

Introduction: inherited images

Robert Schumann probably exemplifies the popular image of the Romantic composer more fully than any of his remarkable contemporaries. Not only did he completely absorb himself in German Romantic literature in his numerous songs and choral works, but he recreated its musical personalities and intertwined them with his own life in music of extraordinary characterization and spontaneity. Yet equally – in gradually losing the capacity to relate to outward reality – he, like the iconic figures of this literature, succumbed to madness, attempted suicide and died insane. Thus he appears to express the Romantic concept of ‘genius’ – that it is not simply an extraordinary level of imagination and technique, but essentially supernatural: and that its ultimate price is madness. And nor was this image confined to his life: though completely unconnected with Schumann, the claim of successors to spiritualist revelations urging the release of his unpublished Violin Concerto, upwards of a century after its composition in 1853, has always seemed to fit this picture, recycling the memory of Schumann’s own hearing of voices from departed composers in his final decline. Thus Schumann’s reputation has always been one of mystery as well as sadness, constantly reinforced by visual images of the pensive man. And his tragic end has inevitably cast a pall over his entire life: everything has been viewed in terms of what we know is to come.¹

Nor has this image been entirely revised in modern times. The publication of vastly more of Schumann’s correspondence, and, from 1971,

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of the extensive diaries and notebooks, has served to reveal the fuller extent of his physical ailments and personal sufferings, not known publicly until his final breakdown in 1854, and always filtered in the early publications of documentation (see Further reading and sources (pp. 214–6)). And even in 1998 the revelation (through the publication of his doctor's records from his final hospitalization at Endenich between 1854 and 1856) that he had been treated for syphilis as a young man has fuelled further speculation about the source of his physical conditions by adding a completely new dimension to interpretation.²

The diaries, which greatly elaborated even the much expanded detail in Berthold Litzmann's extensive study of the life of Clara Schumann published after her death (from 1902) inevitably intensified interest in Schumann's health prior to his final decline. The added evidence of his frequent depressive episodes was quickly connected with the emerging study of depressive illness, and relations were sought between patterns of creative intensity and quiescence and his mental state, first proposed as that of 'manic depression', subsequently better defined as a bi-polar condition: an illness not merely the product of an 'artistic temperament', but of chemical imbalance that today would be treated with medication. Relations were then further drawn with other known depressive artists, for example Byron and Virginia Woolf. This culminated in Peter Ostwald's very influential study of Schumann, whose chapters are titled to chart alternating emotional states, thus presenting Schumann as virtually permanently ill, and his ailments all the result of the psychological conditions that drove his creative life: for example that his dual creative personalities Florestan and Eusebius were not merely creative alter egos, but evidence of a schizophrenic personality. But paradoxically, this interpretation also had the effect of reinforcing the traditional association between creativity and mental instability.³

The possibility of syphilitic infection has shifted interest towards the view of Schumann's many physical ailments as a consequence of the disease and that his depressive periods were the rational response to them. The key new point in this argument is that, though Schumann

did not manifest the clear symptoms of tertiary syphilis until the 1850s, his many 'routine' illnesses over the years were manifestations of the 'latent' secondary stage. Whilst Ostwald, and before him others, had long hazarded the possibility of syphilis (the timing of the tertiary phase at between 20 and 25 years after the onset of the disease coincides exactly with the observation of a definite change in Schumann's physical and mental condition from 1851), they saw it as only presenting itself at this late stage, and thus as not contradicting depression as Schumann's major health condition throughout his life. The great unknown in this interpretation is Schumann's own knowledge of this condition. Subsequent to his treatment for a sexual infection, noted in his diary in 1831, he makes no further reference to sexual infection until his statement at Endenich, thus consistent with his then stated view that he thought himself cured. This explains why he subsequently married and had a large family: that Clara did not apparently contract the disease is not a challenge to this view: she could have been a carrier, but not infectious.

In this interpretation, it was Schumann's realization at Düsseldorf of the permanence of the disease that caused his jump into the River Rhine on 27 February 1854 and his statements of guilt and wretchedness to Clara before. And thus that this act was a perfectly rational attempt to end what he had come to regard as a hopeless life. It seems clear that at this time he also discarded his wedding ring as a final act, since Clara later found a note: 'I am going to throw my wedding ring into the Rhine, [you] do the same, [both] rings will be united.' The fact that Schumann actually died of self-starvation at Endenich, and that this was possibly the adverse result of the treatment he received there from 1855, does not challenge the priority of this argument. Nor does the fact that Schumann added to the 1831 diary entry the expression 'only guilt brings forth nemesis' ('nur Schuld gebiert die Nemesis') prove his knowledge either: it demonstrates merely that he felt guilt at the consequences of his sexual appetite, which, from his student days until shortly before his attempted suicide, remained very strong, as can be drawn from the earlier diaries and his later diary specifications

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of occasions of sexual intercourse from April 1846 until 14 February 1854.⁴

Since posthumous diagnosis of Schumann's many symptoms will always be ultimately speculative, the causes of his health problems will always remain open. Either of these two views requires selective presentation: on the side of syphilitic infection, to play down the extremity of some of Schumann's depressive episodes and their frequency even when they measure closely against standard descriptions where no other infection is involved (and the fact that they began in his life before any evidence of infection, in his teens); and on the side of mental illness, to minimize other explanations of depressive states, for example alarmed reaction to bereavements. Indeed, any judgment is complicated by the fact that Schumann's was a complex personality with many eccentricities, and that he had a strongly superstitious streak with attraction to the paranormal and medical quackery, as well as many genuine reasons for depression. He had many fears: first of disease and premature death, of losing his sanity – he was terrified of being near mental institutions – and of heights. Yet most of these can be related to adult as well as childhood circumstances, and were not irrational, albeit that they were extreme. Physical responses to external pressures, for example through alcohol abuse, fed on each other to cause depression. But fears and seemingly irrational obsessions affect many people without their mental and creative capacities being questioned. Another complicating factor has been a temperamental/ psychological inheritance predicated upon interpretations of his family's mental health: that the father worked himself to death and the mother was depressive, and that the sister allegedly committed suicide. But the evidence of the sister's death is extremely unclear (see Chapter 1); and we do not know the depth of the mother's depressions: only that Schumann was constantly encouraging her to overcome her 'melancholy'.⁵

And there is no question as to the obsessive nature of Schumann's compositional drives throughout his life, and his consequent exhaustion. He found each genre the most important at the time, often

conceiving plans far beyond reasonable achievement. But is the condition that produced the ‘manic’ parts of *Carnaval*, the *Fantasia in C* or *Kreislaria* properly called illness? Many clinical descriptions of the ‘manic’ phase of the bi-polar condition imply a diminished sense of creative reality, of self-delusion – not exemplary capacity. And was the other, depressive, side of this one of total, hopeless depression, or rather of relative incapacity? Most of all, was all his intense work ‘manic’? Schumann did a vast amount of time-consuming work as editor and correspondent: he had a deeply scholarly and educative side. It seems inconceivable that he could have achieved all this in the mental state often attributed to him.

But however great the challenges of diagnosis, they must never obscure the central issue for musicians. There is no doubt that the traditional assumption of Schumann’s mental illness – whether one of incipient madness attached to creativity, or a progressive mental illness leading to attempted suicide – has influenced the evaluation of his music, especially his later music: and viewed the other way, that the often inward, even brooding character of some later music is evidence of a declining mind. In the present writer’s view, there is no such evidence until parts of the *Gesang der Frühe* and *Geistervariationen*, written just before the attempted suicide in 1854, which show a weakening of continuity after the wonderful opening and theme respectively. But otherwise, Schumann’s later music is of different character and reflects changing preoccupations. And if there is a certain fatigue, this is the result of physical strain and over-production, not of reduced mental capacity.⁶

No biography can ignore Schumann’s health. What became known as the ‘catastrophe’ of his attempted suicide in 1854 – the shock to his family, the world of music and his historical image – cannot be overstated. But until this event there is every evidence of a creative mind constantly engaged and able to communicate with his family and friends. His illness was certainly a major inconvenience, but not a determining factor in his creativity, his increasingly erratic behaviour from 1851 a consequence as much of his frustrating professional

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circumstances. As well as voluminous correspondence, Schumann kept detailed records: in reading them, negative images of the man are quickly dispelled. The Schumann of the day-to-day detail often comes across in a very positive way: he strikes one by his practicality, even down-to-earth quality, and his openness, which included acknowledgment of his health problems. He emerges as highly organized, as a competent businessman, sensitive all round throughout the differences with Wieck during his courtship of Clara, and a responsible and loving father and husband.

Nor was his death especially premature. Schumann outlived all his four siblings save the second brother Carl (who outlived him by only two years or so). Dying at 46, Schumann also outlived both his most admired immediate contemporaries, Mendelssohn at 37 and Chopin at 38. He was realistic about his talents and status as a young musician and retained his realism in later years as a sage observer of life and art. He certainly had humour, commenting on one difficult occasion to his publisher Hermann Härtel in 1849 'We musicians are touchy folks.' He had a very strong sense of self, and if he had little to say in spoken words, he was highly articulate in his writings. He commanded deep loyalty and affection for his personality as well as his genius, and dedication from musicians far and wide, and the impact on his close circle remained with them for their entire lives.⁷

It is thus from the perspective of a working musician, and drawing largely on his own words, that this book seeks to approach the challenges and achievements of Schumann's life afresh, completed, appropriately, on the 200th anniversary of his birth.

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The life of Schumann

Robert Schumann had a difficult start as a composer. Denied any significant musical upbringing, he took a long time through indirect routes to establish himself as a major composer. Persistent illness also dogged his work. His final catastrophic mental collapse has combined with the autobiographical and secretive aspects of his music to cast for posterity a veil of ominous mystery over his entire life. Yet this is only one view. Schumann battled his personal demons and was acutely self-aware and organized. He transformed himself from a brilliant youthful fantasist in small forms into a composer of extended works in every genre. This book provides a new focus on Schumann as a practical working musician interacting with the professional world to develop his creative gifts to the full, and examines the central role of Clara Wieck Schumann in helping to bring this about.

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