering mind, which affected how she experienced the care she received. Adding to the tension is the reversal of roles. On the one hand, Maria, as a caregiver, had to “mother” her own mother, a situation that neither side found easy to navigate. As Robinson's case exemplifies, caregiving, with the enforcement of rules it necessarily involves, can evoke exasperation rather than gratitude towards those who perform it. On the other hand, family caregivers' lives are often put on hold as they assist their loved ones, constantly torn between the desire to escape and the duty to be dependable. Their mother/daughter – patient/caregiver situation was all the more problematic since Maria was to

¹⁰ Sharon Setzer here suggests a reference to her liaison with Banastre Tarleton which ended three years and a half before the letter, in April 1797 (2009, 333).

receive an allowance of 200 pounds a year after her mother's death.¹¹ Setzer rightfully connects this annuity to the heart-breaking sentence at the end of Robinson's letter: "I have reason to curse the moment when I made my own *death* the commencement of a child's *independence*" (2009, 321). Nevertheless, such a statement could also be read metaphorically as a mother's realization that, given her constant need for aid and care from her daughter, only after her passing would Maria be able to start her own independent life.

Financial concerns and her professional obligations also often appear in her letters as sources of distress and aggravating causes of her disease. Her illness was not a direct consequence of her agitation or sleeplessness, but the pressure from creditors and the threat of poverty intensified her anxiety, which, in turn, exacerbated her symptoms. Although impaired for most of her life, her disability became more prominent in this later stage. When her illness progressed to the point of total immobility and eventually affected her mind, it prevented her from living and working as she was used to. In such a critical state, her need for help and attendants was surely more pressing and, as a result, her concern for her finances increased. In a letter to Mr. Marshal on the 26th of September she admits that all her "labours will not satisfy the demands of domestic expenses" (Setzer 2009, 319). The extent of her anxiety regarding her job engagements is already evident in her letter dated 15th of August, where she describes being "so unceasingly distressed, so involved in *law expenses*, so oppressed with *ill health* and its attendant inconveniences" (312) that she missed a payment. The resulting threats made her "health and spirit [...] *worse than ever*" (*ibidem*). However, she adds that "repose and the *consciousness of security*" (*ibidem*) – a financial stability that could give her peace of mind and protect her from debts and imprisonment – might aid her recovery. On the 26th of September, she asked for Mr. Marshal's assistance with a payment to a publican who had threatened her with arrest if she failed to pay him back. Without Marshal's kindness, she writes, she would have to "quit [her] bed, at the hazard of [her] life" since at that point she was "very, *very* ill, and still attended by a physician" (*ibidem*). A few weeks later, on the 22nd of October, she recounts how she spent weeks working "at the hazard of [her] life" although her physician forbade her to use the pen (322). According to her *Memoirs*, her inability to work as industriously as she did before cost her a collaboration with the *Morning Post* whose editor "accused her of negligence" even though she limited her contributions because of her health conditions. Remarkably, Robinson wrote at least thirty-seven poems that were published in the *Morning Post* between July and November 1800 (334). It is an outstanding amount for a bedridden person who, in the same period, was undergoing physical treatments for a life-threatening disease and dealing with an understandable general agitation. Despite her constant need for money, the author confesses to her friend that in her "present precarious state of health" (323) she does not feel like she can take on any more work, as she realises that her mind is not always lucid. And yet, only a few weeks later, she reports that she cannot stop working: despite her "perilous situation, being at this moment weakened almost to the grave," she "cannot forbear writing" (325).

As Robinson's condition worsened toward the end of Autumn 1800, her narrative became more descriptive of her bodily troubles, sharing vivid details with her long-time friend Jane Porter. In a letter dated 15th of October, the author accurately recounts her physical issues:

Near a month confined to my bed [...] I have scarcely strength to thank you for your kind enquiries. My illness has indeed been so perilous, that I believe little hopes were entertained of my recovery. When

¹¹ The allowance was part of an agreement with the Prince of Wales negotiated by Fox in 1783, as reported by Bass 1957, Davenport 2011, and Setzer 2009.

my daughter received your letter I was in a state too terrible to describe! – one blister on my shoulders, another on my head; – which, with perpetual bleedings, and with the lancet as well as with Leeches, have so reduced me that I am a mere spectre. My disease lay chiefly on my head; – an intermitting fever on the brain, – attended with other symptoms of the most alarming nature. [...] I write against the orders of my Physicians. – But I could not resist my desire to thank you. I am still so feeble, that the smallest fatigue overwhelms me. (Davenport 2016, 328-29)

In just a few lines, Robinson provides a physical context for the pain she endured and the anguish she powerfully described to her friends in her correspondence. Her words also confirm her fear that her physical decay would ultimately infect her mind, as she had predicted in her earlier letters. Unfortunately, this was the last letter written to Jane Porter that we currently know of. Her final epistle, addressed to Mr. Marshal a few weeks later on the 11th of November, revolves again around her creditors and the relentless pressure she endured because of them, despite her dangerous condition. At this point, Robinson's narration alternates between moments of awareness that she is nearing the end – "I am nearly reduced to the margin of the grave" (Setzer 2009, 328) – and sparse words of hope. Until her last moments, she perceived her confinement to bed, "the *obscurity* to which [she has] been consigned these four past months" (*ibidem*), as almost as painful as her physical symptoms. From this perspective, writing to her dear ones about herself, narrating her illness, her feelings and fears as well as her everyday struggles allowed Robinson to exist outside of her bed-chamber. It enabled her to extend her presence to unreachable places, feel close to her friends, and remain included in social circles. Writing also offered her the chance to discuss topics beyond illness, briefly diverting her mind from her pain. At the same time, through her autobiographical narrative, Robinson managed to retain all her past selves while constructing a new, multi-layered identity shaped by her experience as a severely sick person. Her letters appear to be written from her soul but also "*through the body*" (Frank 2013, 2; italic in original), an ailing body finally re-appropriated by its owner and portrayed as it was – free from judgements, rumours and mockeries. Corresponding with her loved ones allowed her to share her story in her own words, capturing the feelings, uncertainties and decisions that, at that moment, defined her true self. The wide range of "varying emotions" she describes shows the extent to which this involuntary epistolary diary became a meaningful tool for her to cope with her deteriorating condition and inevitable fate. In line with Rita Charon's statement – "Telling our story does not merely document who we are; it helps to make us who we are" (2006, 69) – it could be argued that Robinson's last letters did not merely document who she was, but helped her make who she was during the most difficult period of her life.

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