Introduction: Jane Austen and the body

The cover of this book shows the steps at Lyme down which Louisa Musgrove fell that fateful November day. It's a picture of a space, not of a body. And Jane Austen’s novels, I will admit, seem among the least likely texts on which to found a discussion of the body. Isn’t the body – absent, suspended, at best relegated to the inferior partner in the dyad of mind and body, as all agree is its position in our culture – virtually banished from her work? However we categorise them – as comedies of manners, or narratives of moral sensibility, of domestic politics, of the developing ethical consciousness, of heroines educated out of illusion, of the anxieties of choice, the subtleties of self-deception – these are novels whose titles, Sense and Sensibility, Pride and Prejudice, Persuasion, firmly ensconce them within an august and dominant tradition of moral adjudication, and by ‘moral’ here we must mean transcending the natural and the immanent. These are novels of a polite society too, in which obvious restraints are put upon the discussion of bodily matters, and the latitude of bodily expression allowed men and women, but especially women, is severely curtailed. ‘Even the Maid’ who was dressing Mrs Thrale’s hair in 1782, ‘burst out o’ laughing at the Idea of a Lady saying her stomach ach’d’¹ and the lady-like decorum of the age of sensibility is one which this author scarcely seems to infringe or question.

Such at least may explain the reactions of Jane Austen’s most notable detractors, several of whom seem to have focused upon just this absence of the bodily in her writing, ‘No glance of a bright, vivid physiognomy’ was to be found in her novels, complained Charlotte Brontë to Lewes. Instead they yielded
only ‘an accurate daguerreotyped portrait of a commonplace face’. Two years later she famously elaborated on this dismissal to W. S Williams, supplying with physiological specificity what she thought Austen lacked. ‘Her business is not half so much with the human heart as with the human eyes, mouth, hands and feet; what sees deeply, speaks aptly, moves flexibly, it suits her to study, but what throbs fast and full, though hidden, what the blood rushes through, what is the unseen seat of Life and the sentient target of death – this Miss Austen ignores.’ Lawrence’s response to ‘the mean Jane Austen’, an ‘old maid’ who typifies ‘the sharp knowing in apartness’ was even more visceral, if his meaning was much the same. Another detractor, Cardinal Newman, complained of Emma: ‘Everything Miss Austen writes is clever, but I desiderate something. There is a want of body to the story’ (though he might have had something else in mind). ‘Her books madden me so much that I can’t conceal my frenzy’, wrote Mark Twain in a letter of 1898. ‘Every time I read “Pride and Prejudice” I want to dig her up and hit her over the skull with her own shin-bone’, presumably, like Dr Johnson kicking the stone to refute Berkeley, to remind Miss Austen of the absoruteness of corporeal reality.

The critical tradition has of course taken these cries of dissatisfaction or repugnance seriously enough to answer, or attempt to answer, them repeatedly. It has usually been understood that the body in these condemnations is a metaphor or metonymy, and that what is felt to be missing is overt ardour or warmth or intensity of desire. Amplifying Raleigh’s remark that ‘the world of pathos and passion is present in her works by implication’, critics and writers have made it much of their business to mine the discreet and often understated surface of these texts, and they have repeatedly brought to the surface, made manifest, dramas of some political or sexual intensity. R. W. Chapman turned Brontë’s physiological metaphor against her conclusions in his 1948 Clark lectures when he quoted Donne’s phrase about ‘eloquent blood’ and defined the supremacy of Emma as being ‘above all in the flow of the blood beneath the smooth polished skin: a flow of human sympathy and charity that beats with a steady pulse, rarely – but the more
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momentously – quickening to a throb that sets our own veins leaping in unison’. Few later critics will have expressed their pleasure in the text so candidly, or unguardedly.

They have usually been governed by more austere purposes, concerned to authenticate Jane Austen’s position in the literary canon by showing that her novels, far from being ‘hermetically sealed’ as Reginald Farrer put it, from ‘the vast anguish of her time’ had been deeply implicated both in the political controversies of her age, and in the literary and ideological traditions through which they were conducted. Jane Austen (increasingly merely ‘Austen’) was inserted into a strong intellectual tradition, which – adapted and rethought through her position as a woman, and in the mode of the domestic novel – nevertheless was made the vehicle of commentary upon society, and especially of her class, at a crucial period of historical change. It was plausibly argued that Austen, though professing herself ‘the most ignorant and ill-informed female who ever dared to be an authoress’ to the Regent’s Librarian, and though certainly abstaining from the display of learning in her novels, had more than a passing acquaintance with the great moralists and philosophers of the previous century, and if her knowledge and indebtedness could not actually be proven, it became clear that the field in which her novels would henceforth be discussed would be marked out by these figures – almost all of them of course, male – standing sentinel on its boundaries. The abstract language of her novels was seen to marshal a whole hidden discourse of political morality. Austen became the Warrior of Ideas: the pupil of Locke and of Bishop Butler, Samuel Johnson’s daughter, the antagonist of Godwin, the peer of Burke.6

The recent, more explicitly feminist readings of Jane Austen are a continuation of this tradition (she has now joined Richardson’s admirers, become Mary Wollstonecraft’s sister) only sharpening the edges of the ironies to be discerned in the novels and explicitly contrasting the self-defining energies to be found in them with their overt adherence to conservative ethics and genteeel standards of reticence. No longer merely a warrior, Jane Austen is now a strategist of subversion, indirection and
displacement, and the theatre of war is the domestic hearth, the salient issue one of women’s relation to patriarchal structures and authority. One problem of this newly politicised Jane Austen is that once the field of politics has been redefined to include the subject of gender difference at its centre, then almost any item can be included in what Claudia Johnson calls ‘the lexicon of politically sensitive terms’, a word such as ‘sensibility’ becomes inevitably loaded with controversial reference, and the thesis is self-confirming, even though nothing like an explicit political position is declared or overt allusions are made. These readings position Austen against the conflicting grids of bourgeois individualism and conservative morality and in many ways match the adroitness and skill with which they credit Austen by the tactical subtlety of their own readings. The problems of female destiny in a society governed by disregard for the female come now to the fore of the debate, and the contradiction between Austen’s enterprise as an author and the restrictions upon the lady the source of the novels’ continuing life.

I have no quarrel with these recent readings, some of which have been among the most brilliant Austen has received. The chapters which follow will in many places confirm, intersect and engage with them. In particular, the emphasis in Mary Poovey and Claudia Johnson on the restrictions upon the open expression of female energy and desire in the novels of Austen and her female contemporaries is relevant to my discussion of the ways in which that desire is represented as doubling back and displaced into women’s bodies. But the feminism that is most relevant to this book is not the feminism, or protofeminism, of the later eighteenth century, in which Jane Austen has been situated with so much advantage to our understanding of her work. Much of what has been written about female destiny in the novels overlaps with the concern in this book with occasions in which that destiny is figured as illness or as attendance upon illness; and much of what I shall demonstrate about the novels’ interests in hypochondria and hysteria – and other manifestations of power as exerted through the body – belongs to the discussion of women’s roles that is situated, necessarily, within a
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given ideological framework. But contemporary feminist critics of Austen share with their older colleagues an interest in her as a political commentator, however subtle or indirect, however politics is defined. They highlight, in common with the now orthodox tradition, her interactions with her contemporaries, her address to social and historical issues, and that context is not the primary context I offer here. Indeed I find implausibly univocal many readings of the novels which seek to demonstrate their political or social allegiances or ‘thought’. But since there are certainly few precedents for a reading which thematises health (or ill health) within Jane Austen’s novels, to do so in the present context is to run the risk of being charged with returning the work to a marginal or apolitical status, or to seem foolishly eccentric, out, so to speak, on a limb.

Of course, it is obvious enough how full the novels are of mentions of sickness and ill health. Anyone reasonably familiar with their stories will recall how much the novels are littered with medical incident and props, from sore throats and flannel waistcoats, to thin gruel and headaches and Hartfield arrow-root, gout and Gowlands lotion, right sides and green tea. The paraphernalia of medicine could well be judged to be merely an aid to the effect of domestic realism, merely invisible to earlier critical detection because so obviously on view, domesticated, like the ‘several Phials already at home’ on the mantelpiece of the hypochondriac Parkers’ lodgings at Sanditon. One can see too how Austen makes use of these events of the everyday life to illustrate and develop moral character, as well as to further her plots: if Mrs Bennet sends Jane to Netherfield in the rain and shamelessly maroons her there with a cold and fever, in the hope that she might promote Jane’s relationship with Bingley, Austen just as pragmatically uses the same event to display how beautifully flushed her errand across the fields makes Elizabeth and to manoeuvre Elizabeth and Darcy together whilst Jane is on her sickbed upstairs, thus furthering the writer’s own designs. The scene of Louisa’s fall from the Cobb in Persuasion is similarly used to display a range of reactions – hysteria, fainting, shock, resolution and competence – and is clearly designed to be a turning point in the
education of the hero. Narratively, Louisa’s tumble is no accident. Hosts of similar instances might merely testify to how useful toothache or a sore throat or an enfeebled body can be to a writer who wishes to get a character out of the way or enlist sympathy for a heroine whom no one else regards. At the same time, the physical events or emergencies that are scattered through the novels, arbitrary as they are, like the sudden indisposition of Dr Grant which keeps Mrs Grant away from the final rehearsals of Lovers’ Vows (MP 171) serve to underpin or underwrite the moral dramas that they so often release – in this instance Fanny’s being pressed once again to take a part, and her renewed struggle of conscience. They act as reminders that not everything belongs to the moral world of choice and responsibility, though Jane Austen’s capacity to load meaning into the smallest events of life (who sits with whom on a sofa, or in a carriage) might lead one to entertain this gratifying illusion, which comes threateningly close to a hegemonic control over her narrative organisation. But then of course no bodily event is independent of interpretation or ideology: Mary Crawford hints that Dr Grant’s ‘illness’ is just the bon vivant’s disappointment with a tough pheasant and a ploy to keep his wife at home.

It’s certainly true that Austen’s texts are full of enquiries and incidents about health, but these are not to be taken at their own face value as segregated or divided from the novelist’s contemplation of social and political realities. Talk about health is seen, in these novels, and paradigmatically in Emma, as one way in which a community is constituted. Paying solicitous attention to others’ faces and bodies and their symptoms is the means by which human solidarity is confirmed, an expression, to adapt Samuel Johnson’s phrase, of that tenderness which by virtue of their common nature one person owes to another. But by the same token concern for the health of others serves to obscure or mask the psychological and social divisions which also traverse that community. Charity to the sick is thoroughly documented: Mrs Norris affects concern for the Bertrams’ coachman’s rheumatism; Miss Bates, whose mother is herself the blind recipient of Hartfield’s benevolence, visits the ailing
former ostler of her father, and Anne Elliot calls on the invalid Mrs Smith. It falls upon women, most notably, to heal, or at least to camouflage, the divisions that social and economic determinants inscribe into their world. In a similar fashion, enquiries about other people’s health, so abundant in the novels, disguise the operation of a good deal of social and (especially) gender politics. Readings of others’ appearance within the apparently non-political, non-controversial, because universalised, ambit of health serve to hide or displace the actually constitutive roles of economic and gendering forces.

Equally, talk about health is to be read in ironic cross-grain against the inner or psychological lives of the figures. In the early work ‘Catharine or the Bower’ written when Jane Austen was seventeen, Kitty Percival is prevented from going to the ball by an arbitrary, unmotivated interruption, a sudden and violent toothache. Her ‘friend’ Camilla persecutes her with pity from room to room:

‘To be sure, there never was anything so shocking, said Camilla; To come on such a day too! For one would not have minded it you know had it been at any other time. But it always is so. I never was at a Ball in my Life, but what something happened to prevent somebody from going! I wish there were no such things as Teeth in the World; they are nothing but plagues to one, and I dare say that People might easily invent something to eat with instead of them; Poor Thing! what pain you are in! I declare it is quite Shocking to look at you. But you wo’nt have it out, will you? For Heaven’s sake do’nt; for there is nothing I dread so much. I declare I had rather undergo the greatest Tortures in the World than have a tooth drawn. Well! how patiently you do bear it! how can you be so quiet? Lord, if I were in your place I should make such a fuss, there would be no bearing me. I should torment you to Death.’

‘So you do, as it is,’ thought Kitty.’

There are indeed different kinds of torture, as of cure, and if Jane Austen’s focus is on Camilla’s talking one, that is hardly the end of this matter. In the later texts, the contrast between a character’s experience in and of the body and others’ readings of it, sometimes the contrast between the feigned sensibility of fashionable currency and the real sensibility of suffering
generates much of the comedy and irony that surrounds Austen’s depiction of the whole self in society. The ironic incongruity that opens between Kitty’s physical experience and Camilla’s response is to be reproduced farcically in the interplay between Marianne Dashwood’s distress and Mrs Jennings’ ministrations, sombrely in the misconceptions between Fanny Price and Edmund Bertram, to become a structural principle of the relation between Jane Fairfax and Emma, to be deployed repeatedly to mingled comic, ironic and pathetic effect in a host of incidents in the mature novels. And comic or trivial instances to do with health do often of course focus major issues. ‘A thoughtless young person will sometimes step behind a window-curtain and throw up a sash, without its being suspected’, Frank Churchill teases the flabbergasted Mr Woodhouse, already anxious about draughts on heated bodies if the ball at the Crown goes ahead, but this, too, I suggest, is not merely an amusing incident but a confrontation that itself opens up conflicts and oppositions (between confinement and energy, for example) that are central to the metaphorical structure of *Emma*.

The body is normally merely enabling, transparent, taken for granted: it is only when it becomes painful or dysfunctional that its workings become disclosed to consciousness. 12 We accept it as the ground of our being in the world, unaware, until we fall ill, our teeth ache or our feet blister that in effect our body is between us and the world we inhabit. 13 ‘Illness is a voyage of discovery through the body that makes you marvel at how harmoniously it functioned in the good old days, before the virus had begun its withering assault’, as a victim of AIDS, Emmanuel Druilhle, writes. 14 Our health presumes upon the world, and this phenomenon of being is readily reproduced in most writing in the realist tradition, whose ground is precisely the functional competence of the bodily existence. Naturally then, the health or otherwise of a heroine (or villain) in a realist text is normally just as much an absence, and it is against a background of silence as to this topic that the eccentrically ill (or injured, or deformed) are articulated into prominence. But this – or so I argue – is not the case in Austen’s novels. The physical
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well-being of her figures is, on the contrary, at issue: embodiment, whether it be transcribed as Emma’s spirit, or Fanny’s debility, or Anne Elliot’s loss of ‘bloom’, is an important given of their life-worlds. Emma’s health is the enabling basis of her largesse with her ‘powers’, her enterprises and miscarriages in Highbury, just as Fanny’s physical insecurity is the ground of her fragile construction of a conservative self. In the novels these characters inhabit, the issue of health is, if not paramount, brought actively into play with the educational and courtship narratives that can concurrently be read from, or into, the texts. And indeed if the preceding century’s epistemology focused upon the responses of consciousness to the external world, the most significant eighteenth-century medical experiments examined the responses of the body – the bones, the tissues, the nerves – to the external world, and by a variety of agencies, of which the terms ‘nerves’ and ‘sensibility’ are but two, that medical understanding entered into general culture. In Jane Austen’s novels it is no longer possible to imagine the relation between the human subject and the world as one simply between mind or consciousness and external reality.

The bodily condition of these heroines is not an isolated factor in the play of meanings these novels entertain. If the healthy body is largely passive, unconscious of itself, then the unhealthy body, as a site of anxious self-concentration, is the source of events, of narrative energies. Especially in the novels of the second, Chawton, period, beginning with Mansfield Park in 1814, the question of health is brought to the fore and becomes a crucial element in the dynamic of Austen’s plots. In Marianne Dashwood, Fanny Price, Henry Woodhouse, Jane Fairfax, Anne Elliot, Mary Musgrove – to list only the main figures – health is a salient factor in their characterisation, an important given of their destinies within the social world. Health, for a woman, may be in the first place a commodity, and the novels pay their debt to that part of patriarchal culture in which the question of the woman’s body is resolved into its appeal to the male gaze. Fanny Price, pining at Portsmouth, has this touch of sympathy in a letter from Mary Crawford: ‘My dear little
creature, do not stay at Portsmouth to lose your pretty looks. These vile sea breezes are the ruin of beauty and health’; John Dashwood reminds Elinor that Marianne’s illness will mean that she can no longer expect to fetch a high price in the marriage market. This is the simplest and the crudest way in which, as Austen perceives, the body is implicated in social transactions. One other aspect the novels examine is the relationship of bodily preoccupation to the absence of productive work – in one form in Sir Walter Elliot, in another with Mr Woodhouse. This tracing of the relation of the body to other values – of health with romantic courtship, of ill-health with commerce, invalidism with lack of useful employment – is brought to a climax in the dazzling fragment, written in Jane Austen’s last months, set in a sea-side town, Sanditon, where Sydney Parker, brother of the gentleman who has abandoned his family’s old house, suggests that it might be put to good use as a hospital.

I am suggesting then that the body becomes most visible in Austen’s novels not in the framework solely of desire, but in the larger framework of health and illness. I do not mean by this that Austen herself specialises in detailed phenomenological accounts of illness, or – to speak more accurately – of disease. Marianne Dashwood’s fever is certainly, as I shall argue, a sequenced and cogent study, but this is a special case. If one were to take only one novel of Dickens, Dombey and Son, by contrast, one might find there material enough for a disquisition upon its portrayal of the birth, consumptive decline and early death of little Paul Dombey, not to speak of the startlingly graphic and exact presentation of Mrs Skewton’s aphasic stroke and its subsequent clinical course. In the year’s time span of Emma, on the other hand, there occurs a death and a birth, but very little is made of Mrs Weston’s pregnancy, and the birth of little Emma, not actually without significance in the novel, is, very properly, not reported. The ‘attack’ which brings about Mrs Churchill’s demise is unspecified, occurs at two removes, and is pointedly distinguished from the complaints that have made Frank run about the country attending on her. Jane Fairfax is suspected of ill-health, if not of actual sickness, but