Communicable Disease in the American Literary Imagination

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ABSTRACT

KELLY L. BEZO: Communicable Disease in the American Literary Imagination
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Communicable disease repeatedly found its way into early American fictional and autobiographical works. Rather than producing stories in which illness signaled dangerous otherness in need of control or even eradication, my study shows how authors from William Byrd II to Harriet Beecher Stowe used infectious disorders to develop *inclusive* conceptions of national belonging. By examining medical texts alongside literary works written from approximately 1720 to 1870, I make the case that like-cures-like principles undergirding inoculation and homeopathy helped to construct a worldview in which susceptibility to other cultures was seen as "therapeutic." Scholars have tended to interpret disease in literature as a device for stigmatizing outsiders—a reading well-suited to our modern age's ambivalent attitude toward exposure in an increasingly globalized world. But when we study this earlier period in American literary history, we find a remarkably different narrative. Indeed, I argue that attentiveness to the salutary effects of cross-cultural "infections" reveals an as-yet-unexamined national episteme in which foreign influences served to constitute community.

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Chapter 1

Introduction: Communicable Disease in the American Literary Imagination

This dissertation examines American writers whose autobiographical and fictional texts linked the transmission of disease to the formation of national collectives. Virginia planter William Byrd II was one such writer, who, in 1728, depicted exploration as an illness that spurred the English people to spread across the Atlantic Ocean, in spite of failed attempts at colonization: "*These wretches were set ashore not far from Roanoke inlet, but by some fatal disagreement, or laziness, were either starved or cut to pieces by the Indians. Several repeated misadventures of this kind did, for some time, allay the itch of sailing to this new world; but the distemper broke out again about the year 1606*" (1841, 2). Here, Byrd uses the metaphor of distemper, which referred to classical and early modern conceptions of illness as an imbalance in the humors, to underscore how the English people required expansion into the New World in order to maintain a healthful "balance" as a collective. Community is, in Byrd's formulation, the result of undertaking together to "treat" a shared "distemper." By positioning the Americas as a "cure" for a disordered English collective, Byrd raises a central concern for my study: how figurations of communicable disease positioned exposure to foreign peoples and places as necessary for national communities to coalesce.

An amateur physician himself, Byrd was writing about and studying medicine during a time in which very little was known about disease, its causes, or how it spread. Amongst physicians and lay persons alike, many adhered to a geohumoral model for

explaining illness, which argued the disease arose from diverse factors, including diet, exercise, climate, terrain, fashion, and even the alignment of the stars, interacting with the body's humors. Particularly mysterious to practitioners operating within such a paradigm was how some diseases came to be transmitted from place to place. Many theories tried to explain the phenomenon of epidemic disease. Some posited that the poisonous influence of miasmas was responsible, while others suggested "seeds" of disease were embedded in trade goods, such as bales of cotton, or travelers' clothes. Nevertheless, no consensus regarding the etiology of transmissible disease was ever reached during the period studied in this project—a fact that made it possible for writers like Byrd to imagine infectious disorders as positively informing constructions of national belonging.

Indeed, the period examined in this dissertation concludes around 1870 precisely because the late nineteenth century was a new era in the history of contagion—an era that imagined illness in profoundly different ways than the earlier age. By the 1870s the work of Robert Koch and Louis Pasteur prompted modern medicine to embrace the germ theory of disease, which identified microorganisms as the causative agent of communicable disorders. Not only did germ theory offer a definitive answer to how disease spread through populations, it also precipitated different ways of employing figures of transmission to imagine interconnections of peoples and places. As Laura Otis explains in *Metaphors of Invasion in Nineteenth-Century Literature, Science, and Politics* germ theory helped to construct the "the membrane model," which "based identity on resistance to external forces" (2000, 6). In other words, communicable disease came to represent in literature undesirable "invaders," from whose malignant effects bodies— including the body politic—required protection.

In contrast, the earlier period covered in my study produced writers who embraced their susceptibilities to external forces, which they saw as strengthening their individual bodies and the communities to which they belonged. Byrd did not see the English as "invaded" by a malign infection contracted while on the high seas and exploring an unfamiliar land. Instead, he envisaged them as cured thanks to contact with what was to Europeans a brand new world. For Byrd and his successors in the American literary canon, communicable disease provided a way to understand how collectives, which were becoming "mobile" and spreading along transoceanic networks, took shape in an increasingly globalized world.

It is worth noting, therefore, that the title given to this project contains a rather misleading—but instructive—anachronism. As Martin S. Pernick (2002) points out, it is not until after the development of modern microbiology that the term "communicable disease" came into use. He reminds us, "in ancient and medieval medicine, a contagious disease meant one that spread from person to person by touch. However, controversy raged for centuries over which, if any, specific diseases could be transferred in that way" (858). As later portions of this introduction point out, this remained the state of affairs during the eighteenth and nineteenth centuries, when physicians debated the contagiousness of bubonic plague, yellow fever, and cholera. By the early twentieth century, "communicable" replaced "contagious" in official medical literature (860). To refer to the diseases analyzed in this project as "communicable," therefore, is, to a certain extent, mischaracterize how writers and doctors from that era understood such illnesses. But, Pernick also teaches us that "*communicable* now means any disease 'capable of being transmitted.' It encompasses all sides in the older controversies over direct vs.

intermediate and sufficient vs. contingent contagion, while attempting to distinguish professional from popular usage" (ibid). I emphasize throughout this project that, even if they did not understand how diseases spread, the authors I examine most certainly understood them as transmitted—that is, moving along global networks of exchange. It was this communicability that materialized their own movements on these newly established networks, the traversal of which led them to interrogate what it meant to belong to a national collective.

This study contributes to a growing body of scholarship on medicine and American literature by elaborating how late colonial, early national, and antebellum writers used epidemic disease to construct an *inclusive* notion of national belonging.[1] Emphasis placed on, for instance, humanity's universal susceptibility to pestilential disease provided a logical grounding for viewing the sick as worthy of belonging as their healthy compatriots. Moreover, the offer of succor operated as the foundational act of community, as in the case of, for example, Charles Brockden Brown's novel *Arthur*

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[1] Scholarly assessments of the texts produced during early decades of the United States have increasingly come to recognize that diseases, patients, and doctors occupy a meaningful place in American letters. Scholarship in this growing subfield extends from the study of metaphors of disease to their relationship to the body politic. Some, like Cristobal Silva's (2011) recent monograph, consider how historical epidemics shaped literary production. Another good example of this first category—in regards to British literature, however—is Lawrence Rothfield's (1994)*Vital Signs: Medical Realism in Nineteenth-Century Fiction*. Rothfield examines how the practices of clinical medicine became, in the works of Balzac, Flaubert, and Eliot, narrative strategies in creating realism. Others, like Cynthia J. Davis's classic *Bodily and Narrative Forms* (2000), examine how literature claims the authority to describe embodiment. Stephanie P. Browner argues, for instance, that during the nineteenth century, writers sought to retain the power to describe embodiment in order to contest the ideological prominence of medical knowledge: "In short, as both medicine and literature professionalized and laid claim to widespread authority and elite privilege, their trajectories into respectability sometimes paralleled one another, sometimes reinforced each other, and sometimes were in tension. At times, fiction challenged medicine's somatic knowledge, contested doctor's ability to name and solve the body's mysteries, exposed the violence inherent in medicine's drive to epistemological mastery, and questioned science's equation of rational disinterest with white, educated masculinity. And yet fiction also found ways to use the figure of the doctor to argue for compassion as well as management, corporeal pleasure as well as normative health, sensitivity to the political history of bodies as well as somatic mastery, and appreciation of the body's mortal beauty as well as definitive diagnoses of disease" (2005, 4). The largest body of criticism representative of this second category, however, is that which studies the medicalization of women's bodies and the narrative efforts to reclaim the feminine from objectification. See the works cited in chapter five.

Mervyn (1799) when the eponymous protagonist joins the Stevens family home while suffering from yellow fever. These therapeutic communities correct an argument made by Joan Burbick that, during the first part of the nineteenth century, the "healthy body [was] a PREREQUISITE of citizenship" (1994, 4). Instead, the opportunity to help to *heal* others operates to instantiate collective belonging, itself a prerequisite for citizenship. Far from being excluded from the nation, the potentially pathogenic were imagined as the larger group's founding members.

I consider, in short, how American writers depicted *epidemics themselves* as constitutive forces of nationhood. Actual epidemics could provide therapeutic contexts through which members of a community could affirm their commitments to each other's care, as do the inmates of Sing Sing in 1832 when cholera crossed into the United States and into their prison. An outbreak, whether real or imagined, tended to foreground also how closely interconnected—and mutually dependent—the globe's nations were. Smallpox and the black death invited a recognition of the shared destinies of peoples linked together by trade, travel, and disease—so much so that writers like Nathaniel Hawthorne used smallpox to show how nationhood came into being as a result of both insiders' and outsiders' imagination. These writers, therefore, did not see their collective self-fashioning as dependent on what Priscilla Wald (2008) calls imagined immunities. She argues that from the late nineteenth century onward communicable disease continues to depict "global connections" and that "the ecological perspectives of the germ theories stresses communal transformation, the *conspicuously imagined* community is certainly in danger of dissolution. Yet, from its fragility—its tenuousness—it also derives its power, reminding its citizens that the community, and all of the benefits it confers on them, is

contingent on their acts of imagining, just as the literal health of the nation depends on their obeying the regulations set in place by medical authorities" (53). In an age beset on all sides by epidemics, however, the nation was in no danger of dissolution, since opportunities abounded to engage in that foundational act of community, the offer of therapeutic succor. Nor was this earlier nation understood as fragile or tenuous, since the geohumoral bodies on which it was modeled were as susceptible to tonic influences as toxic encounters and, therefore, as likely to be strengthened by the inevitable exposures of a globalized world. In this earlier era in which the best prophylactic for smallpox was inoculating with smallpox, imagining exposure likewise served to affirm national integrity. This nation was inclusive, then, both in the sense that it welcomed diverse types and it embraced the permeable boundaries existing between it and other collectives as contributing in beneficial ways to its constitution.

Just as it did in daily life, communicable disease repeatedly found its way into early American literature: from pestilential diseases like bubonic plague, yellow fever, and cholera to contagious illnesses *par excellence* like smallpox and tuberculosis. Five chapters, one each on a specific disease, elaborate how a range of authors used these disorders to found dynamic, accommodating constructions of national belonging. Some of these authors are well-known to literary critics today, such as Olaudah Equiano, Brown, Hawthorne, and Harriet Beecher Stowe, although their shared investments in using communicable disorder to talk about the body politic has been largely ignored. Long-forgotten and understudied authors, such as Meeta M. Duncan, Dr. Jermain Alanson Prime, Baron Ludwig von Reizenstein, and Hannah Gardener Creamer, participated in creating this literary tradition as well. Whether looking to Brown's

depictions of the 1793 yellow fever epidemic in Philadelphia in his novels *Arthur Mervyn* and *Ormond* (1799) or domestic novels' consumptive characters, such as Eva in *Uncle Tom's Cabin* (1852) or Alice Humphreys in *The Wide, Wide World* (1850), early American texts depict the salutary effects of cross-cultural "infections," revealing an as-yet-unexamined national episteme in which foreign influences served to constitute community.

Early American Medicine and Susceptible Collectives

Three developments in Western medicine particular to the period between 1720 and 1870—specifically the rise of anticontagionism, the invention of inoculation, and American resistance during the mid-nineteenth century to the French Clinical School's construction of bodies as inherently fragile—proved instrumental in developing a notion of susceptibility as a foundational attribute of collective belonging. For modern readers, immersed as we are in the membrane model, susceptibility to disease and, by extension, other cultures may seem anti-communitarian. But for those who understood their bodies in geohumoral terms, influence was an integral component of life itself. Susceptibility operated both as a pathogenic principle—too much susceptibility to a new clime, for instance, could result in degeneration—and as a therapeutic principle—the right amount of susceptibility, as was created in administering smallpox through inoculation, could confer life-long health benefits. Therefore, the body politic was also conceived as likewise constituted as a result of its interactions with its surrounding "environment": other peoples, places, cultures, religions, races, and ethnicities.

In 1720, what would be the last major epidemic of bubonic plague in Europe broke out in Marseilles, France. Physicians working in the pestilence-ridden port city became convinced that plague was not contagious because they did not see cases of direct contact leading to disease: individuals who buried plague-stricken bodies, for instance, were not necessarily afflicted themselves, and the illness did not seem to be carried into new portions of the city (Mead 1722, xvi-xvii).The position they and many other medical practitioners came to espouse was known as anticontagionism, a medical theory that posited bubonic plague, yellow fever, and cholera were transmitted through a shared environment: via poisonous miasmas or vitiated air generated in unsanitary ship holds or as a result rotting animal or plant matter.[2] Although dominant in this period, anticontagionism was just one etiological theory among many. For centuries a number of competing explanations were put forth, ranging from climatist to contagionist positions. For instance, preeminent American physician and signatory of the *Declaration of Independence* Benjamin Rush adhered to a belief that poisonous miasmas were the source

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[2] Erwin H. Ackerknecht (1948) remains the authoritative source on anticontagionism (aside from eighteenth- and nineteenth-century medical sources themselves, of course). The summary provided here is developed from his account (563-571). Booker (2007) provides a detailed account of anti-contagionism in Britain in the early nineteenth century, particularly in regards to legal reform and anticontagionism's staunchest promoter Charles Maclean's efforts in Europe and the United States to gain acceptance of his ideas (367-403). Even though medical historians have not neglected epidemic disease before the advent of germ theory—far from it, in fact—their interest in anticontagionism is somewhat overwhelmed by the influence of germ theory, which dictates that anticontagionism be viewed as a tragic error on the part of physicians and lay persons alike. As Margaret Humphreys points out, in the histories of yellow fever the "same saga" is often recounted: "The first cases appear; physicians and government officials try to hush it up; the disease spreads inexorably; people flee in panic; too little is done too late; hundreds or thousands die; and isolated examples of heroism are identified" (1992, 11). This narrative trend in yellow fever historiography we can now recognize, thanks to Priscilla Wald, is simply the outbreak narrative overlaid anachronistically on an earlier time: This narrative "follows a formulaic plot that begins with the identification of an emerging infection, includes discussion of the global networks throughout which it travels, and chronicles the epidemiological work that ends with its containment" (2008, 2). Historians, too, when looking back to historical epidemics see them in terms of emerging infections and epidemiological work, although they often must recognize that its inefficacies failed to produce a final stage of containment. In a certain regard, my study is an attempt to shed the interpretive conclusions demanded by the outbreak narrative and consider anticontagionism as its practitioners did: the newest and best approach to transmissible diseases science had to offer at the time.

of diseases like yellow fever and that climate, weather, terrain, and personal regimens of diet and exercise could contribute to either the malignancy or mildness of an illness. English physician Richard Mead likewise emphasized the role that weather could play in spreading and exacerbating the bubonic plague, although he firmly argued for the disease's transmission through direct contact with infected trade goods and persons.

Physicians of this period proved remarkably optimistic about their ability to treat or even prevent epidemic disorders—an optimism derived, in part, from introduction of inoculation into the West. Even if physicians at the beginning of the eighteenth century lacked a unified theory about what was causing diseases to spread through populations, across borders, and over oceans, they did believe that it was possible to inoculate for smallpox, thereby preventing individuals from potentially taking a fatally malignant version of disease the "natural" way and spreading it through vulnerable populations. The most ardent of anticontagionists recognized that smallpox, at least, spread via physical contact with an infected individual, even if they did not attribute this transmission to a microscopic germ. Tracing the use of new inoculation practices from the 1720s through the first part of the nineteenth century when cowpox vaccination replaced the more dangerous use of live smallpox, chapter one examines a newfound confidence in regards to potential therapeutic interventions (like inoculation) that manipulated individual's natural susceptibilities to disease in order to promote health. The principle of like-cures-like, a key tenet of homeopathy in the nineteenth century, informed also the practice of inoculation: for practitioners focused more on attending to suffering and sick individuals, it was not necessary to know the cause of a disease in order to undertake to treat or prevent it. Susceptibility to disease—safe ones like cowpox, at least—became human

beings' means of survival and, therefore, helped to position exposure to other cultures as potentially tonic as well.

The first four chapters in this project address inoculation and anticontagionism in terms of how literary authors mobilized them to construct an inclusive sense of collective belonging. These chapters elaborate how Anglo-American writers extrapolated physiological susceptibility to explain how one came to be assured of one's natural right to belong to a larger collective. As a chapter on bubonic plague demonstrates, colonials in Anglo-America viewed the plague's ability to infect all types of people—young, old, rich, poor, black, white—as a way to understand the British collective itself as having become diverse, especially in terms of its members' skin color and places of birth. Whereas this diversity was in British imperial contexts a way for coming to terms with how such multitudes could reflect one's national group, it became after the American Revolution the defining feature of democratic society. Chapters on smallpox and yellow fever address how Americans transformed a British precedent into a "unique" facet of the American character. Susceptibility became a figure of specifically democratic patriotism—one that was used by authors of yellow fever narratives to justify the constitutive role of women and blacks in the national community and also was employed by writers like James Kirke Paulding and Nathaniel Hawthorne to cast the British as dangerously insular in an increasingly globalized age. In chapter four, autobiographical accounts of unsuccessful attempts at quarantine underscore moreover how a community's revitalization literally depended on cross-cultural contact, which was positioned as *the* desirable consequence of the very transoceanic networks that spread epidemic disease. Rather than being viewed as a threat to the collective (as those icons of susceptibility

healthy human carriers became after the advent of germ theory), those who welcome external influences—like Tom Berryman "hoarding up symptoms...of amatory anxiety" for his British host in Nathaniel Parker Willis's short story about quarantine "Flirtation and Fox-Chasing"—represent the backbone of the nation (1842, 227). Ultimately, these authors envisioned American nationhood as emerging out of promiscuous mixtures of the globe's multitudes.

By the mid-nineteenth century, however, Western medicine was beginning to embrace the idea that bodies were fragile entities, subject to internal degeneration as a result of pathogenic processes introduced from without. This third development in Western medicine would prove the beginning of the end of an American democratic society that saw itself as revitalized by outside influences. At the same time that some authors from the United States were discovering their national identity in every cross-cultural encounter that occurred within or beyond their country's geographical boundaries, a new approach for understanding illness and treating the sick was developing in Paris. The French Clinical School approached bodies as scientific objects, capable of revealing the truths of their physiology through careful study of the pathological processes that interrupted their vital processes. As Michel Foucault shows in *The Birth of the Clinic*, this new clinical gaze introduced into Western thought a new of way of thinking about life as inherently degenerative. For American physicians studying abroad in Paris from the 1830s through the 1850s, this notion proved antithetical to their own commitment to healing and, although the French School's developing body of knowledge began to be integrated into medical practice in the United States, they

persisted their optimistic belief that human bodies were fundamentally vital entities, as susceptible to therapy as they were to disease.

As chapter five shows, domestic novels featuring consumptive heroines functioned as a final resistance to this idea of bodies' fragility and, more generally, the membrane model in all its forms. Some of the most popular pieces of fiction in the 1850s, novels by Susan Warner, Maria Cummins, and Harriet Beecher Stowe subordinated the consumptive's weak, tubercular constitution to her ability to forge resilient sympathetic bonds with the misfortunate and disenfranchised, as does Eva in *Uncle Tom's Cabin* when she builds a community amongst blacks and whites, rich and poor on a Southern plantation. In this way did domestic fictions endeavor, ultimately unsuccessfully, to disarticulate the destiny of an increasingly fragile body from that of the body politic. All of the chapters in this project thus aim to elaborate a detailed description of an early American conception of democratic nationhood—one that saw its constitution deriving from not only the many within its own borders, but also from the many beyond its bounds—that existed from the late colonial era through the American Civil War.

Understanding Early American Nationhood

Eighteenth- and nineteenth-century Anglo-American authors teach us that to interrogate ideas about disease was also to raise questions about the formation of national collectives. This project uses this framework to describe an inclusive national formation—particular to this earlier era—that emerges as an inextricable part of a discursive engagements with concepts of susceptibility and exposure. Other kinds of nation, whether pre-modern or modern, have been understood as communities linked by a

shared language, literature, religion, race, ethnicity, geographical location or culture (Hastings 1997, 3-19). Throughout this project, chapters emphasize instead this other kind of nationhood's dynamism, modeled on the perceived mutability, plasticity, and resiliency of human bodies. As such, it is a nation constantly undergoing transformation, expanding to include new types of individuals who are open to the influence of others. Such a way of thinking about belonging enables Henry T. Tuckerman, writing about his experiences in Mediterranean quarantine, to describe his friend Delano as beneficially altered by cross-cultural exposures: "the idea of thrift, the eager sense of self-interest, and the iron bond of local prejudice, which too often disfigure the unalloyed New-England character...had been tempered in their just proportion, in his disposition, by the influence of travel and society" (1838, 494). Indeed, the narratives examined in this project persistently figure contact with the potentially infectious—a city like London, a contaminated garment, a sick neighbor, a foreigner from a strange land—as the means through which to beneficially construct the national self. Such a model of nationhood comes into existence by virtue of its dependency on exposure to other peoples and places.

My approach, which considers how embodiment and physiological processes shaped early Americans' understanding of collective self-fashioning, allows this project to demonstrate that this early instantiation of American nationhood cannot, in fact, be categorized as an example of what Benedict Anderson defines as the modern nation. Anderson's influence on scholarly interpretations of nationhood cannot be underestimated. First published in 1983, with subsequent expanded editions in 1991 and 2006, *Imagined Communities: Reflections on the Origin and Spread of Nationalism* has

become the gold standard from which are derived the descriptive and analytical

parameters for discussing the nation. He argues that a nation should be defined as

> an imagined political community – and imagined both as inherently
> limited and sovereign....*imagined* because the members of even the
> smallest nation will never know most of their fellow-members, meet them,
> or even hear of them, yet in the minds of each lives the image of their
> communion....*limited* because even the largest of them, encompassing
> perhaps a billion living human beings, has finite, if elastic, boundaries,
> beyond which lie other nations....*sovereign* because the concept was born
> in an age in which Enlightenment and Revolution were destroying the
> legitimacy of the divinely-ordained, hierarchical dynastic realm....it is
> imagined as a *community*, because, regardless of the actual inequality and
> exploitation that may prevail in each, the nation is always conceived as a
> deep, horizontal comradeship....this fraternity makes it possible, over the
> past two centuries, for so many millions of people, not so much to kill, as
> willingly die for such limited imaginings. ([1983] 2006, 6-7).

The terms Anderson uses here to describe the modern nation—limited, sovereign,

community—all belong to the membrane model in the sense that they delineate a national

collective that sees itself as a kind of organism, bound together by horizontal

comradeship. Ambivalent of those who lie beyond its sovereign limits—its "finite, if

elastic, boundaries"—and concerned with imaginatively reinforcing those boundaries, the

modern nation sees itself as potentially assailable by external forces. The earlier

American nation does evince some similarities with the modern nations that will take on

their full shape by the end of the nineteenth century. For instance, imagining epidemics

helps to produce a type of imagined community, as do physicians like Richard Mead

preparing for a potential outbreak of the bubonic plague in British territories or authors

like Charles Brockden Brown remembering actual epidemics of the 1790s eastern

seaboard. But, an imagined community shaped through epidemics foregrounds how the

experience of one nation is shared with other afflicted countries, thus replacing finite with

permeable boundaries. Over and again, American writers and doctors of this era

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underscored that it was the ability to locate in others similarities to oneself that—as in the application of like-cures-like therapeutic measures—assured the resiliency of the body politic. This early American nationhood, then, constructs itself through not only its own imagination, but also through the imagination of those beyond its borders, and moreover, it assumes that horizontal comradeship extends to the citizens of the globe.

This project shows that to study early American literature and culture from the perspective of nationhood is, in fact, to take a globalized approach. Contrary to a current scholarly climate that argues, on the one hand, that "nation-state cannot serve as an intellectually coherent frame for literary and cultural study" and, on the other hand, that the globe provides the only proper analytical frame for undertaking such critical work, I argue that the exchanges along transoceanic systems of trade and travel during the eighteenth and nineteenth centuries should be understood as producing, among other kinds of economic, cultural, and social assemblages, new kinds of national collectivities (Jaudon forthcoming, 8).[3] Before the membrane model gained ascendency at the end of the nineteenth century, with its a conception of nations as invade-able entities in need of protection from the vagaries of the global networks that connected them to the ostensibly

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[3] Since at least the publication of Gloria Anzaldúa's *Borderlands/La Frontera*, the study of American literature and culture has undergone what many have identified as a "transnational turn." This new mode of scholarship takes as analytical frames perspectives such as the Atlantic (Giles, Doyle, Shapiro); the transnational (Fishkin); the hemisphere (Levander and Levine); and the Americas (Brickhouse, Gruesz). Important works in this field include Kirsten Silva Gruesz, *Ambassadors of Culture: The Transamerican Origins of Latino Writing* (2002); Anna Brickhouse, *Transamerican Literary Relations and the Nineteenth-Century Public Sphere* (2004); Ralph Bauer, *The Cultural Geography of Colonial American Literatures: Empire, Travel, Modernity* (2003); Paul Giles, *Virtual Americas: Transnational Fictions and the Transatlantic Imaginary* (2002); Stephen Shapiro, *The Culture and Commerce of the Early American Novel: Reading the Atlantic World-System* (2008); and Laura Doyle, *Race and the Rise of the Novel in Atlantic Modernity, 1640-1940* (2007). Edited collections of note include Kaplan and Pease, *Cultures of U.S. Imperialism* (1993); John Carlos Rowe, *Post-Nationalist American Studies* (2000); Caroline Levander and Robert Levine, *Hemispheric American Studies* (2007); Heidi Tinsman and Sandyha Shukla, *Imagining Our Americas: Toward a Transnational Frame* (2007); and Ralph Bauer and José Antonio Mazzotti, *Creole Subjects in the Colonial Americas: Empires, Texts, Identities* (2009).

"outside" world, in this earlier era the nation was one facet of the global networks, and it was derived from and renewed through the kinds of contact natural to them. The nation simply was a consequence of people interacting in the world, not a bulwark against it.

While certainly a global age, this period during which the American colonies became the United States and this new people worked to articulate what it meant to be a member of a democratic community was also most emphatically a national era. But because it is a kind of nationalism so alien to how we understand modern nations, it can often be misread as proto-national. Paul Giles's *The Global Remapping of American Literature*, for instance, differentiates between the "nationalist phase" in American literature and culture from 1865 to 1981 by referring to the commonalities between the "current transnational phase" and the "writing from the periods on either side of the War of Independence, when national boundaries were much more inchoate and unsettled" (2011, 21). Giles assumes that, as a result, "the country's sense of national identity was as uncertain, as provisional, as its cartography" (5). Early American national identity was only uncertain and provisional in the sense that it mutability was valued over the potential for homogeneity. Arguments for marriage across racial and national boundaries, casting such cross-cultural romances as contagious, and the extension of the family to include, again, members from different races or places of birth are tropes and plots that come to represent in this early period's national literature a sense of American-ness as multiple. As a character speaking for quintessential American-ness states in James Kirke Paulding's 1825 satire *John Bull in America*, democratic nationals "like to collect all we can from strangers as well as others" (185). Americans embraced promiscuous cross-cultural mixtures as their democratic destiny.

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Literature in an Era of Exposure

In this globalized age of cross-cultural and physical contact, literature provided the means for a nation's members to envision their place within larger networks. As such, literary works studied in this project tended to gesture to their own edges, pointing the way to the other material and imaginative conditions that shared the responsibility for constituting the national collective. The stories they tell about peoples and disease—and ultimately community—tend to exceed the novels, essays, autobiographies, letters, and short stories in which they are recorded. For instance, the 1793 yellow fever epidemic is already ongoing at the beginning of the first volume of *Arthur Mervyn* and continues unabated after the novel's close. So, too, are Knickerbocker accounts of quarantine often begun *in medias res* and brought to a conclusion while still behind lazaretto walls. Although on the path to recovery, the consumptive heroine of *Delia's Doctors* (1852) suffers from the effects of a weakened constitution, even beyond the final pages of the book. These texts foreground literature's inability to contain, and thereby stand in for, the national community. In doing so, they help us to question the role that imagination plays in constituting early American nationhood.

By the end of the nineteenth century, the advent of the modern nation positions texts themselves as acquiring a critical agency in regards to community formation, whereas during this earlier period stories and autobiographical works engaging communicable illnesses were able to emphasize the larger networks on which the national collective was dependent. One of the most enduring legacies of Anderson's work on nationhood—for literary critics especially—is his emphasis on the imagination. Nations

acquire their modernity, he argues, because the economies of print capitalism make available a shared set of texts, histories, and mythologies that, when engaged by a reading public, become the basis of their community: "the convergence of capitalism and print technology on the fatal diversity of human language created the possibility of a new form of imagined community, which in its basic morphology set the stage for the modern nation" ([1983] 2006, 46). Figurations of epidemic disease allow these texts to make the case that it is the imagination of others as much as that of the community itself that prove requisite for assuring a national collective's integrity. A known contagious disorder like smallpox, as chapter one demonstrates, helped to make these cross-cultural interdependencies readily apparent. Other chapters, in which authors under discussion presume that yellow fever and cholera are non-contagious, similarly show how humanity's universal susceptibility to these disorders signifies discrete communities' shared destinies. Rather than helping to produce a national imaginary, literary works operate in ways similar to epidemic themselves by materializing inextricable ties linking the nations of the world.

As such, I argue that the writers examined here believed literature could potentially prove equally as dangerous as epidemics in regards to the nation's constitution. Chapter three examines how yellow fever narratives underscore how the generic conventions of gothic and sentimental narratives, by limiting the kinds of roles women can adopt in the larger community, threaten the nation's efforts at self-fashioning. Suspicious of the potentially stultifying effects of narrative, these authors worked to craft texts that indicated the many aspects—imaginative, corporeal, territorial, and transoceanic, cross-cultural—that contributed to a community's formation. Surprisingly

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homey foreign quarantines and equally cosmopolitan domestic spaces, discussed in chapters four and five respectively, represent how exposures to many peoples and places served the good of the body politic. They understood their community as contingent upon much more than acts of imagination, which functioned mostly to foreground the additional elements of exposure necessary to collective constitution.

My claims about literature as a means to emphasize the role of both foreign and domestic influences explain how, even without an established print-culture, early America was still able to develop a national culture. As Trish Loughran argues in *The Republic in Print: Print Culture in the Age of United States Nation-Building, 1770-1870*, the absence of a national print public sphere in the United States' early national period allowed "a proliferating variety of local and regional reading publics scattered across a vast and diverse geographical space" to function as a catalyst to community formation (2009, xix). Paradoxically, she asserts, it was the heterogeneity of expression that undergirded the United States' national character and the bonding of individuals into a collectivity (ibid). More importantly, however, the various reading publics ensured that the multiplicity that constituted the body politic in the United States would remain represented in its textual output. Moreover, that textual output would remain diverse enough so as to prevent it from becoming malignantly homogenous. Only in our later, modern age of membrane models and imagined immunities would a certain degree of homogeneity be requisite to ensure the nation's integrity.

While my dissertation emphasizes the complex interactions of place, disease, culture, and imagination that create the discursive conditions for constituting the nation, my analysis proceeds by engaging questions of literary style. More important than genres

(or narrative more generally) in these texts were literary devices—such as foreshadowing, direct discourse, irony, satire, and characterization—that helped resist the potential of written works to become too homogenous. For example, the use of direct discourse in yellow fever narrative undermines the too-narrow roles accorded to women by gothic and sentimental narratives. In the works of Byrd and Paulding, satire operates as a means to produce heterogeneous stories by virtue of double meanings engendered by this style. Knickerbocker irony, by undermining contagionist positions, served to create for American readers back home a way to accommodate the role of foreignness in national self-conceptions. Finally, consumptive characters became a way to oppose empirical scientific narrative efforts to cast bodies as inherently fragile. In this way did literary devices function, to a certain degree, homeopathically: a smaller "dose" of literariness that, in contrast to genres, had more beneficial effects in regards to the constitution of the national collective. Literature indeed proved to be, as Kenneth Burke claims in *The Philosophy of Literary Form*, a "'medicine,' therapeutic or prophylactic" (1974, 61). But, it operated as a therapeutic intervention that, like smallpox inoculation or so-called heroic measures or medicinal compounds, could have toxic as well as tonic effects

Chapter Summaries

Beginning in 1720 and concluding in the decade following the Civil War, the five chapters in this project narrate the development of a dynamic, inclusive early American nationhood from its roots in the eighteenth century to its obsolescence during the mid-nineteenth century. Chapter one, entitled "Imagining Exposure in the Age of Inoculation," focuses on works by Anglo-American authors George Keate, Royall Tyler,

James Kirke Paulding, and Nathaniel Hawthorne published between 1789 and 1838. It situates this national formation's origins within the history of the West's acceptance of inoculation practices.[4] Because it transformed disease (first smallpox and later cowpox) into therapy, inoculation helped to establish a way of thinking about exposure to potentially dangerous influences as having long-term benefits. Anglo-American writers extrapolated this medical logic of susceptibility-as-defense (which positioned susceptibility to disease as the prerequisite of prophylactic intervention) to cross-cultural interactions, likewise constructing instances of foreign influence as invigorating the body politic. The chapter's analysis begins with English author Keate's biographical account of a Pacific islander prince coming to England, where he tragically dies of smallpox before he can be inoculated. A cautionary tale, Keate's history uses Prince Lee Boo's death to warn British readers of the necessity of managed exposures with foreign collectivities for a nation to survive in an increasingly globalized world. The rest of the chapter examines how American texts by Tyler, Paulding, and Hawthorne co-opt what was British imperial notion of the positive results of international susceptibilities and recast it as a particularly American—and democratic—ethos. Whereas Tyler's abolitionist novel *The Algerine Captive* (1797) uses the logic of salubrious cross-cultural susceptibilities to encourage a nascent American readership to see inclusiveness of racial and religious others as true republicanism, Paulding and Hawthorne so fully appropriate this idea as to erase its British origins and insinuate that what makes Americans superior to the English is their openness to foreign influence.

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[4] Wolfram Schmidgen's (2012) recent work on the emergence of the value of mixture in late-seventeenth- and early-eighteenth-century British culture suggests that the roots of this national episteme extend to an even earlier period than that defined by the arrival of inoculation in the West. Indeed, the Anglo-American receptivity to this medical practice was perhaps made possible by a broader cultural shift embracing mixture.

The British origins of democratic heterogeneity developed in relation to eighteenth-century plague discourse, in addition to inoculation. Chapter two, "Plague Discourse and Constitutions of Eighteenth-Century Collectives," delves into the role that imaging the plague played in laying the groundwork for an inclusive definition of American nationhood. It examines William Byrd II and Olaudah Equiano as "plague authors" and shows how they extended ideas about the causes and treatment of the black death to argue that English nationhood had become, as a result of the Age of Exploration, an expansive, trans-geographic, and heterogeneous entity comprised of diverse peoples living in various locales. Whereas Byrd positions this kind of English nationhood as a positivity—a source of the body politic's revitalization—Equiano warns that a failure to recognize the nation's multiracial constitution would result in its dissolution. Being attentive to how these authors invoke pestilence in their autobiographical texts, therefore, reveals a new commitment to heterogeneity. Texts like those by Equiano and Keate suggest that the imperative to envision national collectivities as heterogeneous provoked a crisis in English self-fashioning that at the end of the eighteenth century remained unresolved. On the other side of the Atlantic, however, newly-minted Americans created their national identity around the multitude, a discursive phenomenon I refer to as the plague roots of American nationhood.

Engaging texts written between 1790 and 1860, chapter three, "Yellow Fever and the Making of America," argues that fictional prose works telling stories about yellow fever epidemics—the so-called "American plague"—aimed to realize in full the democratic promise expressed in the Revolution and, counter-intuitively, in the outbreaks experienced by the nation in its first decades of existence. Works by Meeta M. Duncan,

Charles Brockden Brown, Augusta Jane Evans, and the Baron Ludwig von Reizenstein underscore that a truly democratic society requires liberated women in order to come into its full maturity. Moreover, they show that nationalist genres in both sentimental and gothic forms undermine such a democratic society's emergence precisely because they tend to limit the roles imagined for women in the body politic. These stories show women achieving true independence when released from societal strictures during times of epidemic crisis and from the narrative constraints of genre, an effect produced through the strategic use of direct discourse. The female protagonists of these texts become the nation's true patriots—along with their real-life black counterparts, such as those freemen and freewomen who cared for the sick during the 1793 yellow fever outbreak in Philadelphia—because each, despite their susceptibility to yellow fever, provides the necessary therapeutic care to keep the national community from complete dissolution. In other words, in the fictional worlds of these novels, an epidemic materializes community and shows how the disenfranchised are the very individuals who keep the nation from utter destruction at times of crisis and on a daily basis.

In other words, American democratic society grew out of what its members saw as unavoidable interconnections across gendered, racial, class, national, geographical, and corporeal lines. In chapter four "Lazaretto Life and Collective Belonging in the Context of Containment," this sense that the nation arose in its strongest and most vital form when it resulted from interaction and exchange found its perfect expression in autobiographical stories, written in the 1830s and 1840s, about failed efforts at containment. This chapter studies accounts written, on the one hand, about primarily American travelers' detainment in quarantine in the Mediterranean and elsewhere, and on the other hand,

about cholera coming to Sing Sing in 1832. In the former, cholera is conspicuously absent, whereas in the latter a prison community's survival of it features prominently. In both, containment is framed as an ambiguous undertaking at best; boundaries, however much those imposing them would wish they could keep disease out and prisoners in, prove permeable and prone to encouraging contact, as opposed to preventing it. This permeability, far from threatening national self-conceptions, tended of foster it for travelers and prisoners who found in unlikely circumstances the very homes they thought they had left behind, either in the vagaries of being abroad or as a result of crimes committed—and regretted. As in the context of pestilence, these authors, including Knickerbocker giants Henry T. Tuckerman, Nathaniel P. Willis, and Theodore S. Fay, recognized that national collectives took shape because of their interactions with other peoples and places, instead of in opposition to them. This sense that nations were not, in Anderson's terms, in possession of "finite, if elastic, boundaries" and that other nations did not exist in some kind of abstract "beyond," but that they were coexistent and mutually constitutive as a result of the permeable boundaries connecting them produced what I term, in contradistinction to trans-nationalism, cis-nationalism. This kind of nationalism develops by being, as the prefix "cis" denotes, "on the same side" as other, discrete collectives—a reality underscored by the spread of epidemic diseases, which thoroughly disregarded the boundaries established by state powers.

But this accommodating version of nationhood would not endure much beyond the Civil War. By mid-century, physicians began to suspect that bodies were inherently fragile entities, easily damaged from within by pathological processes introduced from without. Facing increasingly rancorous altercations between

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abolitionists and slave-owners, Americans feared the national body was proving similarly unstable and in danger of dissolution. Chapter five, "Consumptive Communitarians and Inclusive Nationhood's Final Decades," considers how four domestic novels by Susan Warner, Maria Cummins, Harriet Beecher Stowe, and Hannah Gardner Creamer use consumptive characters to signify a final resistance to these suppositions. These characters, despite their weak constitutions, forged resilient sympathetic bonds with the misfortunate and disenfranchised, thus representing a kind of community-building still reliant on exposure. Little Eva's enduring influence on other characters in *Uncle Tom's Cabin*, even after succumbing to death, marks the end of an era that saw contact across borders as fundamental to republican collectives. This project thus provides new insights into the conditions of possibility for American nationhood from its first rumblings in the eighteenth century to its full federal flowering in the 1870s—insights that will throw into sharp relief the profound differences between democratic societies then and now.

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Chapter 2

Imagining Exposure in the Age of Inoculation

Immunity is in fact both a rather old and a quite new idea—but not, interestingly enough, one central to early inoculation practices. First conceived of as a legal status in ancient Rome, it indicated an individual's exemption from certain laws or obligations (Silverstein 2009, 3). For centuries it remained exclusively a juridical concept. During the 1880s and 1890s, however, nascent biomedicine fused it with another relatively new legal right—the right to self-defense, first defined by Thomas Hobbes in light of the English Civil War—to describe the body's response to disease (Cohen 2009, 3). In other words, not until the ascendency of germ theory would this legal concept acquire new life in medical domains as "immunity-as-defense" (ibid). In the meantime, inoculation became a standard medical practice in the West beginning in the eighteenth century—a procedure looked back to as early milestone in the history of immunology (Silverstein 2009,12-16; Stettler 1972, 255). However, Anglo-American physicians portrayed it simply as rendering patients "secure from future infection" (Jurin [1722] 1795, 198; see also Rush 1794, 303) or, in the case of cowpox vaccination, as a "perfect defence [sic]" against smallpox ("Review of Practical Observations" 1802, 423). For historians of immunology, the odd absence of the word "immunity" in the vocabulary of eighteenth- and nineteenth-century inoculators has been largely overlooked in favor of detecting in earlier medical paradigms the presence of concepts now united under the term (see for example Silverstein 2009, 5).

This chapter argues that early inoculators understood the nature of physiological defense quite differently than we do today, and therefore their ideas about prophylaxis should be examined out from under the umbrella of biological immunity. To be fair, notions of "security" and "defense" were crucial to both a modern biological concept of immunity and earlier inoculation practices, so it is easy to understand its retrospective application to the eighteenth and nineteenth centuries. Anglo-American writers who adopted smallpox and inoculation practices as literary devices in order to talk about building community in a globalized, increasingly interconnected world—just as authors continue to do after the advent of germ theory—help to demonstrate alongside medical writers, however, that the age of inoculation embraced the communitarian consequences of *susceptibility*.

During the earliest history of Western inoculation practices, medical practitioners imagined the body as largely indefensible and the likely victim of any number of disorders. Susceptibility to smallpox in particular was assumed to be a given: "there are very few, who escape having the small pox sooner or later in life" ("Smallpox Communicated" 1787, 127). While today we believe that susceptibility to disease is precisely what having a functioning immune system is supposed to ward against, inoculation proponents from Cotton Mather and Zabdiel Boylston to Benjamin Rush and Benjamin Waterhouse relied upon a wide-spread belief in human being's physiological susceptibility to make the case for the efficacy of first smallpox inoculation and later cowpox vaccination (for an introduction to Anglo-American eighteenth-century inoculation practices see Carrell 2003). In other words, the body's *susceptibility* to disease was, in fact, its defense.

Susceptibility-as-defense, to adapt Cohen's phrase, as we might surmise produces a quite different imaginative extrapolation to collective belonging—one that evinces a commitment to exposure to other peoples and places, in contrast to our modern ideal of inviolate human and national bodies. Much scholarly energy has been devoted to elaborating the intellectual and political ramifications of the former episteme, which Laura Otis helpfully identifies as the "membrane model" (2000, 3-7). Otis argues, "reflecting both scientific fears of infection and nationalistic fears of infiltration, the membrane model based identity on resistance to external forces, many of which are projects of undesirable internal drives. Penetration of one's 'membrane,' whether by bacteria or by foreign ideas, represents an insult, a subversion of selfhood" (6-7).[5] Because biological immunity to disease is seen as arising, paradoxically, from allowing within the bounds of the body a small portion of the pathogenic element, the membrane model is rather fraught with anxieties about exposure to other cultures, fearing their toxic qualities will overwhelm their tonic potential. So pervasive is this way of thinking about the creation of national groups—especially when parsed through the symbolics of transmissible disease—that we unwittingly let it take control of our readings of the time before germ theory.

For instance, the early decades of the American republic, which also saw the rise of medical professionalism, can seem like the point of origin for a kind of thinking that uses the body's health as an index for the analogous health of the body politic. Increasing confidence in medical practitioners' ability to diagnose and treat—a view not shared by

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[5]In addition to work by Cohen and Otis, a wealth of scholarship from recent decades examines the implications of membrane or immunological models for culture and politics in the West. See, for instance, Niklas Luhmann (1995), Donna Haraway (1991), Jean Baudrillard (1991), Roberto Unger (1987), Jacques Derrida (2003), and Roberto Esposito (2008).

all during the nineteenth century, of course—has been interpreted nevertheless as transforming American culture into one that saw itself according to medical terms (see Browner 2004 and Starr 1982 on the rise of medical practitioners' cultural authority during the nineteenth century). As Joan Burbick argues, during the period from 1820 to 1880 "a healthy body became a prerequisite of 'proper' citizenship rather than an eventual result of living in the republic and provided an 'objective' means to exclude people from the democratic promise" (1994, 4). While Burbick is certainly correct that nationalism cannot be understood without examining the medicalized literary devices that were being used to talk about community and while it is also true that by the end of the century an imaginative and material linkage between human and national bodies would justify certain kinds of individuals' exclusion from the collective, it is also clear when surveying the early American canon (and also less canonical works) that it is *sick people* who more commonly represent the coalescence of community. Whereas Burbick's analysis insinuates that ill characters speak to a suspicion that the "new republic is represented as a social monster fed by excitement and debilitation," this chapter asserts that inoculation practices' recasting of some diseases as *safe* meant that American writings about illness evince not anxieties about an impaired body politic, but instead indexes a way of thinking about national collectives as dynamic assemblages produced through their exposure to diverse cultures and peoples (2). At the same time that diseases acquired a certain degree of safety, foreign influences came to be perceived as likewise safe.

The following analysis in this chapter lays the groundwork for understanding the conditions of possibility for a national formation derived from exchanges with other

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cultures, instead of standard elements often invoked to describe national belonging, such as shared language, religion, history, mythology, folk cultures, or ethnicity. As articulated in the introduction, what *Communicable Disease in the American Literary Imagination* as a whole proposes is that from approximately 1720 to 1870 denizens of Western nations were not only preoccupied with what constituted a national collectivity, but that their interest in the topic arose from the conditions of an increasingly globalized world in which they—the individuals that made up the body politic—were inhabiting diverse and far-flung locales. They were exposed to different cultures, languages, religions, different historical accounts of human activities, and they believed their bodies and minds to be mutable things, capable of being transformed in terms of physical appearance, personal temperament, and intellectual capability by the influence of the new places in which they lived and traveled (Wheeler 2000, 2). Aside from an abandonment of geohumoral ideas about the body's plasticity, which as Roxann Wheeler points out lost currency by the end of the eighteenth century, this earlier era's experience of globalization may look a lot like what we term our current era's globalization (ibid). Even though our interconnections are fueled in part by high-speed flights capable of carrying passengers half-way around the globe in a day and the instantaneous communications via the internet, in both the writings of now and then, the nation comes to be conceived in light of its relationship to the rest of the world.

But this chapter stresses that each age came to very different conclusions about how to safely navigate the exposures inherent to a globalized world: whereas our age tends to shun exposure, the one immediately preceding it embraced contact. For our modern era, Priscilla Wald argues, the nation coalesces, in part, by our ability to imagine

it—which operates as a kind of immunity to the influence of other peoples and places: "As communicable disease depicts global connections, and the ecological perspectives of the germ theories stresses communal transformation, the *conspicuously imagined* community is certainly in danger of dissolution. Yet, from its fragility—its tenuousness—it also derives its power, reminding its citizens that the community, and all of the benefits it confers on them, is contingent on their acts of imagining, just as the literal health of the nation depends on their obeying the regulations set in place by medical authorities" (2008, 53). The community that "needs its imaginers" was preceded by one, in contrast, that needed storytellers capable of revealing the unavoidable exposures of the collective's global context (59). It, too, was a community that needed its imaginers, of course, but ones that tended to see the collective through the eyes of others.

The late colonial and early national writers discussed here understood their national communities as dependent on the imagination of outsiders in addition to their own constituents' "acts of imagining." Moreover, corporeal and geographical interconnections materialized what would otherwise remain abstract notions of communal belonging on the part of both internal and external imaginers. For instance, George Keate's recounting of Pelew islander Prince Lee Boo's responses to English culture, before his tragic and untimely death by smallpox, is a tale about English national greatness, based on true events, that cannot be told without the corresponding story of an equally great foreign nation found half-way around the world in the vast expanses of the Pacific Ocean. What this chapter aims to elucidate is how a narrative like Keate's in which the vagaries of London life lead to a distinguished visitor's death—a narrative that if written after the advent of germ theory would surely be a cautionary tale warning

against the dangers of foreign contact—nevertheless expresses an abiding faith in exposure as a physiological and political good during this earlier era. Rather than imagining immunity, then, all the texts analyzed in this chapter are examples of how *imagining exposure* helped to produce nationhood by, paradoxically, underscoring the need for nationalist storytelling while also establishing the requisite contributions of outsiders.

This chapter narrates how a notion of nationhood arising from imaginative exposure was co-opted by Americans as the identifying factor that established the uniqueness of democratic society. Section one analyzes the British imperial origins of a collective self-fashioning grounded in the ideal of managed exposure. Inoculation— rather wonderfully—transformed smallpox from a terrible scourge into a prophylactic. With this medical revolution arose a belief in the absolute necessity of undertaking managed exposures. To fail to do so would result in many individuals' unnecessary death by smallpox taken the natural way. Extrapolating this logic to British imperialism and exploration Keate's 1789 biography *The Interesting and Affecting History of Prince Lee Boo, a Native of the Pelew Islands, brought to England by Capt. Wilson* makes the case that nations, too, required managed exposures to foreign collectives to survive in a globalized world. Just the right amount of cross-cultural exchange ensured the viability of England's and Great Britain's enterprises abroad.

Section two argues that as the United States began to determine its independent identity during the late eighteenth century in the decades following the Revolution, the American collective began to appropriate this positive attitude toward exposure as a particularly well-suited to America's democratic aspirations. Royall Tyler's 1797 novel

The Algerine Captive; or ,the Life and Adventures of Doctor Updike Underhill: Six Years a Prisoner among the Algerines repurposes this British assumption about what creates a healthy national constitution in an imperial age to help position a post-Revolutionary American distinctiveness as likewise dependent on other peoples. The novel's abolitionism and sympathetic treatment of Islam insinuate that true democrats should realize in law and culture the egalitarianism inherent in their country's rhetoric of "we the people."

By the early nineteenth century, section three shows, American nationalist fiction had fully appropriated within its self-conception this originally British notion of collectives arising from and being strengthened by exposures to the globe's multitudes. On the one hand, works by James Kirke Paulding and Nathaniel Hawthorne positioned the English as crippled by an incapability to appreciate the benefits of coming into contact with other peoples—something at which their American counterparts prove adept. With the invention of cowpox vaccination at the very end of the eighteenth century arose a new ambiguity in regards to exposure's benefits since physicians required the ability to make nuanced readings of symptoms in order to be assured that they had successfully infected their patients with cowpox capable of providing the same kind of protection as an episode of smallpox. Paulding's 1825 satire *John Bull in America*, and Hawthorne's 1838 short story "Lady Eleanore's Mantle" adapt these anxieties about communicability in their fiction in order to cast the British as unduly concerned about cross-cultural communications and situate Americans as superior in their willingness to embrace such exposures.

These four texts represent, then, a kind of nationalist storytelling in which the outside limits of one's own imagination are emphasized in order to insist on the corporeal and foreign elements needed to fully fashion a national collective. Although Benedict Anderson's ([1983] 2006) book *Imagined Communities: Reflections on the Origin and Spread of Nationalism* makes a compelling case that at the end of the eighteenth century it becomes possible for a *modern* nationalist consciousness to arise from stories and texts, disseminated by a capitalist print culture, each of these four texts evince a kind of nationalism that, of course, requires stories, but precisely in order to show that collective self-fashioning exists beyond the realm of narratives and mythologies. For each text addresses the way in which the stories characters tell their fellow citizens, as the protagonist of *The Algerine Captive* Updike Underhill does while trying to establish himself as a physician in the United States, or narratives shared with (or withheld from) strangers they meet while abroad, as is the case in both *John Bull in America* and "Lady Eleanore's Mantle," fall short of capturing everything that makes them individual representatives of their respective national cultures. Only two of the texts studied here tell stories explicitly about smallpox outbreaks, but all are linked together by their depiction of cross-cultural contact as inevitable and their representation of the right degree of susceptibility as the means for assuring the beneficial effects of that contact. By drawing our attention the medical discourses responsible for thinking about the *body* in this way, this chapter can better demonstrate how writers, too, envisioned the national *body politic* operating according to the same principle of salutary exposure.

Safe Diseases

This section shows that by the late eighteenth century in the British empire, the acceptance of smallpox inoculation and recognition of globalization led to an understanding of diseases and foreign cultures as safe—beneficial even—if managed exposure was undertaken. The use of inoculation in the Americas began in 1721, when a smallpox outbreak in the spring in Boston catalyzed minister Cotton Mather to write to physician Zabdiel Boylston, inquiring whether he would be interested in trying a new procedure of inoculation—which Mather first learned about from his slave Onesimus—to protect the population from the disease (Carrell 2003, 99-192). In their promotion of inoculation, Mather and Boylston precipitated a debate about the morality of the practice that convulsed Boston almost as much as an epidemic, but over the course of the eighteenth-century, inoculating with smallpox became a common enough practice, since it offered some hope against a deadly and disfiguring scourge (for more on the Boston inoculation controversy see Minardi 2004; Tindol 2011; Wisecup 2011; Silvis 2011). On both sides of the Atlantic, physicians experimented, trying to find the perfect method for inoculation. A surgeon in Suffolk named Daniel Sutton developed a procedure in 1762 that over the next couple decades would gain in popularity in England and abroad. In 1781, when Benjamin Rush was informing his colleagues about the Suttonian method of smallpox inoculation, he argued that smallpox was "rendered...perfectly safe by inoculation" (294). The appeal of Sutton's procedure derived from the greater degree of safety ensured for the patient by reduced exposure to the smallpox matter used to inoculate (Zwanenberg 1978, 74-75). As Rush explains, instead of "a gash in the arm," physicians made "a slight puncture with the point of a lancet" and the matter used was "fresh" rather than preserved on a thread, which allowed only the purest variety of

infection to enter the body (1781, 296). Even safer yet was the discovery, published in 1798, by Edward Jenner that cowpox could also reliably be used to secure the body against smallpox infection. Promoted in the United States by Benjamin Waterhouse, vaccination likewise faced its detractors (as it continues to do so today), but was embraced by much of the mainstream medical community. What is important to note about this history, which we tend to overlook, is that regardless of whether we're talking about inoculating with smallpox or cowpox, each method is concerned with infecting individuals with *safe diseases*—and not keeping individuals *safe from disease*.

Understanding some diseases as safe meant that it was difficult in this era to use an individual's association with disease, particularly in literary works, as an infallible signifier of that person's innate evil or corruptness—especially when a much-feared illness like smallpox could be transformed into a therapeutic intervention and Samuel Hahnemann could describe his homeopathic treatments as curative "artificial disease[s]" ([1852] 2010, 265). Instead of living in a world in which diseases—and those they represent—are automatically, irrevocably read as "bad" and in need vanquishing, regardless the cost, eighteenth- and nineteenth-century writers inhabited a time during which the meaning of disease was ambivalent and conditional. Looking back to works from this earlier era requires an approach to interpretation that takes into account how, paradoxically, diseases like smallpox were both feared as dreadful scourges and hailed as therapeutic wonders. Whereas after the triumph of germ theory and its identification of the healthy human carrier globalization carries with it the threat of "invading," often "pathogenic" outsiders who must be "cleansed" through assimilation or excluded entirely, during the era of inoculation peoples from different places who practice different

cultures are recognized as likely "infectious," but with the understanding that the consequences of being so infected can be either positive or negative, depending on how the situation is managed.

Keate's *History of Prince Lee Boo* expresses how British exploration across the globe cultivated an understanding of Englishness constructed as a result of managed exposures to strange peoples and places. Relating a story about global networks that bring England into direct contact with the nations of the Pelew Islands, the *History* recounts the true history of how the Pelew King Abba Thulle sent his son Prince Lee Boo (a well-known figure in British society) to England's shores in the early 1780s. The story of Lee Boo struck a chord with Anglo and American readers, and in addition to its republication in London, Dublin, and Philadelphia into the nineteenth-century, other stories and poems circulated in commemoration of the foreign prince (for more on Lee Boo and the English imaginary, see Peacock 1987). The admiration accorded to Lee Boo, individual instances of which are repeatedly underscored by the *History*'s author, and to his other literary memorials reflect a larger cultural preoccupation with how interconnected the world was becoming as commercial and colonial endeavors continued to expand. Keate's version of the *Antelope*'s wreck and Lee Boo's subsequent adventures in his travels from East to West is a story about the inextricable ties binding peoples inhabiting widely distant locales. Represented most clearly in Captain Wilson's promise to "take the same care of Lee Boo as of his own child," the bonds Keate depicts blossoming between the English and the Pelew people underscore the shared destinies of peoples and places that used to be absolutely separated by vast bodies of water—an appropriate message for the country's children, the volume's intended audience, and moreover, a striking one in light

of England's loss of the American colonies across that other major body of water, the Atlantic Ocean (1789, 71-72). Even as political destinies diverge and the limits of a sovereign's power are realized—as is made clear, respectively, by one English sailor's desire to trade British society for life on the Pelew Islands and Abba Thulle's recognition that he cannot keep his son from harm, or even death, during his time abroad—the *History* emphasizes that different national cultures exert influence on each other in ways quite distinct from the exercise of governmental prerogatives. In these kinds of exchanges, Keate's text demonstrates that each nation is changed for the better as a result of its contact with the other.

Thus, while it is possible—but not accurate—to read *The History of Prince Lee Boo* as a condemnation of British imperialism, it is in fact a testament to a kind of empire that sought to be transformed by its expansions to new places. King Abba Thulle's request to Captain Wilson that he "make him [Lee Boo] an Englishman" and his recognition that sending his son to England "may expose him to dangers, as well as to diseases that are unknown to us here, in consequence of which he may die" underscores the inevitability of exposure (70). More importantly, Abba Thulle knows that his son will be exposed to other cultures—he explicitly requests that it be so—and he also knows that while some of this exposure may prove dangerous, the benefits far outweigh the risks since Lee Boo would learn "many things, which, on his return, might prove essential benefit to his country" (59). Abba Thulle's wisdom derives from his ability to discern that contact with England is "essential" to his own country's future. Moreover, the fact that an English author, who was not on board the *Antelope*, put these words in the mouth of a Pelew sovereign suggests that these are ideas the British need to recognize as true of

their country as well. Lee Boo the person and his story, in other words, function as an "essential benefit" to Great Britain.

To say that a book about the awe with which an innocent, "uncivilized," and illiterate native of an island where the people go naked embraces Western culture is *not* primarily imperial propaganda justifying English expansion (and the dehumanizing parade of indigenous peoples through the streets of London to titillate its voyeuristic denizens), but rather an effort to persuade the English of the benefits to be derived from reveling in one's susceptibility to the influence of other cultures may seem to go against the grain of postcolonial critical wisdom. But even as the *History* gives voice to an Anglo-centric perspective that egotistically delights in its own style of dress, intellectual accomplishments, and technological advances—most of which Lee Boo adopts—his presence in that English culture persistently reminds readers of the fact that Englishness exists in the midst of many other cultures to which it is also exposed in the same ways that Lee Boo experiences the unfamiliar practices of those communities he lives in once he has left the Pelew Islands. Whereas the first half of the *History* lauds the skill of the English with guns, who provided "such evident advantage" in the people of Pelew's battles with other tribes (29), the second part foregrounds Lee Boo's skill with a spear by relating a throwing contest staged between some English soldiers and Lee Boo:

> LEE BOO took up his spear with much seeming indifference, levelled at the little bird, and struck it through the head, to the amazement of all his competitors, who, at the great distance whence they flung, could not, without much difficulty, hit even the cage. ---An undeniable proof this of the wonderful effect of habit and practice. The spear is a weapon in use among most uncivilized nations not acquainted with fire-arms, whose common exercise from childhood to manhood is the throwing of it, in which they acquire a degree of skill which sets all competition at defiance. (115-116)

In these descriptions, an English cultural experience is embedded within a Pelew context—and vice versa—in such a way as to underscore how neither group can be understood without reference to each other. Keate demonstrates through these descriptive prose stylings the cross-cultural infections that have taken place as a result of globalization. Neither nation can imagine themselves without the other.

The literary device of foreshadowing signifies the shared destinies of the globe's nations. Lee Boo's eventual death as a result of smallpox is foreshadowed in Keate's account to show that peoples connected by trade and exploration would influence each other. In that regard, efforts to avoid dangerous contact, the narrative insinuates, prove a form of naiveté: "Wilson very prudently avoided taking him to any of the places of public entertainment, for fear of his catching the small pox, a distemper for which it was proposed to inoculate him, as soon as he should become sufficiently acquainted with the English language to be made fully sensible of the necessity of the measure" (139-140). Foreshadowing frames exposure as inevitable, and while dangerous, not at all undesirable. As Lee Boo says on his deathbed, "Good friend, when you go to Pelew, tell Abba Thulle that LEE BOO take much drink to make small-pox go away, but he die— that the Captain and mother (Mrs. Wilson) very kind—all English very good men—was much sorry he could not speak to the king the number of fine things the English had got" (162-163). Going on to describe which of the things Lee Boo had collected should be parceled out to Pelew islanders when the English returned there, Lee Boo gives voice to the "fine things" that have arisen from his exposure to the English: not only literal things to be taken back home and, perhaps, exchanged through trade networks, but also more intangible things, friendships with "good men" and fond memories. Most of all, exposure

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is positioned as in and of itself neutral, whereas the consequences may be good or bad, depending on the situation, and susceptibility to other cultures as necessary for the continued vitality of all national communities.

No longer an isolated island, with its own unique complexion, culture, and political habits, England now sees itself also as Pelew sees it, and more importantly, as akin to Pelew in ways impossible before the *Antelope*'s shipwreck there. Members of one national collective draw on exposure to another for their own benefit as they maintain their primary allegiance. While Lee Boo acquires English sensibilities—that is, proves himself susceptible to Englishness, as evinced in the fact that he "imbib[es] an idea of indelicacy of having no cloathing [sic]" and becomes willing to wear "a shirt, waistcoat, and pair of trowsers" (89-90)—he remains focused on adapting English practices and cultures to Pelew once he returns home. Visiting gardens in England, for instance, proved to be a means for Lee Boo to develop agricultural plans for Pelew: "Whenever he had an opportunity of viewing gardens, the plants and fruit-trees excited his particular attentions: he would make many enquiries concerning them, saying, when he should return home, he would carry with him seeds of such as would grow in Pelew....his principal researches were directed to the discovery of whatever might prove beneficial to his country" (156-57). The generative meaning of gardening, alluding to future generations' subsistence, was no doubt not lost on readers, who would have also have recognized England undergoing a transformation when seen through Pelew eyes. Even though the *History* focuses on how Lee Boo "imbibes" Englishness, allowing himself to be influenced and changed as a result, by allowing him into English society, it too changes and sees itself differently. European nobles find themselves not meaningfully differentiated from Pelew

rupacks (38), and naked princes are viewed "with as much respect and awe, as those are viewed who rule what are called polished nations, and are decorated with all the dazzling parade and trappings of royalty" (35). The permeability existing between distant and diverse cultures, the *History* insinuates, is not feared, but understood as an unavoidable condition of existence during the Age of Exploration.

Harnessing Susceptibility

This section considers how the United States began to imagine national constitution as a result of cross-cultural exposure as central to a democratic identity, instead of an imperial one. In a certain way, the *History* is a story about missing an opportunity to fully realize the beneficial effects of Pelew and England's mutual influence on each other. Keate's decision to memorialize Lee Boo's death by smallpox testifies to lost chances to fully benefit from "imbibing" from another culture, since the story provides ample opportunity for readers to appreciate the bonds that remain between Lee Boo and his adopted English family—though they and the filthy streets of London are responsible, technically, for his demise. The rather colorful description of Lee Boo "imbibing" an English predilection for clothing helps to clarify this era's positive attitude toward susceptibility, since the verb was also employed by physicians to describe the physiological processes at the level of the skin crucial to an ideal inoculation. An alternative method of inoculation through contact (applying smallpox matter to the arm without use of an incision), for instance, emphasized Suttonian logic of minimal exposure by employing friction to "dilate the mouths of the absorbent vessels, and produce an afflux of juices to the part, so as to imbibe a quantity of variolous matter sufficient to

effect the purpose" ("Smallpox Communicated" 1787, 128). Such a minute point of entry

guaranteed that "the patients who are infected by contact…receive the disorder from the

purest particles of the matter, must…have the distemper much milder" (129). In a similar

vein, Rush worked to ensure that the body itself was in the least-susceptible state: he

advocated a sudden change in diet and the use of medicinal purges because "by

diminishing the quantity of the fluids and weakening the tone of the solids…the system

[becomes] less liable to a plentiful eruption of the small-pox" ([1794] 2009, 300).

Physicians and laypersons alike believed that susceptibility *in the right degree* would

garner positive results, whereas natural, unmanaged susceptibility was just as likely to

lead down destructive paths as it was to have beneficial effects. Inoculation was a means

to control natural smallpox by minimizing its malignant effects while still rendering a

patient protected from future infection. Likewise, it was possible during interactions with

other cultures to manage them and achieve also the right degree of exposure.

Whereas the *History* represents the British empire's failure to take advantage of

the exposures inherent to global networks to strengthen its own body politic, *The

Algerine Captive* imagines how a fledgling America has an opportunity to do what its

parent nation could not and become a vital collective precisely because of its ability to

recognize the benefits of its interconnections with a nation as different as Muslim

Algiers. In Tyler's novel, contact with a potentially dangerous ethnic and religious other

literally "infuses health" ([1797] 1967, 2: 72).This sanguine view of exposure serves to

idealize Americans as particularly receptive to foreign influence.

Royall Tyler's novel recounts in a picaresque fashion the life experiences of the

eponymous character Updike Underhill from his childhood to early adulthood. Broken

into two parts, the novel begins with episodes from Underhill's early schooling and college during which he acquires a fascination with classical knowledge—particularly Greek language—that, unfortunately, leaves him without skills or obvious employment. He decides to pursue as career as a doctor and after his apprenticeship and several unsuccessful efforts to start up private practice in the first North and then the South, he ends up as a surgeon abroad a slave trader. Part I concludes with Underhill's enslavement by Algerine pirates while he himself is engaged, however reluctantly, in the trade of human flesh. Part II of the novel tells of Underhill's enslavement, his failing health due to hard labor, and his eventual recovery and subsequent employment as a slave doctor. After several chapters in which Underhill records an "authentic" travel narrative of his movements within and beyond Algiers and the foreign culture in which he lives, he recounts a fraught, yet finally successful effort to return to the United States. The novel as a whole becomes a meditation on how to be an American national in light of many different kinds of cross-cultural exposures.

The question of national identity, of course, has been addressed by a number of critics writing about Tyler's work, but they tend to see American nationhood as either in opposition to other national cultures or other national cultures as being used—in a formal sense—merely as a means to reveal internal fractures. Many have argued, for instance, that the novel patriotically defends an American national identity by using Algiers as a foil in which, in the words of Jared Gardner, "the Algerian pirate [serves] as the composite of all the racial and national destinies he [Tyler] does not want for his country" (1998, 27).[6] In contrast, John Engell asserts that Tyler "studied American character

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[6] For similar accounts of patriotism in *The Algerine Captive,* see also G. Thomas Tanselle (1967), Cathy N. Davidson (1986), and Cathy N. Davidson and Arnold E. Davidson (1976).

without the blinders of national pride" and "suggested certain dangers inherent in the American character, in its political, social, and moral point of view" (1989, 19).[7] Yet, while such scholars have approached the question in terms of national self-congratulation or critique, they have largely ignored the role that medicine—in particular, eighteenth-century theories of disease susceptibility and resistance—has played in informing Tyler's understanding of the relationship between cross-cultural contact and nationalism. I show how the logic of smallpox inoculation, in which a malignancy is transformed into a therapeutic, corresponds with the novel's efforts to conceive otherness as beneficial to affirmations of national belonging. Through a detailed examination of Underhill's two main conversations with a Muslim holy man, the Mollah, while enslaved in Algiers, I demonstrate how cultural inoculation makes an argument for difference as an integral part of constructing a viable national identity.

After declaring independence the United States found itself a target of Barbary piracy, and from 1785 to 1796, nearly 120 American seamen were in captivity in Algiers (Peskin 2009, 2). The enslavement of white Americans encouraged a perception that the Christian United States and Muslim Algiers were fundamentally oppositional nations (Marr 2006, 9). Tyler's novel dramatizes how the Barbary Crisis was perceived as a contest between two religiously and governmentally divergent nations.[8] But rather than affirming American islamicist prejudices, Tyler subverts American stereotypes of Algerian Muslims—a narrative act that should be read as a result of a worldview in

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[7]Jennifer Margulis (2001) further identifies this trend in two other early American novels.

[8]For a history of the Barbary Crisis and its public perception, see Lawrence Peskin (2009). For the intersection of the Orient and/or Islam and American literature see Heike Schaefer (2006) and Timothy Marr (2006).

which different cultures were seen as mutually constitutive as a result of the permeability

of the boundaries separating them. The novel underscores this reality by its efforts to

show how Algiers and American are more similar than they are different. For instance,

astonished at "the regularity and frequency of their devotion" because "he had been

taught to consider this people as the most blasphemous infidels," Underhill voices a

corrective to a myopic American self-perception of moral superiority (Tyler [1797] 1967,

1: 190). If a moral deficiency cannot be claimed to position America the nation as

superior to Algiers, then readers are left also with a disturbing similarity between the two

nations: their shared, barbaric institutions of slavery. To drive the point home, the text

makes clear its second purpose in using a story of Algerian slavery to talk about

American slavery: it shows how slavery is not contingent upon ethnic or racial origin.

Underhill reminds his fellow Americans that anyone can become chattel, not just

supposedly inferior black Africans and their children: "If any of my dear countrymen

censure my want of due spirit, I have only to wish him in my situation at Algiers, that he

may avail himself of a noble opportunity of suffering gloriously for his country" (2: 13).

By disarticulating enslavement from skin color, race, and ethnicity and by linking

America and Algiers as the same kind of nation, a nation profiting from the sale of

human flesh, Tyler's novel questions a scholarly assumption that eighteenth-century

nations were constructed from shared physical appearance and religious mores (Hastings

1997). The indeterminacy that Tyler creates between Algiers and America allows him to

position both as a source of pathology and therefore a source of their own like-cures-like

treatment.

The lack of an explicit reference to smallpox or inoculation only serves to highlight, in its conspicuous absence, how the linkage of America and Algiers draws on the logic of right degree of susceptibility in order to insinuate that allowing insularity and fear of other cultures to flourish in the United States is analogous to taking smallpox in the natural way instead of choosing to be inoculated. Particularly Underhill's interactions with the Mollah demonstrate how the right degree of exposure to an outside influence will ultimately have therapeutic benefits at the level of the collective. An Islamic holy man and convert himself, the Mollah aims to turn Christian slaves into true believers. Readers first encounter him when he invites Underhill to his home for a debate about the merits of their respective religions. His second major appearance is during an infirmary visit to Underhill, who lies on the cusp of death. Although critical analyses have done much to elucidate the significance of the first conversation with the Mollah, the qualitative difference of the second meeting has gone unexamined.[9] It is the difference in degree of the second meeting that reveals it as a cultural inoculation in which Underhill narrates himself acquiring the right degree of susceptibility to Islam. This medical context is established in the novel, in part, by a metaphoric relationship between, on the one hand, religious and cultural difference and, on the other hand, infectious disease. Importantly, the association is not limited to Islam: once Underhill recovers and begins to treat Algerians, he discovers that they perceive him—an American Christian—as threatening. When he arrives to diagnose an Algerine lady, he tells of being asked to wash "as if I had been infested with some malignant disorder" (Tyler [1797] 1967, 2: 82). Moreover, the reference here to "malignant smallpox" (another name for the deadly

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[9]Larry R. Dennis (1974) identifies the first conversation with the Mollah as enabling discussions of freedom and provincialism, but do not consider the second conversation.

confluent variety) provides a clue for how Underhill understands his two major conversations with the Mollah. Whereas Underhill frames the first encounter as akin to being exposed to a "malignant" and deadly force, his second meeting underscores how a reduced and refined conversion attempt proves capable of engendering friendship. Arriving at the ability to manage exposure leads to healthful benefits, for individual as well as the body politic.

In the course of Underhill's evolving relationship with the Mollah, then, the novel makes clear that neither Underhill nor the Mollah, neither Christianity nor Islam, and neither the United States nor Algiers are equivalent to smallpox. Instead, *influence over which one does not have control* is insinuated to be like smallpox in the sense that it is physically dangerous when encountered. During his first conversation with the Mollah, Underhill worries that prolonged proximity to him and his proselytizing will eventually undermine his faith: "Though I viewed his conduct as insidious, yet he no sooner retired than, overcome by his suavity of manners, for the first time I trembled for my faith" (2: 39-40). After a five-day debate about the merits of each religion, Underhill, as expressed in the title of the next chapter, "*resigns his Body to Slavery, to preserve the Freedom of his Mind*" (2: 41). Underhill relinquishes the possibility of an easy "free" life as a converted Muslim for the hardships of slavery because his Christian and republican values will remain safe. However, although avoiding the Mollah initially protects Underhill's faith and democratic principles, languishing in captivity without a means of escape soon proves just as dangerous to his freedom of mind because, shortly after his stay with the Mollah, Underhill finds himself "indeed a slave" and "enthralled" in both body and mind after he watches an escapee's execution (2: 66). His physically-

demanding surroundings prove potentially fatal in unanticipated ways: the lack of a "free

mind" occasioned by "the terrour of the late execution" combine with "unabating fatigue"

to reduce Underhill's fortitude to a degree that he "trembled to see the look of the

overseer," and he soon falls deathly ill (2: 67). Although Underhill rejects conversion,

this act of intellectual independence fails to give him control over his situation. The text

insinuates further that the United States's declaration of independence—if taken to mean

isolation from the rest of the globe's nations—will have similar malignant results.

But Tyler does not see insularity as the United States's destiny, and he depicts the

nation as "cured" by virtue of its interactions with Algiers. An intervention on the part of

the Mollah precipitates Underhill's recovery—a cure derived mostly from the Mollah

himself.[10] Although Underhill had returned to slavery to escape what he believed was an

imminent conversion to Islam through the insidious influence of the Mollah's manners

and rhetoric, the Mollah and his seductive manners now provide Underhill with the very

intervention and return to agency he needs to recover and walk abroad in Algiers. The

Mollah reduces the degree of his conversion effort, which allows Underhill to maintain

his "freedom of mind." When the Mollah reassures Underhill "that he disdained taking

any advantage of my weakness; nor would attempt to deprive me of my faith, when he

feared I had no time left to ground me in a better," he relinquishes his role as converter

(2: 71). And yet, he maintains the superiority of his faith and refuses to let the moment

pass without asserting it: despite his promise to not take "any advantage" of Underhill's

potentially weakened commitment to Christianity, he certainly reminds Underhill that he

finds his own religion to be the "better." Significantly, because the Mollah agrees not to

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[10]Underhill treats himself with Peruvian bark, which can be seen as the immediate means of cure (2: 72).
However, the Mollah's intervention initiates this course of action.

use his "suavity of manners" to convert Underhill, he can freely express his admiration for the Mollah: "If any man could have effected a change of my religion, it was this priest. I was charmed with the man, though I abominated his faith" (2: 72). This smaller proportion of conversion, its lesser intensity and degree, ensures Underhill's freedom of mind and, within the immediate context of the story, his return to health. The Mollah and Underhill—when read as representatives of their respective nations—make clear that Tyler believes that with the right kind of contact, so too can the United States and Algiers develop a positive relationship, instead of a malignant one—a relationship, moreover, that will ensure the prosperity of each.

This message is underscored when Tyler depicts the Mollah's presence as having the requisite tonic properties precipitates Underhill's recovery. The Mollah's manners—his means of conversion in Underhill's eyes—are reduced from immersion to an exchange of glances. The overwhelming luxury and eloquence defining Underhill's earlier exchange with the Mollah have become instead a surprisingly powerful smile: "His very smile exhilarated my spirits and infused health" (ibid). It is important to note that the Mollah has not changed: he believes his kindly presence and well-intentioned actions will do good. And indeed they do: Underhill interprets the Mollah's smile as a healing force, and the right degree of the Mollah's manners proves salubrious. Underhill feels infused with health because of the Mollah's smile, and he is "again attached to life" (ibid). Whereas before the Mollah's manner caused Underhill to fear for his immortal life, now it no longer has that power. Underhill's renewed desire to continue his mortal life symbolizes a vanquished fear of losing his freedom of mind. Moreover, it is after this exchange with the Mollah that Underhill's narrative switches from slave narrative and

conversion genres to that of travel writing. He walks freely amongst the Algerians, records their customs and habits, and visits their holy places without the least bit of trepidation. As a literary device, this travel narrative portion of the novel—like Lee Boo's travels in England—helps to cement in readers' minds the interconnections that exist between their country and Algiers

Tyler's novel shows that in order for a nation to survive, it needed to, of course, regulate its exposures to other peoples and place—but most of all it needed such exposures in the first place. Royall Tyler, like George Keate, took up a small, but profound moment in his nation's history—Barbary captivity—as representative of a world order in which nations of the world influenced each other, and he imagined even vastly different cultures like those found in America and Algiers as having enough in common to do each other good. In his depiction of insularity—in various forms—as a kind of miasmatic disease, Tyler teaches readers how harnessing susceptibility to the influence of other places serves national interests. If an inclusive nation was kept strong by the interaction of its diverse elements—Northern, Southern, white, black—then being "infected" with a disorder like bigotry would prevent the harmonious balance of those elements. Historians like Peskin (2009) have noted that the Barbary crisis fueled nation-building by encouraging the development of a national response to ransom demands and the building of a navy. For Tyler, this generative exposure was an opportunity to cast American democrats as ideally suited to developing a national identity through salubrious cross-cultural interactions.

Communicability Crises

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Tyler's casting of American society as capable of acting as its own physician, so to speak, and using its connections across global networks not to perpetuate insularity, thus fully realizing the Revolution's egalitarian principles stands as a rather hopeful vision for the United States's future. Tyler's sense of democratic society requiring cross-cultural exposure continued to inform fiction later in the nineteenth century. Keate's and Tyler's works may have been imagining nationals going abroad in an effort to underscore how one's nation owed its existence, in part, to other like collectivities across the globe, but stories about travelers coming into one's country proved just as effective at linking democracy with exposure. Paulding's and Hawthorne's nationalist fictions about British visitors coming to American shores show they saw collective self-fashioning in the United States as uniquely adept at acquiring benefits—even under challenging circumstances—from its dependencies on outside influence.

The fiction of Paulding and Hawthorne capture a world in which national constitution is fraught with difficulty because it is always uncertain whether or not contact can be made absolutely salutary, and they position American democrats as the model for how to define collective identity under these conditions. After the introduction in America of vaccination, it became clear that individuals may not know how, precisely, to control inevitable communicability to garner the most beneficial effects, an issue that came up in Keate's *History*. In trying to teach Lee Boo English before having him undergo inoculation, his protectors thought they were giving him just what he needed: the language skills that would lead to an understanding of a medical procedure, and if both went well, Lee Boo would be ensured of a happy life in England, which would then lead to benefits being carried back to the Pelew Islands. As it turned out, too little language

acquisition and an inoculation put off too long led to just the opposite result. With the advent of vaccination, this concern becomes even more heightened since, despite confidence that the new vaccination procedure would once and for all make smallpox epidemics a thing of the past, it became clear that the matter was not that simple, since specialized knowledge about symptoms and procuring vaccine matter was required for it to work. Paulding and Hawthorne extend these concerns to their depiction of the global community in order to situate Americans as analogous "experts" at maintaining group integrity in a context of inevitable exposure.

On March 12, 1799 New England physician Benjamin Waterhouse published in the *Columbian Centinel* an account of a new procedure for protecting individuals from smallpox. Conceived by English physician Edward Jenner, inoculation with cowpox— what he called vaccination, derived from the Latin word *vacca*, meaning cow—would in the following decades replace smallpox inoculation as the West's main preventive measure against smallpox. Jenner discovered that cowpox, a livestock ailment that could be communicated to humans, was neither deadly nor disfiguring and was capable also of preventing smallpox infection. A medical revolution that was hailed in its early years as a "perfect defence [sic]" against smallpox in addition to its other appealing attributes of "extreme mildness," no requirement for "cessation from labour, or attention to regimen" and "it's being incommunicable excepting by inoculation," vaccination made possible a new relationship with smallpox—that "more troublesome and dangerous disease" ("Review of Practical Observations" 1802, 423). Exposure to smallpox was no longer an inevitable rite of passage in one's life either through inoculation or by taking the disease in the natural way. Vaccination served to insulate human populations from a disease that

decimated communities for centuries. Acutely aware of this fact, Waterhouse makes his case for vaccination to the American public in terms of smallpox, the disease, not smallpox, the prophylactic measure: "The inhabitants of New-England view the small-pox with a peculiar dread; not that they have ever suffered very remarkably desolating visitation from it, but the disease has been kept at an awful distance by restrictive laws, and the still stronger popular impressions; so that in New-England, the most democratical [sic] region on the face of the earth, the priest, the magistrate, and the people, have voluntarily submitted to more restrictions, and abridgments of liberty, to secure themselves against this terrific scourge, than any absolute monarch could have enforced" (1802, 373). When Waterhouse argues for the use of vaccination in New England, he is in fact making a case for democratic liberty being synonymous with exposure.

Paulding and Hawthorne find much in the practice of vaccination to confirm democratic republicanism as the collective formation adapted to flourish in a globalized world. Their nationalist fiction elaborates how democratic society can maintain the right degree of susceptibility to other cultures—necessary for its own vitality—at the same time that it asserts its own distinctness. *John Bull in America* and "Lady Eleanore's Mantle" address this concern by telling stories about cross-cultural contact structured by medicalized literary devices, such as the reading of symptoms, diagnosis, and incidents of contagion. Through such devices, these texts evince a preoccupation with becoming adept at assuring oneself of the beneficial or malignant quality of a given instance of influence and overcoming fears that such interpretive skill was impossible to achieve. On the surface Paulding and Hawthorne's tales about infelicitous meetings between Europeans and Americans (which in the case of Hawthorne's story ends with a town

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decimated by smallpox) may appear to be stories warning against contact altogether between the United States and other countries. But, I argue that they narrate instead the often fraught path to salubrious susceptibility successfully traversed by American patriots. This final section, through reading Paulding and Hawthorne's texts alongside concurrent medical works published about vaccination in the U. S., discusses the anxieties that arose around cross-cultural contact in an age in which such contact was assumed to be inevitable. Ultimately, these works associate these anxieties with the British, leaving Americanness to represent the benefits of salubrious exposure.

Anxieties around communicability become particularly heightened after the introduction of vaccination because it was hard to discern if the disease that was transmitted actually provided defense against smallpox. Inoculation with smallpox at least carried with it the certainty that the patient would not have to worry about getting smallpox again—because he or she would have had it in a controlled medical experiment. The use of cowpox, though, meant that patients were one step removed from smallpox, which was perceived as both safer and leaving more room for error. Because inoculation and vaccination were procedurally quite similar—they both involved inserting "matter" (fluid withdrawn from smallpox and cowpox pustules, respectively) into an incision in the arm—and because both had major symptoms in common, namely fever, inflammation, and eruptions, it became clear to inoculators (and the general public) that it was possible to mistake a reaction to deliberate infection as a successful vaccination, thus putting an innocent population at risk. In 1801, for instance, a country practitioner named Cyrus Fay published in the *Boston Chronicle* his account of being unable to discern, after trying to vaccinate himself, whether or not the procedure had been successful: "The

inoculated arm appeared inflamed by the fourth day, and went on inflaming till about the

eighth, when it became a running sore. At this time I had *shivering*, *pain in my head*,

back and limbs, with a *loss of appetite*, and at times was very dull and sleepy. The

inoculated part became ulcerous, and discharged considerably, and at length terminated

in an *irregular bard scab*" (quoted in Waterhouse 377). Although Fay concludes that he

"had passed through the true disease," he also knew that he had never seen the vaccine

the disease (ibid). To be certain that he had undergone a prophylactic illness, he required

the insights of an expert.

In other words, a new exigency was added to inoculation when cowpox was used

instead of smallpox: namely, an informed, visual confirmation of success. Upon meeting

Benjamin Waterhouse at the Medical Lectures in Cambridge, Fay agrees to undergo

vaccination again in order to learn his error in reading his previous symptoms: "The

inflammation was not so severe, nor did it resemble a boil so much as the former; nor did

it terminate, like the former, in a hard, irregular *yellow scab*, but resembled, about the

sixth day, the seed of the common *running mallows*, or what the children call *cheeses*,

depressed in the middle. By the seventh day it preserved the same appearance, but grew

larger; the eighth day it appeared full of watery fluid. On the tenth day the efflorescence

came on, and gradually increased till it extended half round the arm. The whole

appearance was now *strikingly different from my former case*" (377-78). Medical

publications, like Fay's, sought to capture in words the visible symptomatic differences

between an actual—or "true"—vaccination and other infections—referred to as

"spurious"— manifesting with skin lesions and fever. Being able to judge with some

measure of accuracy the symptoms they were seeing, physicians also retained their

authority to determine the degree of safety conferred by a particular disorder. Nevertheless, that authority remains comprised by the ambiguity of the symptoms themselves.

A similar desire to be able to authoritatively "read" someone from another culture in order to determine whether or not coming into contact with him or her will have malignant or beneficial effects comes under scrutiny in Paulding's 1825 satire. *John Bull in America* is just one example of many satirical "faux" travel narratives written by Americans mocking actual accounts British travelers wrote while voyaging on the far side of the Atlantic. Much of this story's comedic effect derives from the way in which it plays with writers' assumptions (especially those made by British travelers) that the United States and England are two collectives that can be described in utterly discrete terms and which can be assumed to be unable to influence each other. Like in the descriptions of true and spurious vaccinations, which are revealed to be symptomatically similar while at the same time qualitatively different, Englishness and Americanness are presented as likewise indistinguishable by observation alone and requiring a qualitative assessment as well. The text begins with an "editorial" preface, the ostensible purpose of which is to identify for readers the English author of the "travel narrative," and as the editorial voice chronicles how it came to be assured of the identity of "John Bull," it reveals how misleading the study of symptoms can prove. The preface critiques the idea that a person's identity can be discerned upon reading a text by hyperbolically declaring that the author's "symptoms of identity occur in almost every page" (xi). What Paulding makes clear is that someone's identity cannot be "diagnosed" from a text and that, moreover, selfhood was more complex than an assemblage of "symptoms" might

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indicate, hence the preface's disdain—again, framed in hyperbolic terms—for the idea that two Englishmen could not bear the same negative view toward the United States: "[i]t would be absurd to suppose that two persons, and those persons foreigners, should at one and the same time be animated by such disinterested feelings of good will towards the people of this, or any other country" (ibid). The multi-layered reading practices required to get the joke in satirical writing—in this case, reading for the opposite meaning—help to underscore Paulding's point that symptomatic or superficial readings, which would not work for appreciating literature, likewise fail when used to come to a conclusion about someone's identity. In making this insinuation, Paulding furthermore associates such anxieties about the ability to accurately read symptoms—of people or disease—with the British.

Which is to say that in the search for confirmation that a certain instance of contact is beneficial—whether in the form of a vaccination or meeting with a foreigner—Paulding positions the British as relying too much on symptomatic readings. A necessary tool for the inoculating physician, symptomatic readings reveal themselves to be quite limited and prone to misinterpretation, especially when translated to cultural contexts. In Paulding's text, an assumption that it is common knowledge that this kind of reading has limited efficacy is leveraged into a critique of the English. The satire throughout the text relies for its expression on the narrator's inability to read accurately the "symptoms of identity" that surround him. "John Bull" proves utterly inept at reading those in his vicinity—particularly those that might provide him insight into the American character. For instance, he casts some of the largest and most important urban centers of the United States as ridden with illness, implying that the American people, too, are disabled. New

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Orleans is depicted as continually afflicted with yellow fever "with such virulence that the people all die off there regularly once in two years" (3), while Boston is, supposedly, a great place to catch a fever—it "is a terrible place for fevers and agues" (9)—to the degree to which its inhabitants' bodies bear the symptoms of the disease whether they have it or not: "if you go into the shops, you may hear the money jingling in the pockets of the shop-keepers, but the mere force of habit, even if the poor man should happen, at that moment, to be free from the ague" (ibid). To make the point that English travelers recounting their impressions of the United States tend to unfairly stereotype the American people, Paulding figures their descriptions as laughable misdiagnoses. The search for symptoms—that is, static characteristics that encompass all Americans—is to misunderstand fundamentally democratic society.

To modern readers, using the misinterpretation of symptoms as a means for accusing another culture as prone to unjustifiably superficial readings of other peoples and places may seem like an odd and rather esoteric point of departure for a nationalist satire. But what Paulding captures in his symptom-ridden text is how efficacious metaphors of contagion have proved for materializing the more intangible effects of cross-cultural contact. After germ theory, figurations of culture as contagious operate as cautionary tales that favor teaching readers to limit their contact with the foreign. In contrast, Paulding's text makes the case that infectious contact is just what national cultures should be looking for when they meet. One of the many repeated jokes in the text revolves around the narrator's fear of coming into contact with the "spirit of democracy," which he perceives everywhere in the air and people around him. He complains, "The moral air is putrid, and even the most honest Englishman cannot breathe

it without his principles being tainted with the plague of democracy. Feeling this to be actually the case with myself, I determined to change the air as soon as possible, and not caring to go back again to the hotel" (107). We should read passages like these, given their satirical inversions of the truth, as arguments that do not critique English perceptions of America as a diseased nation, but that critique the English's mischaracterization of the United States as *dangerously* diseased. In a certain way, Paulding recognizes that to England, democracy may look like a body politic with a degenerative illness since authority has been broken down and parceled out the people. And his story suggests that if America is indeed ill, democracy is an infection with which England should not fear coming into contact.

As is also true in the case of vaccination, Paulding's text evinces a commitment to deliberate, planned contact as the way to achieve beneficial effects for all parties. Moreover, Paulding suggests that this is the core of democratic society itself. Late in the narrative, the narrator speaks with an American about his own perceptions of his nation. This average American tells John Bull that being American is precisely the process of embracing the foreign influence from which the narrator has spent the entire story running away: "we frequently, in the course of our lives, change our professions three or four times, and like to collect all we can from strangers as well as others, in the way of information" (185). As in Fay's experience with vaccination—which required him to "collect" experiences of disorders in order to learn the difference between true and spurious forms—Americans develop communal bonds by collecting from strangers and others. Paulding thus makes the case that national community is the beneficial effect of cross-cultural contact, just as the beneficial effect of vaccination is reduced mortality for

the population. Contact, even potentially dangerous kinds, are preferable over the isolation and near-certain death associated with avoidance.

Writers like Paulding and Hawthorne do not tend to be read, in scholarly accounts, as warning against the perils of isolationism. Instead, they are framed as quintessential early nationalists, engaged in the work of creating a unique American literary tradition. Hawthorne especially has come to be known as helping to build an American mythology and national self-conception through his stories and novels about the Puritans and colonial times. In many ways, Hawthorne in particular seems to enact the very imagined communities—and imagined immunities—described by Anderson and Wald, respectively. "Lady Eleanore's Mantle," a story about an English woman visiting an American colony while wearing a mantle infected with smallpox, which causes an outbreak that decimates the town, appears to be a straightforward example of the kinds of imaginative acts required to constitute the national group through the exclusion of pathogenic outsiders. Indeed, the story has been read as such   by its scholarly critics. Richard Boyd, for instance, argues that in this story Hawthorne positions the new nation as "one established only through the violent expulsion of an Other" (1990, 39). Blamed for the outbreak, Lady Eleanore becomes the scapegoat on whom the townspeople exact their retribution, which Boyd, following his scholarly predecessors, reads as a representing the American Revolution and the United States's constitution through the violent expulsion of British rule from the colonies (23; see also Gross 1955, 549). For Boyd and other critics, "Lady Eleanore's Mantle" has been understood as a national origin story, articulating how the United States came to separate itself from its European roots.

But this rather convoluted argument in which a fictional story about an actual smallpox epidemic in Boston in 1721 is in fact making a point about the American Revolution all while being published in 1838, misses a more immediate connection to be made between the story and contemporaneous debates about the efficacy of vaccination. David R. Hubbard, for instance, published in 1835 a monograph titled *A Treatise on Cow-Pox. In which the existence of small-pox, or varioloid in any form, subsequent to vaccination, is shown to arise from some imperfection in its performance, and not the result of inefficacy on the part of the vaccine to shield the system entirely from these diseases*—a book that takes on vaccination's detractors and argues for the keeping of cows "to keep on hand a *constant, genuine,* and *fresh* supply of it [cowpox]" (10). Nearly forty years after Jenner's original discovery that cowpox also defended against smallpox, the American public still remained uncertain about its efficacy, even as physicians like Hubbard insisted on the ability to produce genuine vaccinations under the right conditions. Achieving those conditions was not a matter a guess-work and symptom-reading after the fact but, as it had been with inoculation, a matter a preparation on the part of the physician. A fresh supply of cowpox would prevent degeneration so that when given to a human being, the best vaccine matter would develop. Then, the key, Waterhouse tells his readers, is following a simple maxim he received in a letter from Jenner: "TAKE THE VIRUS BEFORE THE EFFLORESCENCE APPEARS" (capitalization in the original; 1802, 377). Assuring the quality of vaccine matter came down to a reliance on *timing* in addition to the reading of symptoms. In other words, Waterhouse and Jenner identify a threshold beyond which susceptibility no longer

garners beneficial effects and moreover beyond which lies the possibility of malignant results.

The meeting of English and American is cast in light of bad timing in Hawthorne's story, suggesting that something had gone awry in the two nations' relationship. Invoking fears that taking vaccine matter at the incorrect time may lead to dire consequences, such as remaining undefended from full-blown smallpox, the narrator emphasizes the inauspicious timing of Lady Eleanore's arrival: "It was an awkward coincidence that the bell of the Old South was just then tolling for a funeral; so that, instead of a gladsome peal with which it was customary to announce the arrival of distinguished strangers, Lady Eleanore Rochcliffe was ushered by a doleful clang, as if calamity had come embodied in her beautiful person" ([1838] 1974, 274-275) Foreshadowing the smallpox that she carries unwittingly in her mantle and epidemic that will result, this passage, when read in light of ongoing debates about the safety and efficacy of vaccination raises questions about what, precisely, is going to be the cause of the outbreak. For Lady Eleanore has been brought to Boston "in the hope that [she] would be exposed to infinitely less peril from the primitive society of New England than amid the artifices and corruptions of a court" (273). Lady Eleanore is presented someone to be succored, not someone to be read as a scapegoat. Although she is known "for a harsh, unyielding pride," the narrator notes that it only "*seemed* due from Providence that pride so sinful should be followed by as severe a retribution" (my emphasis; 274). In other words, the introduction to the story suggests that Lady Eleanore is in fact the victim of Bostonians' negligence. It is America that is depicted as crossing the threshold from beneficial to malignant exposure and susceptibilities.

This notion of a threshold passed structures the relationship between Lady Eleanore and the American townspeople she meets in Hawthorne's story. Recounting misreadings of Lady Eleanore's person alongside the knowledge gained in hindsight of her infectiousness, the narration emphasizes the indeterminacy of the chain of events:

> Whether or no the recollections of those who saw her that evening were influenced by the strange events with which she was subsequently connected, so it was that her figure ever after recurred to them as marked by something wild and unnatural—although, at the time, the general whisper was of her exceeding beauty, and of the indescribable charm which her mantle threw around her. Some close observers, indeed, detected a feverish flush and alternate paleness of countenance, with a corresponding flow and revulsion of spirits, and once or twice a painful and helpless betrayal of lassitude, as if she were on the point of sinking to the ground. (278)

By foregrounding the various interpretations of Lady Eleanore's symptoms—of unnatural wildness, of beauty and charm, and of fever—the story insinuates two possibilities, one that actually occurred, which is the town's bewitchment and Lady Eleanore's separation from the community, and one that could have occurred, which is the recognition of dangerous symptoms and an effort to treat and cure. At some point during Lady Eleanore's visit, the narration insinuates, a failure to accurately read her symptoms lead to a malignant susceptibility—for both her and the townspeople. By telling a story about an outbreak, Hawthorne is able to make the point that England and the United States remain inextricably connected and that if the two countries are not careful, their mutual exposure will be disastrous to both. Importantly, this is a disaster that can be avoided.

It's worth remembering that the 1721 smallpox outbreak in Boston that is depicted in "Lady Eleanore's Mantle" is fictional—the story is not a historical accounting of what actually happened in 1721. In other words, Hawthorne writes a story about something that *did not come to pass* in American history. In this sense, his short story is a

cautionary tale—and a nationalist one at that—but it does not operate as a warning against the incursion of a pathogenic aristocratic Englishness. Instead, it warns against an American nationalism that fails to manage its exposures to other cultures and people, thereby allowing malignant relationships to flourish. A foolish Americanism— represented by the naive Jervase Helwyse—is revealed time and again in the story. Stepping out of her carriage, for instance, Lady Eleanore stands on Jervase Helwyse's back, a scene in which "an apter emblem of aristocracy and hereditary pride trampling on human sympathies and the kindred of nature" did not exist (276). Such a blatant display of aristocratic abuse of privilege did not deter those watching from admiring Lady Eleanore: "the spectators were so smitten with her beauty, and so essential did pride seem to the existence of such a creature, that they gave a simultaneous acclamation of applause" (ibid). Therefore, even though Dr. Clarke asks "Know ye not, that never came such a curse to our shores as this lovely Lady Eleanore? that her breath has filled the air with poison? that she has shaken pestilence and death upon the land, from the folds of her accursed mantle," the rest of the story positions Americans as much to blame for the epidemic (286). Hawthorne shows that Americans remain too enamored for English aristocracy to maintain their own distinct democratic national culture—one that is better suited than British society to survive in a globalized world.

Hawthorne uses the notion of sympathy in the story in order to represent the healthful interconnections between discrete national groups, and he emphasizes that it is the perversion of sympathy or its foreclosure that precipitates the community's disintegration. Indeed, Doctor Clarke misunderstands Lady Eleanore's transgression and therefore reads her as the worthy subject of divine punishment. He says to the English

Captain Langford, "But I tell you, sir, I could well-nigh doubt the justice of the Heaven above us if no signal humiliation overtake this lady, who now treads so haughtily into yonder mansion. She seeks to place herself above the sympathies of our common nature, which envelops all human souls. See, if that nature do not assert its claim over her in some mode that shall bring her level with the lowest!" (276). Although we might read Clarke as foretelling Lady Eleanore's doom, in fact he asserts an impossibility: throughout the story no one is able to place themselves "above the sympathies of our common nature," even Lady Eleanore, who was brought to America in the first place in order to envelop her within the protective sympathetic community of her last remaining living relatives. It is Captain Langford readers should believe when he says that she will never be brought low, "neither in life, nor when they lay her with her ancestors" (277). Doctor Clarke never learns the lesson of sympathy that other characters in the story— Lady Eleanore included—come to realize in the aftermath of the epidemic. In other words, Americans who fail to recognize their nation's dependence on outsiders also fail at true patriotism.

In order to underscore the degree to which American democrats require contact across national borders, the story asks readers to identify and sympathize with the British visitor. Lady Eleanore's recognition that she failed to reciprocate bonds of sympathy—an act with severe consequences—underscores for nineteenth-century readers how communities formed in isolation will be too fragile to bear the exposures of a globalized world. After the smallpox outbreak has decimated the town, Lady Eleanore declares herself and the values she represents as the source of blame: "I wrapped myself in PRIDE as in a MANTLE, and scorned the sympathies of nature; and therefore has nature made

this wretched body the medium of a dreadful sympathy. You are avenged—they are all avenged—Nature is avenged—for I am Eleanore Rochcliffe!" (287). The natural order of the world, Lady Eleanore's declaration suggests, is one in which all remain interconnected and it is just a matter of whether or not those sympathies will be "natural" or "dreadful." As we've seen in the other texts discussed in this chapter, interconnection and exposure are presented as the natural order of things, and it is was is made of those interconnections that determine the kind of community in which one lives and its longevity. If the townspeople of Boston represent the United States and Lady Eleanore England, then the moral of the story is both will be destroyed unless they embrace their natural sympathies. Indeed as the epidemic itself makes clear interconnection is unavoidable: "It compelled rich and poor to feel themselves brethren then; and stalking to and fro across the Three Hills, with a fierceness which made it almost a new pestilence, there was that mighty conqueror—that scourge and horror of our forefathers—the Small-Pox!" (283)

Conclusion

Smallpox was indeed a horror in early America—but not because of the networks along which it traveled. As Elizabeth Fenn so incisively points out in the epilogue to *Pox Americana* "the movement of the virus from one human being to another shows us how people actually lived in the late eighteenth century. For despite the political, social, and racial boundaries of the day, people rubbed elbows: They lived side by side, they talked, they fought, they traveled, they traded, and in these daily transactions, they passed *Variola* on to one another" (275). After the ascendency of the membrane model, "rubbing

elbows" would become, as Otis argues, an affront to national and individual selves. The networks that traverse boundaries from the late nineteenth century onward came to represent, then, the horror that gets enfolded within epidemic disease: the fear that the self will be lost should its borders be transgressed too many times. But in this earlier era, border-crossing was not yet inexorably linked to the spread of disease, and as this chapter has shown, came to be associated with salutary effects. In the next chapter, I examine how this notion of interconnection that Fenn stresses in her account of the eighteenth-century world is expressed in that century's Anglo-American plague writing. It considers how the lived experience of encounter—through travel, trade, war, etc.—and the deep sense of how the far-flung peoples of the globe were in fact shifting into closer proximity to each other created the conditions of possibility for constructing union as much from foreign as from domestic influence.

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Chapter 3

Plague Discourse and Constituting Eighteenth-Century Collectives

It may seem somewhat anachronistic to assert that the development of democratic society in the United States is indebted to an Anglo-American tradition of plague writing, since the disease did not make its way to American shores until 1899, when its bubonic form spread from the island of Hawaii to the continental states. Moreover, while circulation of news during the colonial era (when many countries regularly confronted bubonic and other varieties of plague) ensured that Europeans living in the Americas were well aware of the disease and the possibility it could spread across the Atlantic, colonists were more concerned with what they considered to be their own pestilential disorder: yellow fever. Therefore, it may appear more sensible to study American nationhood and transmissible disease after the American Revolution by analyzing not the plague but fictionalized accounts of yellow fever outbreaks in the writings of key voices of early American literature, such as Charles Brockden Brown. Indeed, Brown's yellow fever novels are the subject of this work's third chapter: the 1793 outbreak in Philadelphia that he captures in *Arthur Mervyn* and *Ormond* provides a provocative context through which newly-minted Americans constructed their national character.

In reading the archive of yellow fever sources from the end of the eighteenth century, however, it becomes clear that American interpretations of yellow fever and its significance for the national community remained indebted to previous textual outpourings on the plague. In works composed by literary writers like Brown and

Augusta Jane Evans or medical professionals like Benjamin Rush or respected non-practitioners like Noah Webster and Mathew Carey, yellow fever, to a certain extent, was represented as another version of "the black death." The last great bubonic plague outbreak in the collective Anglo-American memory broke out in Marseilles, France in 1720, and many feared that it would make its way across the Channel and then from there to England's colonial territories (Zuckerman 2004, 276). Although this outbreak was one only of the imagination (the disease never did make it to England or the Americas), the 1720 plague proved formative of an Anglo-American national consciousness that saw its future in terms of the successful navigation of the inevitable, communicable encounters along transatlantic networks. This sense that the nations of the eighteenth century emerged from sites of interaction—ideological, political, textual, economic, geographical, corporeal—became even more acute after the American Revolution. This is to say that nation-building was not just a matter of maps and parliamentary debate, and took place not just on pages of incendiary political pamphlets, but also was enacted on battlefields, manifested in bodies, and made visible by the transmission of disease. Prior to this colonial conflict, such massive encounters of human beings, material resources, political ideas, and religious beliefs, had taken place at the edges of the English empire's sovereign domains. With the founding of the United States, however, such interactions became the material conditions of a democratic society that had to prove its viability to the rest of the world. The need to imagine a nation as having diverse material conditions of possibility found its outlet in writings about the plague. This chapter argues that the kinds of nationhood imagined in the context of transatlantic networks and the bubonic plague laid the groundwork for developments in American self-fashioning similarly

precipitated by yellow fever. My aim in this chapter, then, is to establish the plague roots of American nationhood.

I examine two key voices from the early American canon who are instrumental in bringing plague discourses to bear on eighteenth-century interpretations of national belonging: Creole Virginian planter William Byrd II and enslaved author and entrepreneur Olaudah Equiano. Neither writer—in contrast to a contemporary like Daniel Defoe, for instance—has been thought of as a plague author, although it is not unknown that Byrd wrote a medical work on the plague in 1721, titled *A Discourse Concerning the Plague, with some Preservatives Against it. By a Lover of Mankind*, and Equiano makes use of metaphors of pestilence to critique the slave trade in his 1789 autobiography *The Interesting Narrative of the Life of Olaudah Equiano, or Gustavus Vassa, the African, Written by Himself.* And while both authors have been recognized as crucial to understanding how collective belonging was defined in an age of colonial expansion, ignoring their investment in using epidemic disorders to figure colonial communities has led to a misunderstanding of Byrd and Equiano as piecing together new kinds of hybrid identities available only at the fringes of empire (Bauer 2003; Bozeman 2003). Instead, I argue in this chapter that by thinking about them as plague authors, we can see how they came to envision English nationhood itself as expansive, trans-geographic, and comprised of heterogeneous types. In other words, they saw the nation constituted by virtue of those who it was able to include in its self-conception.

To begin with voices like Byrd and Equiano is to insist, in part, on the simultaneously transatlantic and regional quality of nationhood formations in the eighteenth century. Each author's orientation within a collectivity comes from his

location within geographical spaces: Byrd speaks from the perspective of the Americas and England while Equiano identifies with a collection of cirum-Atlantic spaces, including various countries in Africa, England, and the West Indies. Ways of representing and talking about pestilent disorders provided concepts and language for representing and talking about nationhood when transatlantic networks seemed to be dispersing individuals, rather than building collectivities. Essentially, through their engagement with the plague, Byrd and Equiano come to imagine English nationhood as containing many cultures and places. In contrast, then, to what Benedict Anderson ([1983] 2006) argues is necessary for the constitution of a modern nation—a shared group mythology that maps onto a discrete geographical location—this earlier form of nationhood embraced dislocations, whether geographical, cultural, or even corporeal, as its condition of possibility.

This chapter emphasizes, therefore, that such plague roots, paradoxically from our twenty-first century perspective, offered the most stable discursive means of ensuring national integrity for Anglo-Americans (and later for members of the United States). The successes of European colonialism meant that nationhood could not be made equivalent to a particular geographical space, since colonies occupied various longitudes and latitudes. Nor could nationhood correspond any longer to a particular type of humoral body (sanguine, choleric, phlegmatic, or melancholic), since individual bodies were believed to be plastic and ever changing (for better or worse) by exposure to new climates, terrains, peoples, ideas, food, and clothing of the colonies (Floyd-Wilson 2003, 2-4; Wheeler 2000, 2). An epidemic disease like the plague (or yellow fever), however, was considered a great equalizer because it "chose" its victims from across the entire

spectrum of the population. This chapter considers the consequences of the macabre union of universal susceptibility for our understanding of what eighteenth-century writers meant when they invoked the term "nation."

Even before a revolutionary break with England was conceived and the United States envisioned as a sovereign republic guided by the will of the people, it was clear to writers like Byrd and Equiano that "the many" were the source of national constituencies. Colonization highlighted the diverse types of individuals that helped to keep imperial economic endeavors, for instance, moving forward across oceans and on many different continents. What might be perceived as Byrd's and Equiano's marginality—for example, their Creole and enslaved identities, respectively—should be recognized instead as a colonial status quo of heterogeneity: trade, the expansion of scientific knowledge, even household amenities in the average English home came to depend on people like Byrd growing tobacco in Virginia and the slave labor of someone like Equiano. Moreover, precisely because they come from quite different subject-positions themselves, these two authors help us to see the dynamism of nationhood's constructions in this transatlantic era. For Byrd and Equiano, their status as male, as having dark or light complexions, and as America- or Africa-born mattered to how they saw themselves fitting into a national community—and changed how they understood nationhood itself. Therefore, to account only for these markers of identity when trying to understand eighteenth-century English nationhood fails to capture the plasticity of these characteristics—especially as they were altered along geohumoral transatlantic networks. Rather than trying to interpret Byrd and Equiano as trying to circumvent their exclusion from the "core" of the English empire— and as a result, national self-conceptions—this chapter argues that these writers extended

the notion of mutable human bodies to an understanding of the national body's constitution as likewise plastic and potentially beneficially influenced by the foreign.

As such, this analysis of Byrd and Equiano is attentive to the continued influence of geohumoralism in the eighteenth century. As Mary Floyd-Wilson explains, early modern English writers adapted classical geohumoralism to create as superior the white-skinned, sanguine humoral body found in Great Britain (2003, 12). Although this project will not be able to be a sustained study of what happens to geohumoralism after the early modern era, it does consider how this epistemology gets put into play in certain circumstances in the Americas, especially in terms of defining belonging to a national group. Byrd and Equiano still think in terms of complexion, regional influences on embodiment, and these ideas' participation in determining whether or not individuals deserve the social and legal protections that go along with assumed belonging to a national group. In particular, both writers retain the regional cast that early modern geohumoralism takes on as the English try to rescue their less-desirable phenotype from classical ignominy. Both of these eighteenth-century voices use a similar rhetorical approach to rescue their colonial locations and identities from peripheral status and dismissal from social importance. They do so by bringing an older geohumoral regionalism into accord with innovative new perceptions about the spread of epidemic disease, which allows both Byrd and Equiano to more strongly position the Americas as the therapeutic solution to England's national ills.

We might ask how plague discourse facilitates this inclusive form of national belonging in the eighteenth century since, on the one hand, epidemic infections are precisely the kind of bad consequences that arise from traffic in exotic locales, and on the

other hand, we know from history that epidemic disorders, of pestilential or other varieties, are notorious for their role in breaking down civic order and replacing nationalists sentiments with a fear that one's fellow citizens are the bearers of deadly contagions. Paradoxically, however, the circulation of *narratives* about pestilence have the opposite effect. Even as medical, historical, journalistic, and fictional accounts depict the disintegration of social order, textual records themselves serve to contain the anarchical tendencies of epidemics precisely because they seek to provide a definitive accounting of a disease's history, symptoms, prognosis, preventatives, and therapeutic measures. In the case of Byrd's and Equiano's experiences within the circum-Atlantic world, they combine textuality's ability to control, imaginatively, epidemics with their function as a vocabulary of union in order to conceive of national communities that encompass heterogeneous individuals—to understand the body politic as plastic and mutable as the geohumoral human body in which its analogue is found.

This linkage between imagining contagious disease and nationhood has a long history in England cultural expression. Literary critic Jonathan Gil Harris identifies in the early modern era the roots of twentieth-century perception of the foreign as an invading pathogen that, paradoxically, both threatens and helps to maintain the health of the body politic (1998, 4-16).[11] "In both twentieth-century USA and early modern England," he argues, "containment does not necessarily entail a confident, monolithic power turning all subversion to account; more often than not, the production and containment of an external, infiltrating threat involves an anxious negotiation - and repudiation - of genuinely disruptive problems generated within the body politic, as a result of which the

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[11] In his second book on the topic, Harris argues further that the language of contagiousness became a way of talking about mercantilism and the formation of a transnationally-situated English nation-state (2004, 13).

locus of social conflict is symbolically (if not actually) displaced from inside the body to its boundaries and vulnerable apertures" (13). While it is certainly the case, as Harris makes clear, that age after age in human history, epidemic diseases prove over and again a productive imaginative site for understanding the relationship between a people, their nation, and other like collectivities, and while there may be commonalities between the early modern period and our contemporary moment, this chapter shows how eighteenth-century medical ideas about quarantine methods and a growing debate over whether or not the plague was contagious resulted in an epistemic orientation more toward therapeutics than pathologies. What Harris identifies as "a decisive epistemic shift in formulations of the body politic towards the recognizably modern political discourses of infection, containment, and foreign bodies" is not a permanent transformation, and that for an approximately 150-year time span an interest in reviving geohumoral attitudes to cast "vulnerable apertures" as entry points for therapeutic interventions (16). As a result, when nationhood arose, discursively, as a means for organizing the relationships amongst individuals living in disparate parts of the English empire, it was formulated as an inclusive activity in which the body politic became ever more extensively variegated rather than an exclusionary act in which the preservation of a pure English "type" was protected from foreign influences.

This chapter is organized into four sections that trace relevant medical ideas about pestilential disorders in relation to Byrd's and Equiano's invocations of transmissible disease in the *The History of the Dividing Line Betwixt Virginia and North Carolina* (1728) and the *Narrative*, respectively. I begin with English physician Richard Mead and his opposition to the practice of enclosure as the only prophylactic against the plague. His

thought represents a shift from the early modern pathologization of the foreign to a model

in which all communities' shared susceptibility to pestilence and a recognition of the

permeability of borders invoke a therapeutic imperative as the only sustainable defense

against the disease. Byrd's monograph on the plague exemplifies this kind of thinking,

and I examine how his discussion of new-world crop tobacco's prophylactic and

therapeutic properties combine early modern contagionism's insistence on disease

vectors with geohumoralism's holism in order to position the Americas, its products, and

its inhabitants as capable of belonging to a mutable English nationhood. In the second

part, then, I read Byrd's *History* as making these claims more explicitly that his medical

text. The *History*, I argue, presents English colonial history and colonials themselves in

medical terms in order for Byrd to situate himself an authority—as a physician of sorts

and as an official working for the crown—who advocates for a plastic conception of

Englishness. If for Byrd colonial expansion leads to a nationalism conceived of as a web

connecting all kinds of peoples and places, then for Equiano the transatlantic slave

economy illuminates how fragile those strands are and how easily such connections

disintegrate. Equiano's *Narrative* uses pestilence as a means for telling stories about how

local spaces along the slave economy's network are sources of a collectivity's pollution.

In the third part, I examine English philanthropist John Howard's 1789 *An Account of the

Principal Lazarettos in Europe; with various papers relative to the Plague* to

demonstrate an increasing interest in cleansing small spaces—prison cells, hospitals, and

ship holds—as central to maintaining national integrity. Equiano's *Narrative*, by

foregrounding the pestilent nature of the slave trade, describes England as a nation in

crisis and on the verge of its own dissolution, a process that could be reversed with a radical new conception of Englishness that includes a variety of racial types.

From Enclosure to Therapeutics: Richard Mead and William Byrd II

In 1720, the last major European epidemic of the bubonic plague broke out in Marseilles, France. Across the Channel, the English imagination quickly became preoccupied with plague, in the form of medical and lay books on the subject of plague, its history, and its future in Great Britain. While the disease itself was spreading in southern France, stories about it circulated in other parts of Europe. Between 1720 and 1722, in excess of fifty works on the plague were published in London, including Daniel Defoe's *The Journal of the Plague Year* (Roberts 2010, x). Printed in 1722 the *Journal* serves as an iconic example of the English obsession with the plague, given its dramatic detailing of scenes of human misery including the practice of "shutting up of houses," a method for confining the sick practiced during the 1665 plague outbreak in London. "I mentioned above shutting of houses up," says the narrator, "and it is needful to say something particularly to that, for this part of the history of the plague is very melancholy; *but the most grievous story must be told*" (Defoe [1722] 2010, 33) Grievous indeed: those enclosed in their houses had to rely on guards to get them food, water, and medicinal supplies. If neglect on the part of these officials did not kill them, confining "those that were well with those that were sick" very likely would have (136). Although the practice would keep "distempered people" from roaming the streets, the narrator argues, "[i]t is doubtful to this day whether, in the whole, it contributed anything to the stop of the infection; and indeed I cannot say it did, for nothing could run with greater

fury and rage than the infection did when it was in its chief violence, though the houses infected were shut up as exactly and as effectually as it was possible" (ibid). Despite being condoned, legally, as a means for protecting the public good, experience seemed to prove enclosure practices an indifferent or even detrimental force in plague times.

Whereas Defoe's *Journal* has retained a position of some prominence in the Western imagination (due to its author's importance to the English literary canon and its own value as a generically intriguing literary work), its medical corollary by Richard Mead has become somewhat more obscure, despite its significance during the eighteenth century (Zuckerman 2004, 307-308). But in the early eighteenth-century, when Londoners feared that the fate of Marseilles would become their own, Mead's *A Short Discourse Concerning Pestilential Contagion, And the Methods To be used to Prevent it* proved a key source of information—indeed, it was one of the volumes that Defoe turned to when writing the *Journal* (Roberts 2010, xiii) First published in 1720, by 1722 the book was in its eighth edition and had undergone an important expansion. A tidy 59-page volume, the 1720 edition covers two topics: the contagion itself and how to prevent it. Nearly double in size, the 1722 edition serves less as a quick how-to volume for dealing with an epidemic and more as a medical reference work on the plague, to which was added "*a more full Description of the* Plague*, and its Causes, and by collected some Examples of good Success, from the putting in Practice such Measures as I had prescribed. I have likewise annex'd a short Chapter relating to the* Cure *of the* Plague*, being induced thereto, by considering how widely most Authors have erred in prescribing that heap of* useless*, and very often* hurtful Medicines" (i-ii). It is from this edition that I

will be citing, given its more thorough analysis of the prophylactic and therapeutic methods Mead thought necessary should the plague arrive on England's shores.

Mead's application of medical scientific knowledge to either prevent or treat the plague marked a significant departure from the enclosure measures of the seventeenth century. Like Defoe, he condemned such imprisonment tactics as inhumane—tactics he saw being misused with deadly effects in Marseilles's plague hospitals (xvi-xvii). The problem with enclosure was not, however, the notion of quarantine—that is, isolating individuals suspected of or proven to be infectious. Rather, Mead's *Discourse* depicts medical systems of containment as an exacting and precise science with different approaches to the healthy, the potentially infected, and the ill. Enclosure, in contrast to quarantine, becomes the indiscriminate, dangerous mixing of the sick and the well. Indeed, by the time Mead produces his 1722 edition, much of the volume consists of rules for when and how to quarantine individuals and items believed to carry the disease (including clothing, paper, and cotton bales). Because the poor, for instance, lived in close quarters "*in all Respects very incommodious for diseased Persons*," Mead recommends removing them to hospitals or *lazarettos* (buildings for containing those who became ill with infectious disorders or were suspected of contagiousness) outside the city (xxi-xxii). But once greater numbers become sick, he advises "*that they be left in their Houses, without any of those unmerciful Restraints heretofore put upon them, and the Families they belonged to*" (xx-xxi). Healthy family members would be allowed to come and go from infected homes as long as they "*carry about them* a long Stick of *some remarkable Colour, or other* visible Token, *by which People may be warned from holding too free Converse with them*" (xxi). No such permeable borders existed, however,

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when it came to ships arriving from infected places. Quarantine of merchants and other sorts of sea-farers required keeping outside the geographical bounds of England and strict separation of the well and the sick (72). Not satisfied with mere containment, Mead's quarantine measures sought to balance the country's continued need for movement—of trade goods or caregivers, for example—with the prevention of the disease's spread.

Therefore, what in the seventeenth century had been simply imprisonment, which removed someone from the nation, became a couple decades later a complex system that used someone's relationship to the plague to assert even more strongly their place within the community. In the seventeenth century, sickness and proximity to it meant being declared, implicitly, politically (and physically) dead and in need of enclosure to prevent the "spread" of that fatal dissolution to the rest of the nation. In contrast, the eighteenth century plague discourse, in the words of Mead, positioned "*Compassion* and *Care*" for "the *Diseased*" as an endeavor well worth the expense and effort because it would be "saving a Nation from the greatest of Calamities" (100). Mead here constructs what we might call an *epidemic* imagined community, one founded on imagining sick individuals not as "others" in need of exclusion to protect the larger community, but as members in need of especial care—which, when supplied, would affirm the nation existence. In his highly influential *Imagined Communities: Reflections on the Origin and Spread of Nationalism*, Benedict Anderson ([1983] 2006) argued the imagined communities produced through mass print culture that helped to create the modern nation did not come into existence for Europeans until the nineteenth century. But Mead's writings about the threat of plague underscore how imagined communities were operative nearly one hundred years earlier: "And it may, perhaps, at some Times, for Reasons, with which I

shall not pretend to meddle, be necessary to give Way to popular Prejudices and Clamours, and reject even the best Laws that can be made; more especially when the Danger is at a Distance; but should the Plague come among Us (which God avert) I make no question, but the Voice of the People, and the Wisdom of the Nation, would concur in taking Measures not very different from These I have prescribed" (Mead 1722, 29). Unlike Anderson's imagined communities, which posited the immemorial history of the nation, assumed its extensive future, and saw it grounded texts and stories, the epidemic imagined community is an event of the immediate present—instantiated in narrative and corporeal forms (Anderson [1983] 2006, 19). This sense that nations took form in the now and out of the real people living and working at a particular time in history meant that this age remained aware of the heterogeneous constituents of a given community. Whether sick or well, living in London or across the Atlantic in New England, diverse kinds of people were transforming what it meant to be English.

But Mead's complex system of containment, as much as it was willing to include both the sick and the well into a national self-conception, still imagined Englishness as arising from the geographical space referred to as "England." But English people were increasingly dispersed beyond the borders of England proper. The country had been engaged in colonization in Ireland and the Americas since the end of the sixteenth century. In 1584, Sir Walter Raleigh established the colony of Roanoke, and despite its failure, during the seventeenth century the first British empire was established amongst those of other European states on the shores of North America and the islands of the Caribbean. What Mead could not help but imagine as an isolated, geopolitical entity,

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however, the Creole William Byrd II saw as an extensive empire, partaking of and inextricable from the influences of many places from across the globe.

Byrd was born and lived in Virginia until he came of age and traveled to England to earn his law degree, after which he returned to the colonies to serve the crown and to care for the tobacco plantation he inherited from his father. More than his biography, though, Byrd's medical writing underscores how he saw England as no longer an island separated from the rest of the world by large bodies of water, and instead, extended in its geographical range by trade and colonization. His *A Discourse Concerning the Plague, with some Preservatives Against it. By a Lover of Mankind*, therefore, corrects Mead's geographical bias. He reminds the English that they have been engaged in "constant and extensive Traffick" in "every part of the *Levant* [a place notorious for the plague], and the very little care that has been taken to hinder the Infection" (1721, 13). Given the extensive trade connections that exist between England and places like the Levant, Byrd's comment implies, it is not worthwhile to think of each as geographical locations distant from each other because commercial interests have made it possible for one to infect the other as if they shared a border on land. Because of its ambitions abroad, England had made the globe a rather small place—with the dangerous consequence of spreading disease.

But these aspirations of colonial expansion likewise provided the needed therapeutic tools to deal with the threat of the plague in the form of that American crop, tobacco. The scent of tobacco or its smoke, some believed, had prophylactic and therapeutic properties when it came to the plague, meaning that it could be used to prevent human bodies from "imbibing" the poisonous fomites or miasmas responsible for

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inducing in the human form the bubonic plague (Byrd 1721, 15-16; for eighteenth-century disease theories see also DeLacey 1999). Since "the universal use of Tobacco" became a common practice, Byrd argues, England suffered less frequently from the plague (1721, 13). The benefits accrued from England's western expansion into the Americas balanced out, in Byrd's view, the dangers it risked in its eastern trade connections—both of which altered the experience of Englishness. The England Byrd knew was a much larger place that was also increasingly exposed to transmissible disease and, by virtue of its reach across the Atlantic, all that more prepared to survive it.

Byrd certainly proved himself a savvy salesman of his own product, touting tobacco's near miraculous powers in the face of what he described as "the enemy of mankind" (15). But Byrd was more than a mere opportunist, and he took his medical calling very seriously, so it is important to read Byrd's discussion of tobacco in light of what he saw as his role as a physician because, although he was an amateur, Byrd made an effort to keep abreast of the medical developments of his age (Kilman and Kilman 46). It was in this role as physician—just as in his role as surveyor for the Crown—that Byrd is thinking about the cohesiveness of a people and how, paradoxically, disease was a means for strengthening a community. He believed that although God caused the plague (through natural or secondary causes) as the ideal punishment "to chastize [sic] a corrupt and degenerate people" (Byrd 1721, 3), its cure could also be found in nature and that there was nothing blasphemous about acquiring medical knowledge to combat the disease (3-9). The Americas proved the source of such new medical knowledge, since the colonies were in a place that "does not want the natural causes which in *Asia* produce the Plague" but that does not suffer from it (14). By recognizing that the American colonies

were an extension of England, Byrd implies, then that the country, too, could embrace a new identity, one that did not have to worry about the plague, despite its vast interconnections with the disease's sources. In order to do so, though, it would need to recognize its newfound expansiveness.

In writing his *Discourse*, Byrd imagines an Englishness that coheres not according to geographical location but by virtue of access to and willingness to use a particular plant, tobacco, in a prophylactic and, if necessary, therapeutic way. He envisions an English nation that is not concerned with what its members' bodies might look like but simply how to keep all those bodies from falling ill. The colonies in the Americas are a model for this kind of community, according to Byrd: "Most of the southern colonies cultivate this useful Plant, and all in general take it, as well Europeans and Indians, as Negroes; so that there is no complection [sic], no degree of men, but arm themselves with this invincible antidote" (15). What Byrd sees in the southern colonies is not, necessarily, a cosmopolitan Englishness that includes Europeans, Indians, and black-skinned peoples, but an image of Englishness being constructed in the context of close contact with all different kinds of peoples, as represented by their diverse complexions, cultural backgrounds, and social class. It is an Englishness that recognizes that all people can benefit from and therefore deserve access to an "invincible antidote" like tobacco. Like in Mead's formulation, it is an Englishness that does not need to identify some individuals as pathological and cut them off from the rest of its society in order to assure its own future. Instead, this is an Englishness that assures its own future by recognizing the common humanity of those alongside which the English must live.

Englishness was changing by virtue of its colonial expansion, just as the English

bodies that went abroad were being influenced by the new climes and geographies it

inhabited. It was necessary to find out how to use the influence of new places to augment

the strength and health of individuals and, by extension, their nation, rather than succumb

to malignant influences. Byrd's *Discourse* provides just such an example of how England

might view its new extensions into the Americas not as sources of dissolution but as

sources of rejuvenation. Harris argues that in the early modern era, England would cast

some threats to its integrity as external, invading pathogens in order to mask factures

within its national community that were also sources of threat. But what Byrd does in the

Discourse is to take would be external forces and reveal how they have become elements

internal to English self-fashioning—to be brought into harmonious balance with the other

"elements" that made up the nation. The American colonies, in Byrd's view, could not be

seen as external influences threatening English integrity, but a new, internal

heterogeneity with which it had to come to terms. England had come to encompass many

new kinds of places, all connected by permeable boundaries and capable of influencing

each other. Byrd's *History* thinks through how to imagine these permeable boundaries as

productive interactions of renewal (like the healthful balance of the humors) instead of

self-destructive (like a deadly humoral imbalance).

Dividing Lines

 Byrd only mentions quarantine once in his *Discourse*, when he briefly states, in

agreement with Mead, the need for strict quarantines for ships arriving on England's

shores (30). Otherwise, his promotion of the miraculous properties of tobacco

underscores how Byrd perceived of such boundaries as having limited efficacy, an opinion shared by Mead who rejects as a practice "inclosing Infected *Places with* Lines" (Mead 1722, xxv). Instead, he argues "*that free Liberty be given to every one, that pleases, to depart from the* Infected Place, *without being put to any other Difficulty, that the Performance of a short* Quarantain *of about three Weeks, in some Place of Safety*" (xxv). Seventeenth-century practices of enclosure assumed (or, at least, hoped) that once a "line" is established it would operate as an impenetrable boundary that would halt the transmission of disease, but Mead and Byrd recognize how impractical such lines are in reality. In terms of the plague, Mead approaches drawing lines not as a way to definitively determine the difference between a sick person and a well person, but instead as a way to establish the responsibilities each owes to the community and those the community owes in return. Just as the community promises not to lock away and condemn to death those from "infected places," so too do those individuals submit to a brief quarantine with the full knowledge that if they fall ill they will be cared for, and if they remain well they will regain their liberty, which can used to help treat the sick. Only through the recognition of permeable boundaries—between states of wellness and sickness, for instance, or between infected and uninfected places—does it become possible to use epidemic disease as a grounding for national solidarity, which both Mead and Byrd do.

In his *History of the Dividing Line Betwixt Virginia and North Carolina*, Byrd creates a lengthy reflection on how permeable boundaries—this time not in plague contexts—produce the nation. What Mead was able to determine about the permeability of political boundaries by way of his knowledge of the history of the plague, Byrd

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acquired, in addition to his study of the plague, through living as a Creole, with ties to both the colonies and England. On March 28, 1674, William Byrd II was born in Charles City County, Virginia. The son of a Londoner, who emigrated and became a Virginia tobacco plantation owner, Byrd was both a British aristocrat and Virginian gentleman. He became a Royal Society Fellow in 1696, and also received political appointments in the Americas. His participation on the joint commission to survey the Virginia-North Carolina boundary line inspired him to record the process, which became the *History*. The manuscript circulated amongst friends during his lifetime, but it was not published for general readership until 1841.

In a certain regard, the commission to draw an official boundary line between Virginia and North Carolina was a success. Although the surveyors from North Carolina quit upon reaching the Appalachian foothills, the Virginian portion of the team persevered until the project was complete. Nevertheless, what was official on paper remained unresolved in the colonies themselves, as Byrd records in the *History*'s appendix: "*the dispute between the said two governments about their true limits continues still, notwithstanding the several meetings of the commissioners, and all the proceedings of many years past, in order to adjust that affair*" (Charles Eden and Alexander Spotswood quoted in Byrd 1841, 97). Accordingly, it fell out that the official line that Byrd and his fellow commissioners drew proved largely ineffective because even though some adhered strictly to it and the rules of governance it represented, others saw it as inconsequential. All in all, the dividing line between Virginia and North Carolina symbolized the difficulty of enforcing strict sociopolitical boundaries, as traffic across them rendered the places on either side indistinct from one another and made it

difficult to determine where one had more claim than the other. In this regard, the *History* becomes a microcosmic case study of the challenges facing the English nation during the age of transatlantic trade and colonization, which also had interests and people in so many new places that it, too, seemed indistinct, permeable, and dissolving because of its extraordinary expansion. But Byrd's *History* offered new ways for thinking about English nationhood that made its expansiveness its condition of possibility, rather than a sign of its future demise.

For Byrd, the task in the *History* is to instantiate an English nationhood in which Creoles (and others living in the colonies) belong in the same way as their metropole counterparts, despite being located in a different geohumoral clime. Descendents of European settlers in the Americas, American Creoles were individuals who were, according to Ralph Bauer, "neither colonized nor colonizers but rather *colonials*" (2003, 5). Byrd himself lived in England five different times (totaling near thirty years in residence) and spent the remainder of his life in the colonies. A means of negotiating between the "core" (i.e. England or Europe) and the "periphery" (i.e. colonized spaces, such as the Americas or Africa), Bauer argues that a Creole maintained a hybrid identity, drawing from both European and New World influences and inheritances. An expression of this hybridity, Byrd writes the *History*, Bauer asserts, "as a satirical response to his ambivalent location as an American Creole within the cultural geography of Enlightenment historiographic authorship" (181). However, I contend that Byrd positions himself as an authority of a new kind of Englishness, one which arises from many places and amongst diverse peoples and cultures, and the *History* testifies to one man's experience of this new kind of Englishness. I see three moments in particular helping to

construct this notion of English nationhood: Byrd's brief history of English colonialism that opens the *History*, his argument for intermarriage, and his comparisons between Virginians and North Carolinians. Each moment invokes nationhood through the simultaneous creation of and transgression of boundaries that characterizes eighteenth-century transatlantic Englishness. In other words, each passage is a lesson in how to see permeable boundaries as a national strength.

Byrd recognizes that writing history can help to affirm a nation's existence, to determine how it may be distinguished from other like collectivities, and to unite its constituents through a common memory. These are precisely the kind of imaginative acts that Anderson identifies as the source of modern national self-consciousness, but Byrd plays with what is also clearly an eighteenth-century assumption that stories can constitute community in order to suggest that material and corporeal conditions likewise are requisite for a collective to emerge. Since the *History* begins, then, with a history of early English efforts at colonization, it is clearly aiming to offer an interpretation—from the perspective of the colonies—as to what the English nation has been and what it has become in light of its expansion into the so-called New World. The story, however, that Byrd offers is not one of union, but fragmentation and disputation. Virginia, Byrd explains, used to designate quite a large expanse of territory that was under "the dominion of the king of Great Britain and stretching quite as far of as the cape of Florida" (1841, 1). This unity of governance and geography inevitably undergo divisions: lines get drawn and as a result "[t]he next country dismembered from Virginia was New Scotland" (5), "[a]nother limb lopped off from Virginia was New York" (ibid) and "what wounded Virginia deepest was the cutting off Maryland from it" (6). Drawing lines, Byrd

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insinuates, tend to fragment the nation, no matter how narrative or history are mobilized to affirm its enduring integrity. The metaphors of bodily dismemberment underscore how incorporation, while a useful image for understanding national unions, does not ensure them.

Byrd's *History* thus evinces an ambivalent attitude toward drawing boundary lines. Even as they enable easier management of the population—whether as colonial subjects or plague victims—if too rigorously enforced (i.e. sliding back toward an enclosure mentality), they tend to promote dissolution rather than community. But what if a line could be drawn that did not dismember or wound the collectivity? As in Mead's *Discourse*, which distinguishes between the sick, the well, and the potentially infected but allows for contact and exchange between them, Byrd envisions an English community in which its elements can be differentiated but not cut off from each other. He initially uses a disease metaphor to convey this idea when he describes the failed Roanoke colony as capable of "allay[ing] the itch of sailing to this new world" only temporarily before "the distemper broke out again" (2). The collectivity has in common not a history, a geographical location, or even a culture; instead, it is constituted only by a colonizing impulse—an impulse of the present and the future. Importantly, Byrd positions colonies in the New World as treatment for a contagious, recurrent Old World "disease." Just as tobacco created an England less susceptible to the plague, the colonies, Byrd implies, will improve the metaphorical health of the nation. Essentially, he describes a nation made whole because its colonies on the other side of the Atlantic. To cast the Roanoke story as one of distemper and cure provides Byrd with the therapeutic

framework through which to spin out his understanding of English nationhood in the colonial era as threatened by degeneration.

The comparison between the peoples of one nation to those of another was one means of determining a population's degeneracy, and Byrd used Indians for this purpose and the question of English marriages to them to that end. His argument for intermarriage in the *History* has alternatively been interpreted as either a sincere account of marital and/or sexual relations in the Americas or as satire (Godbeer 1999, 91-111). But whether it is a satirical critique of colonialism's assimilationist and violent approach to the peoples inhabiting the Americas or as an argument that aimed at a peaceful solution between Native and European cultures as they met at the boundaries of exploration and settlement, it more importantly provides a context for understanding English degeneration. Scholarly work has been done to establish that most Western cultures—the English being no exception—saw the human body as plastic. A geohumoral belief in the mutability of the human body generated fears that English bodies could degenerate under the influence of foreign climate, cultures, food, and terrain (Parrish 2006, 86-88). Some argued, of course, that any given location also provided the remedies to its degenerative properties (ibid). It is tempting to read Byrd's *History* as an example of this kind of thinking, since his descriptions of Indian vitality and dark-skinned complexions invoked both the fear that swarthy skin was a sign of inferior physiology and the hope that the American environment would have salutary effects on English bodies: *"The Indians are generally tall and well-proportioned, which may make full amends for the darkness of their complexions. Add to this, that they are healthy and strong, with constitutions untainted by lewdness, and not enfeebled by luxury"* (Byrd 1841, 3). But when read in

light of Byrd's ideas about degeneracy and the plague, then it becomes clear that he is making a more complex argument about how the English body politic depends on its American colonies to prevent its own degeneration.

As was noted in the previous section, Byrd saw the plague as God's punishment for "a corrupt and degenerate people" (Byrd 1721, 3), and his *History* insinuates that the English are just one such kind of people. Enfeebled by luxury, tainted by lewdness—this is the characterization of Englishness that Byrd slips into his descriptions of the Indians. Implicit also in his argument for intermarriage, then, is the suggestion that, just as with the bubonic plague and tobacco, the Americas produce the therapy that England needs. On the one hand, English bodies are potentially enfeebled by an overly luxurious life in Great Britain, but as the Indian constitution proves, bodies that spend time in the Americas may become healthy and strong. On the other hand, the *History* puts forth the notion that so too is the body politic weakened when imagined only in light of the people living in England proper, and therefore, the national community may be made stronger and healthier by writing into its own story its Creole members and their experiences in the so-called New World. But there's a kind of dividing line in place: one evoked through the argument of intermarriage. As long as the English (unlike their French neighbors) refuse to consider the possibility of marrying Indians, they are in a larger sense cutting the nation in half by also denying union with any person influenced by the American environment. Simply entertaining the idea of marriage, Byrd's text shows, is just the kind of recognition of permeable boundaries and national expansiveness required to keep the nation from dissolution.

Byrd's *History* underscores that England needs to embrace a new history, one that accounts for the colonies not as parcels of land to be understood as poor copies of places back in Great Britain ("New Scotland," "New York," etc.) but as transformative additions that remake the nation into a better place. In his contrastive depiction of the North Carolinians and the Virginians, Byrd offers two options for England's future history, either one of continued degeneration or one of the proactive pursuit of health. The North Carolinians prove to be indeed poor copies of the worst of English society back home, according to Byrd: "The truth of it is, the inhabitants of North Carolina devour so much swine's flesh, that it fills them full of gross humours. For want too of a constant supply of salt, they are commonly obliged to eat it fresh, and that begets the highest taint of scurvy….Thus, considering the foul and pernicious effects of eating swine's flesh in a hot country, it was wisely forbidden and made an abomination to the Jews, who lived much in the same latitude with Carolina" (1841, 16-17). We might read Byrd's criticisms of the North Carolinians as an argument for excluding an undesirable people and place from English national self-fashioning if it weren't for the fact that he sees laziness as typical of the worst of Englishness (Parrish 2006, 96). Byrd reminds readers that in the days of John Smith's colony, emigrants were "*always engaged in factions and quarrels, while the rest detested work more than famine*" (Byrd 1841, 2). Laziness and ignorance are elements that can be expunged from the English character now that they have the American territories to learn from, which is precisely what the Virginians do.

Unlike their North Carolinian counterparts, then, the Virginians use their knowledge of the climate of the region to prepare for potential illnesses. Byrd recounts, for instance, how "for their greater safety, the commissioners took care to furnish them

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with Peruvian bark, rhubarb and hipocoacanah, in case they might happen, in that wet journey, to be taken with fevers or fluxes" (19). As if in fulfillment of prophecy, Byrd later tells of how the "moist situation began to infect some of the men with fevers, and some with fluxes" which they "soon removed with Peruvian bark and ipocoacanah" (64). Even a recurrent case of constipation suffered by one of the Virginian commissioners is cured permanently as a result of the versatile knowledge of the other Virginians: "We gave this poor man several purges, which only eased him for the present, and the next day he would grow as burly as ever. At last we gave him a moderate dose of ipocoacanah, in broth made very salt, which turned all its operation downwards. This had so happy an effect that, from that day forward to the end of our journey, all his complaints ceased, and the passages continued unobstructed" (66). The Virginians prove not only knowledgeable about their surroundings but also proactive in the pursuit of their own health. This desire to preserve their own high quality of life represents a more versatile form of Englishness, one which is, above all else, *adaptable* to different circumstances and places.

There's a certain facetiousness to, of course, Byrd's depiction of the dividing line between North Carolina and Virginia, and also to his characterization of North Carolinians and Virginians. Although identified as different places and peoples by virtue of their distinguishing names, the actual difference between one and the other is nothing more than arbitrary. The Virginians and North Carolinians living closest to the dividing line essentially inhabit the same place. But Byrd's *History* underscores their distinctions in order to make a point about how the future of the English nation, at the time of his writing, is at a crossroads, and it must choose between remaining degenerate or embracing a new, therapeutic identity that is capable of existing in all kinds of places,

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regardless of the number of lines crossed to get there. One of the consequences, then, of colonization and the resulting shrinking of the world (e.g. making places like England and the Levant in infectious proximity rather separated by vast geographical spaces) was that the drawing of geopolitical boundaries had to be perceived as distinctions of convenience through which governance could be carried out, but which had little permanent influence on creating political or social identities. These were determined instead in the rather small, local spaces inhabited for only certain intervals of time. It was by opening up these locales to scrutiny, like Byrd did through his *History*, that it would become clear how English national character was being transformed by its American territories.

John Howard, the Lazaretto, and Localized Constitutions of Nationhood

As the English empire expanded, through both trade and colonization, its exercise of power needed to become more adaptable to local circumstances, some of which would take place in England "proper," but many more of which could happen anywhere along global networks of exchange. As a result, national self-fashioning was just as likely to occur during moments of interaction with other peoples, cultures, or places. This section examines how late eighteenth-century plague discourse, as framed by John Howard, turned its attention to small spaces—unlike Byrd, who sought to describe how a nation could encompass those spread across vast territories—and as a result constructed a kind of nationhood that coalesced as a result of how its members negotiated the benefits and challenges that arose from the interactions that took place therein. Lay and medical understanding of the transmission of the plague had also taken on a localized cast, as the

illness's spread depended on close proximity to sources of infection. Howard, by virtue of his research into prisons and *lazarettos*, became a lay expert, of sorts, on the plague, and he opined that "this distemper is not *generally* to be taken by the touch, any more than gaol-fever, or small-pox, but either by inoculation, or by taking in the breath in respiration the putrid effluvia which hover round the infected object .... These *effluvia* are capable of being carried from one place to another upon any substance where what is called scent can lodge, as upon wool, cotton, &c. and in the same manner that the smell of tobacco is carried from one place to another" (1789, 24). Howard's take on the means through which the plague spread emphasizes that focus on how minute elements— "effluvia"—influenced the places into which they were carried were likewise opportunities for the nation to fashion better versions of itself.

Howard made his name as a philanthropist advocating for prison reform, his views on which were published in his 1777 volume *The State of the Prisons in England and Wales with Preliminary Observations, and An Account of Some Foreign Prisons*. By 1785 he turned his attention to a similar site of confinement—the *lazaretto*, a building used to hold those suspected of being ill with contagious disorders (or those who had fallen sick). The *lazaretto's* interior was revealed to the scrutiny of all when Howard published his *An Account of the Principle Lazarettos of Europe* in 1789, which contained all the facts collected abroad that he found relevant to the potential creation of an English *lazaretto*. Howard had begun a tour of European *lazarettos* to gather maps of different layouts, to query the physicians working in them in order to learn the best principles for their establishment, and to exchange strategies for preventing communicable diseases, especially the plague (1-2). He believed that "more polished nations" (namely England)

would garner some advantageous knowledge from the inhabitants of places like Smyrna and Constantinople who had an "intimate acquaintance with the disease in question" (1). Ultimately, he came to believe that, for the purposes of trade and health, it was advisable that the English nation undertake the project of building a *lazaretto*. The nation thus came, in part, to exist in and exert agency through the rather confining spaces of medical detainment.

A nation's character and its ability to protect and promote its own interests was often determined according to what happened in foreign *lazarettos*. Quarantines proved a particularly powerful tool in terms of national economics, for instance, because they could be used to delay competitors goods en route to transnational markets while simultaneously fostering trade at local venues. Howard cites as an example being quarantined on board ship outside Castel-Novo, an island north of Corfu, during which the ship's crew, who were native to the area, delayed the ship eight days while carrying goods to individuals they knew on shore (22). English merchants bringing cotton from Constantinople also complained, in a letter to Howard included in full in his book, that false identifications of the plague were being used by the Greeks to force foul bills of health on their ships ensuring that they would be delayed in Mediterranean quarantine, while the Greeks were able to get cotton through to English markets via a less onerous quarantine in Holland: "The Greeks carry on three-fourths of the Dutch as well as Italian trade," they explain, "it is therefore their interest (and unfortunately that of every other nation) to depress ours as much as possible" (27). Howard's recounting of the economic travails of increasingly globalized lines of trade underscores nations were perceived as entangled collectives, primarily waging battles for economic superiority not at home, but

amongst port cities and *lazarettos* at the fringes of geographical sovereign domains. Building a *lazaretto* was, in a certain way, a means for England to become a modern eighteenth-century nation with the same powers as its trading partners in the east.

But the exercise of national prerogatives through sites of cosmopolitan exchange came with its own set of challenges. Like Byrd, Howard was keenly aware of how England had become deeply enmeshed within and increasingly constituted through global trade networks, especially those connecting the country to Levantine cotton sources, which, unfortunately, were also believed to be also sources of the plague. Although, quarantine was a way to leverage in favor of a nation's economic interests, extended delays in *lazarettos* increased the risk of transmitting disease. As Howard underscores, "the passengers and crews are exposed to more danger, should there be any infection in the ship. But above all; it exposes the inhabitants of the islands and coasts of the Mediterranean to perpetual danger of the importation of the plague" (22). An improperly managed *lazaretto*, therefore, had much larger consequences for the nation. Just as medical detainment could be used as a means to undergird a nation's viability by helping to secure its economic prowess, it could, in failure of its medical purpose, also precipitate that nation's dissolution in the form of a dreadful plague. The fate of the nation depended, in some cases to a great extent, on how well a rather small space was regulated.

Whether writing about prisons or *lazarettos*, Howard underscored repeatedly that the quality of a national character and its future came down to what kind of conditions it established for those it confined. The Venetians, in Howard's view, represented the worst kind of negligence in this respect. During his stay in their *lazarettos*, he was dismayed to

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discover that the walls of his room had not " been cleaned probably for half a century" and were therefore "saturated with infection" (11). Despite his efforts to clean them with boiling water, Howard writes of how the poor conditions were making him sick: "My appetite failed, and I concluded I was in danger of the slow hospital-fever" (ibid). The British consul provided Howard with lime in order to purify the room, with much success, and he points out that "at a *small* expense, and to the admiration of the other inhabitants of this *lazaretto*, I provided for myself and successors, an agreeable and wholesome room, instead of a nasty and contagious one " (ibid). Even as Howard recounts his experience in Venetian quarantine as an anecdote, he frames his personal experience as indicative of what is more accurately understood as national interventions (or lack thereof) at the level of the *lazaretto* and their significance. Years of Venetian neglect is mitigated by a British intercession, which also promises to be effective for some time to come, as the room will remain wholesome as a result of Howard and the British consul's actions. Nations were thus not only able to exert power far from home, but more importantly, such national activities were necessary if a nation wanted to maintain its viability—political, economic, and physiological—in an age of globalized trade networks.

Pestilent Nationhood

"Surely this traffic cannot be good," writes Olaudah Equiano about the transatlantic slave trade, "which spreads like a pestilence, and taints what it touches!" ([1789] 2007, 113). To remark upon the pernicious similarities between plague and slavery produces a provocative, if unsurprising, image of what it was like to live during

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slave times. There are many ways in which slavery is like a plague, not the least of which its disregard for the individual subjectivities it victimizes and the large number of dead it leaves in its wake. But more than a critique of the institution of slavery, as it is practiced by Western nations, Equiano's simile prophesizes about the tainted future of societies that engage in this traffic. As in Howard's account of European *lazarettos*, Equiano's *Narrative* draws readers attention to what might be erroneously assumed to be the fringes of English empire and not constitutive of English nationhood in order to emphasize that it is encounters at transnational edges that build the future of the nation. Like Mead, then, Equiano looks into the future to see what English nationhood is, and he, too, uses pestilence to imagine what the nation's future could look like if it were able to purge of itself of the pestilent taint of slavery. However, unlike Mead, Howard, or even Byrd (whose vision of English nationhood is rather more inclusive than his medical contemporary), Equiano imagines a sprawling version of Englishness quite detached from the white bodies created by virtue of Great Britain's peculiar geohumoral environment and comprised instead of peoples from all different kinds of places.

Indeed, Equiano describes a world in which even a lowly enslaved African can have extraordinary access to a great many places and can come into contact with a great many people—a range of travel experience that, if undergone today, would cause readers to assume the writer to be quite privileged and wealthy. It was along global networks of trade and travel—that Equiano worked as a slave and later as a free sailor—that he meets the members of a great many collectivities that he calls nations. In the volume's dedication to Parliament readers meet the first of many nations: Great Britain, "a nation which, by its liberal sentiments, its humanity, the glorious freedom of its government,

and its proficiency in arts and sciences, has exalted the dignity of human nature" (41).

Then comes Equiano's village in Eboe, "a specimen of nation," (44), and later in the

narrative he introduces the Musquito Indians, remarkable to Equiano in that he had

"never met any nation that were so simple in their as these people" and who were

"singular, in point of honesty, above any other nation" (190). As in the texts of Mead,

Byrd, and Howard, Equiano's *Narrative* emphasizes how very large and diverse the

world is, and at the same time, how as a result of globalization tightly interconnected it

has become as well, such that a boy born in a village in Africa that had never seen

Europeans would, as a result of slavery, encounter many African, European, and other

nations in the course of his life. Moreover, Equiano's *Narrative* draws readers into this

network, introducing them through words into a kind of familiarity with the globe's

nations, even if they never undertake as extensive of travels as Equiano himself. It was in

this kind of world—in which it was possible for a celebration on Musquito shores to "end

without the least discord in any person in the company, although it was made up of

different nations and complexions"—in which Equiano wants to prove to readers of his

abolitionist text that national collectivities were taking shape (193).

Equiano himself becomes a model of how a mutable national belonging comes to

be constructed in such cosmopolitan contexts in that he evinces multiple allegiances over

the course of the *Narrative*. Equiano shows how belonging derives less from where

someone is born or the language he speaks, but with whom he feels sympathetic

attachment. At times using the phrase "my countrymen" to reference fellow enslaved

Africans, Equiano likewise states his affinities with Englishness, thus demonstrating how

collectivities expand and change as a result of the exposures of the globalized world. He

shares with readers that "it was now between two and three years since I first came to England, a great part of which I had spent at sea....I soon grew a stranger to terror of every kind, and was in that respect at least, almost an Englishman ....I could now speak English tolerably well....I now not only felt myself quite easy with these new countrymen, but relished their society and manners" (83). Equiano, given these affinities with Englishness, operates as the first citizen of this new as-yet-to-come Englishness—one that counts among its countrymen someone who has countrymen in Africa as well. Even though statements can read like repudiations of his Eboean roots in favor of a collective that will never accept him on account of his skin color, they in fact point to a future that England could embrace, one in which someone like Equiano could enjoy full belonging.

Equiano's identity remains indefinite and as changeable as the bodies of a geohumoral world and the human communities it contains. Although Equiano's *Narrative* is written as a factual recounting of one man's autobiography, the author's identity remain ambiguous. Recent scholarship by Vincent Carretta, arguing that Equiano was in fact born in the United States, identifies the first portion of the *Narrative* as fictional, whereas others scholars, pointing out the inconclusiveness of Carretta's archival findings, claim Equiano for English or African canons (For more on Carretta's work and responses to it, see Cathy Davidson 2006/2007; Vincent 2007; 2006; "Response" 2006; 2005; 2004; 1999). Only a kind of negative certainty remains in which it is clear that Equiano does not definitively belong to one group or another, a state of affairs borne out in the text itself. Who is the author, for instance, Olaudah Equiano or Gustavas Vassa, and who might each of these men be? Some have resolved this issue by claiming for

Equiano a amalgamated identity. Terry S. Bozeman underscores, for example, how Equiano enacts a kind of hybrid identification in which he is at times African and at others a Briton, but not an Englishman (2003, 61). Bozeman assumes, as do other scholars working to determine once and for all Equiano's true identity, the stability of the identity in question. That is, that we can know what "Englishness" or "Africanness" is and it becomes simply a matter of delineating how Equiano represents one or the other (or both) identities. Instead, I want to stress that Equiano's *Narrative* alerts readers to not his revolutionary transnational, circum-Atlantic, or even cosmopolitan version of eighteenth-century selfhood, but rather underscores the mutability and dynamic nature of both individual and collective identities.

Such a flexible notion of nationhood was being created by virtue of transatlantic connections, economic or otherwise, that was making it increasingly difficult to conceive of a nation without addressing its constitutive relationships with other similar collectivities. To show the changing nature of nationhood, Equiano positions Eboe, his African home, as a kind of nation at the outset of his story, one of Edenic fecundity and beauty: "Our land is uncommonly rich and fruitful, and produces all kinds of vegetables in great abundance….All our industry is exerted to improve those blessings of nature. Agriculture is our chief employment; and every one, even the children and women, are engaged in it...The West India planters prefer the slaves of Benin or Eboe to those of any other part of Guinea, for their hardiness, intelligence, integrity, and zeal. Those benefits are felt by us in the general healthiness of the people, and in their vigour and activity; I might have added too in their comeliness" ([1789] 2007, 49). Equiano shows who the Eboeans are changes based on whether or not they are being viewed according to a

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geohumoral model, a people blessed with "hardiness, intelligence, integrity, and zeal," or

burgeoning racial science, the preferred slaves of West Indian planters. As geohumoral

and racial worldviews collide at the end of the century, national formations must, in a

sense, decide which they follow and how that shapes their society. Equiano's *Narrative*

suggests that the former should be retained, but in a form in which geographical origin

need not obtain.

But even as the English slave trade has intervened in what it means to belong to

an Eboean nation, the incorporation of new ideas about racial difference into slavery,

making it a race-based system, forbid a reciprocal refashioning of what   it means to be

English. Throughout his *Narrative*, Equiano resists racial discourses by reframing race-

based slavery as a geohumoral pestilence in order to make possible a necessary

transformation in English self-fashioning to accommodate the diverse peoples subject to

that society's laws and cultural beliefs. He foregrounds the poisonously miasmatic

conditions in which enslaved individuals are forced to live—and die. While enduring the

Middle Passage, he narrates how the abysmal conditions of the ship generate pestilential

miasmas: "it became absolutely pestilential….The closeness of the place, and the heat of

the climate, added to the number in the ship, which was so crowded that each had

scarcely room to turn himself, almost suffocated us. This produced copious perspirations,

so that the air soon became unfit for respiration, from a variety of loathsome smells, and

brought on a sickness among the slaves" (66-67). Like Howard, Equiano emphasizes the

significance of these small spaces and their poor condition for the larger community. A

racist disregard for the conditions of the slaves proves self-destructive, as the plague that

so many English feared during the eighteenth century was being produced on their own

ships, rather than being imported from foreign places. Burgeoning English racialism, the *Narrative* implies, will be the cause of the nation's self-destruction.

When Equiano casts sites of the slave trade as pestilential, he draws attention to the indistinctness of a medical problem (the production of noxious effluvia), an economic practice (transatlantic slave trade), and a social caste system (racial bias) in order to argue that the ongoing process of English nationhood, as a result of its activities on the fringes of its empire, has taken on an degenerate character, one that perpetrates all kinds of horrors of people simply because of the color of their skin. For example, Equiano tells of how field-slaves were allowed to gather grass to sell in the marketplace, but that "nothing is more common that nor the white people on this occasion to take the grass from them without paying for it; and not only so, but too often also, to my knowledge, our clerks, and many others, at the same time have committed acts of violence on the poor, wretched, and helpless females; whom I have seen for hours stand crying to no purpose, and get no redress or pay of any kind" (110). By exposing the theft and rape common to a race-based slave system, Equiano testifies to the kind of degenerate societies in which the enslaved must live. Moreover, though, he also shows how the English have become responsible for the diverse kinds of people its economic system of slavery has brought together in the sense that their lives have been woven together.

Like it or not, Equiano informs his readers of a new world order, one in which the lives lived by slaves crucially informed how the English nation could define itself. The pestilential taint created in slave ships or on a West Indian plantation was a part of the nation. Equiano asks his readers, "Are slaves more useful by being thus humbled to the condition of brutes, than they would be if suffered to enjoy the privileges of men? The

freedom which diffuses health and prosperity throughout Britain answers you—No"

(113). Equiano here insinuates that if freedom had, in the past, diffused both "health and

prosperity throughout Britain," then lack of liberty would surely spread the opposite,

pestilence and poverty. Ultimately, Equiano imagines English nationhood at a point of

crisis, one indistinguishable from one caused by the appearance of the bubonic plague

within the population. Through the telling of his own story and those of other enslaved

individuals he meets, he is able to position his and their future as also England's future or

his and their destruction as England's destruction.

In the end, Equiano derives the most radical form of national constitution that can

be imagined through pestilential contexts. If a plague is indeed a great equalizer of

mankind, then it stands to reason that a nation born of it could be composed of any kind

of person from any kind of place. Equiano underscores the legislative truth of this reality

when he concludes his *Narrative* by writing to the Queen, asking for her to intervene on

behalf of his "African countrymen, who groan under the lash of tyranny in the West

Indies" (210). He exhorts her to recognize that "surely the more extended the misery is

[of slaves in the West Indies], the greater claim it has to your Majesty's compassion, and

the greater must be your Majesty's pleasure in administering to its relief" (ibid).

Positioning the monarch as a kind of physician administering relief to the people

suffering from a lack of legal protection, Equiano invokes the therapeutic imperative laid

out by Mead, Byrd, and Howard, all of whom situate the offer of care—even if proved

inefficacious—as the primary action of community formation. Unlike physicians facing

the bubonic plague, however, the legal authorities in Great Britain do have the power to

"treat" the pestilence that effects all living within its domains, by offering legal agency to

all, regardless of skin color. Again, like Mead before him, Equiano imagines a future for English nationhood which finds its expression in a common law and extends to include the many physiological types living in Great Britain, the West Indies, and its other colonies.

The Plague Roots of Democracy

Upon meeting the English for the first time, Equiano asks his fellow enslaved Africans "if these people had no country, but lived in this hollow place (the ship)" (66). A prescient sort of naïveté, young Equiano's comment cuts right to the heart of the problem facing England and English identity at the end of the eighteenth century. It is a predicament essentially of dissolution: attempting to govern vast domains while remaining dogmatically attached to outmoded notions of what constitutes its identity, both ideologically and physiologically speaking, England was becoming no country at all—especially when viewed from the vantage point of circum-Atlantic networks. While not all English authors will perceive their nation as such, Equiano and his predecessor Byrd both view it as in a state of crisis in which its identity, how their members assure themselves of belonging, and its future are uncertain. Plague provided the ideal discursive medium through which to become attentive to such a state of crisis and to imagine it salutary resolution, which constitute the plague roots of eighteenth-century English nationhood. This was no existential age that unveiled dissolution of human institutions as the unavoidable meaninglessness of human pursuits in the world, but rather one that was capable of seeing a bright, new future for itself, no matter what kind of dark days in which it was currently enshrouded. For Byrd and Equiano, the English nation was indeed

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in dark days, given the fragmentation and pending dissolution it as a tightly interconnected human collectivity. The plague roots of American democratic nationhood, then, likewise imagine how the national collective in the nascent United States, after the *Declaration of Independence*, will be maintained in the face of crisis. To declare one's political and cultural autonomy and sovereignty, as the Americans did in 1776, and to achieve it in the form of a constitution and government, as they did in 1789, was to so at a time when not only was it not clear who Americans were or what kind of nation the United States would be, but also uncertain as to how it could frame itself as "not English" if England's own identity throughout the eighteenth century was also, at best, provisional and evolving or, at worst, degenerating into nothing. In the next chapter, I examine how fiction about yellow fever outbreaks were mobilized to again invoke a national future beyond pestilence.

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Chapter 4

Yellow Fever and the Making of America

In 1841, the popular woman's magazine *Godey's Lady's Book* published a

fictional story by one of its regular contributors, the pseudonymously identified Miss

Meeta M. Duncan. "The Brothers: A Domestic Tale" recounted how a well-to-do

Philadelphian named Edward Thornton rescues his future bride Cora Seldon first from a

quarantine yellow fever district in the city and later from the selfish machinations of his

younger brother William, who tries to force her into marriage. The topic of "The

Brothers" was eminently suitable to *Godey's*, a major American periodical that helped to

define middle-class women's roles, especially at the height of its popularity during the

antebellum period (Endres and Lueck 1995, 114). Interestingly, "The Brothers" also takes

on a decidedly gothic cast as a result of its framing within an epidemic, complicating

what would otherwise be a rather straightforward example of domestic ideology making

its way into fiction at roughly mid-century. When Edward first sees Cora as a thirteen

year-old girl deserted in the quarantine sector of Philadelphia, he believes her to be

deceased like her father, whose corpse lies on a bed nearby. He is in process of

lamenting, out loud, the fact that "this old man and his child perished for want of succour

[sic]" when "to Edward's surprise, she stirred and raising herself upon her elbow, gazed

wildly around" (1841, 274). Rising from the dead (so to speak) and falling into the arms

of the man whom she will eventually marry, Cora combines the role of the typical

sentimental heroine—an innocent, young orphan who is supposed to develop a sense of

self-worth and self-reliance—with the archetypal gothic victim—a young woman unable

to evade the malign influences that surround her.[12] Drawing on two divergent narrative

threads that offer quite different, even oppositional interpretations of women's role within

the national community, "The Brothers"—and, as this chapter argues, other yellow fever

narratives like it—provides new insights into how the constitution of an American

collective was understood during the period between the Revolutionary and Civil Wars.

    "The Brothers" is just one example of a fictional prose work in which yellow

fever was used along with gothic and sentimental tropes to account for and, moreover,

provide an accounting of the American character. Scholars have long recognized that,

from the writings of Charles Brockden Brown to those of Harriet Beecher Stowe, both

sentimental and gothic genres participate in shaping what it means to be an American

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[12] As Susan K. Harris has argued, "the dominant novelist subgenre of the 1850s and 1860s, [was] the type that Brown called 'sentimental,' Baym 'women's' and Kelley 'domestic'" (1990, 20). Whatever we call it, as early as 1822, with the publication of Catharine Maria Sedgwick's *A New England Tale*, this genre has been an important facet of American letters. The basic plot of these stories Nina Baym defines as follows: "the story of a young girl who is deprived of the supports she had rightly or wrongly depended on to sustain her throughout life and is faced with the necessity of winning her own way in the world . . . . At the outset she takes herself very lightly—has no ego, or a damaged one, and looks to the world to coddle and protect her . . . .To some extent her expectations are reasonable—she thinks that her guardians will nurture her . . . But the failure of the world to satisfy either reasonable or unreasonable expectations awakens the heroine to inner possibilities. By the novel's end she has developed a strong conviction of her own worth as a result of which she does ask much of herself. She can meet her own demands, and, inevitably, the change in herself has changed the world's attitude toward her, so much that was formerly denied her now comes unsought" ([1978] 1993, 19). These stories typically end with marriage, either to a man in need as reformation (as is the case in Augusta Jane Evans's *Beulah*) or one who already exemplifies the ideal partner (such as Edward Thornton). Importantly, Cora does not struggle to gain mastery over her passions, as is the case in many other domestic narratives (Tompkins 1985, 172). In this regard, she is more like a gothic heroine, who contends with external villains. Helene Meyers offers as a broad definition of the Gothic "encounters with otherness, often violent transgression of boundaries, and the excess of fear that such encounters and transgressions breed" (2001, 2). In "The Brothers," crossing into a quarantine district and William's attempt to force Cora into an unwanted marriage exemplify gothic transgressions. See also Sedgwick (1986) on gothic conventions. Cora's entry into the Thornton home becomes a gothic plot in which it is revealed that, as Kate Ferguson Ellis puts it, "the middle-class idealization of the home, though it theoretically protected a woman in it from arbitrary male control, gave her little real protection against male anger" (1989, xii). Significantly, Cora fails to become a Gothic heroine who "exposes the villain's usurpation and thus reclaims an enclosed space that should have been a refuge from evil but has become the very opposite, a prison" (xiii) nor is she an example of what Diane Long Hoeveler (1998) identifies as "victim feminism," the use of the role of victim to navigate bourgeois society. Cora's inability to reclaim the domestic space for herself—as either a sentimental or a gothic heroine—is a calculated move on Duncan's part, I argue, to criticize the limitations of both these generic models.

while also exposing undesirable elements of American culture to critique. Elizabeth Barnes has elaborated, for instance, how the predominance of incest and seduction tropes in sentimental storytelling, on the one hand, represents "the logical outcome of American culture's most cherished ideals" in which the many come together to forge one democratic community (1997, 3). In order to contain, however, the diversity valued by such a community, Barnes argues, a domestic model of loving familiar objects "subordinates democratic politics to a politics of affinity, employing a method of affective representation that dissolves the boundaries between 'self' and 'other'" and "reinforces homogeneity" (4). In other words, Barnes suggests that American democratic society desired to control its multiplicity through sentimental fictions that introduced a much-needed sense of similarity into the nation's self-conception. If one focuses solely on its marriage plot, a story like "The Brothers" seems to fit within Barnes's rubric since it narrates how Cora Seldon, moves from infected outsider to adopted sister to, finally, cherished bride.

But the story's epidemic frame, which situates marriage and family life as another kind of deadly quarantine quite similar to the infected district cordoned off in Philadelphia, forecloses a fully Barnesian reading of Duncan's text . Taking seriously the epidemic frame opens up an alternative interpretation, one grounded in what scholars have tended to see as the gothic's revelation of social corruption and which asks whether or not it is possible to read "The Brothers" as a gothic tale that masquerades as a domestic story in order to critique the kinds of assumptions about American society made by the affective ideology Barnes describes. A reading along these lines would be akin to those put forth about epidemics in American gothic fiction that assert outbreaks reflect

social corruption. The yellow fever chapters of Brown's *Arthur Mervyn*, for instance, have been interpreted as, in the words of Teresa Goddu, an opportunity "to meditate upon the social health of post-revolutionary America" (1997, 31). The novel, she argues, "warns that the new nation already suffers from a disease that leads to decay and disorder—the disease of commerce....The Revolution had allowed America to escape the corruption of England's commercial society, but with the growth of its own capitalist economy and its reliance on the institution of slavery, the new nation soon faced a similar threat from within" (31-32). However, in the case of "The Brothers" an internal threat's existence remains ambiguous. The unrequited love the middle brother John bears for Cora certainly suggests a kind of corruption extending from marital to national unions: "Cora never knew that love for her had withered the kindest heart that ever breathed" (1841, 280). Although the withered heart at the center of the domestic domain insinuates that at its core the nation bears a taint, real love exists between Cora and Edward, symbolizing instead a reinforced national community. This paradox renders impossible interpretations based solely on what we know about literary depiction of either domestic ideology or social corruption.

Genre, then, fails to help us understand why authors introduced yellow fever plots into their sentimental and gothic narratives. How, for instance, should readers make sense of Edward nursing Cora through yellow fever? Upon rescuing her from the yellow fever district, Edward discovers that she is "alarmingly ill" and soon "all the worst symptoms of this frightful disease were exhibited," which causes him to take over her care "till at length, his efforts were crowned with success, and she was convalescent" (275). Convalescence, a common feature as well in yellow fever narratives by Charles Brockden

Brown and Augusta Jane Evans, is difficult to parse if we assume that either epidemic signals social corruption or that the story represents a cultural desire to contain and control femininity and female sexuality within the national union through marital union. Like in traditional sentimental stories, the male protagonist saves his young charge. But instead of saving her soul, he saves her body while nevertheless remaining—unlike either a prospective husband or a gothic villain—uninterested in possessing or manipulating her as a result of a corporeal connection. Nor is the offer of care restricted to potential heterosexual partners: in the novels of Brown and Evans, for instance, friends and strangers alike offer to nurse members of the same gender. Even as critics recognize how certain texts belong to specific generic categories, when those texts also introduce and overcome yellow fever through therapeutic intervention, then, we require a different interpretive approach.

This chapter argues that such stories, when examined *as yellow fever narratives* (rather than as examples of prose genres) and *collectively* (rather than as individual works by individual authors tied to specific geographical regions at particular points in time in American history), a different national narrative about the role of women in democratic society emerges. This chapter engages five fictional works that feature prominently a yellow fever epidemic: Duncan's "The Brothers" (1841), Charles Brockden Brown's novels *Arthur Mervyn; Or, Memoirs of the Year 1793* (1799) and *Ormond; Or, The Secret Witness* (1799), Baron Ludwig von Reizenstein's *The Mysteries of New Orleans* (1854-55), and Augusta Jane Evans's *Beulah* (1859). Following the example set by leaders of Philadelphia's free black community Absalom Jones and Richard Allen during the 1793 epidemic, these texts position fearlessness in the face of susceptibility to yellow

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fever as the mark of a patriot. This corporeal and intellectual notion of national belonging complicates narrative's role in constituting nationhood. United by a profound suspicion of genre, these yellow fever narratives strategically employ direct discourse to subvert conventional storylines about marital union and feminine duty to home and country. As a result, these fictional prose works cast the democratic union constituting the United States as exceeding narrative "containers"—generic forms that ultimately unduly limit national self-expression, particularly those that sought to calcify a specifically female role (whether it took the form of the sentimental heroine or the gothic victim) within the nation. Paying attention to yellow fever narratives illuminates how some authors from the 1790s through the 1850s questioned the ability of genre to effectively represent national collectives—an interrogation we need to import also into critical interpretations of those genres. Rather than envisioning nationhood as reflected in stories about domesticity and marriage, these narratives put forth instead the supposition that a vital American nationhood was synonymous with a likewise vital American womanhood.

In other words, these authors saw the nation as less like a marriage or a familial scene of cozy domesticity or a novel and more like an epidemic. In an era in which disease causation remained a mystery and optimism existed in regards to medical practitioners' ability to effect potentially efficacious treatments, an epidemic was more than a microorganism to be tracked through a population; it was a series of human actions—the choice to stay or leave, to offer succor or shun contact, to militate against infection or entertain fatalism. An outbreak underscores rather forcefully how human beings are inevitably in contact with one another, by virtue of living in the same geographical space, for instance, or as a result of economic exchange, and, moreover, that

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individuals must decide whether or not that contact constructs a group identity with responsibilities to its members. Because epidemics involve a series of choices made by members of a population in response to a shared reality—in this case, an illness—they materialize active relationships between individuals required to fashion a collective. The choice to offer medical care to the sick, for example, is communitarian in nature, whereas the choice to flee is anti-communitarian. Yellow fever narratives reveal the extent to which other nationalist genres deny American women the agency necessary to make communitarian choices. Characterizations such as the gothic victim, the Angel in the House or the Republican Mother assume certain actions and choices available to women, rendering them not independent acts at all, but scripted inevitabilities. As Linda Kerber points out, the "Republican Mother integrated political values into her domestic life" because she was dedicated to "the nurture of public-spirited male citizens" and because she was "the custodian of civic morality" (1980, 11). But the "image of the Republican Mother could be used to mask women's true place in the polis: they were still on its edges" (12). The vital American womanhood depicted through direct discourse in yellow fever narratives was not a character type that could be reduced a list of attributes, as is accomplished with Republican Motherhood. These women are revealed to be more than wives, daughters, and sisters helping to raise moral democrats. Instead, they are living beings, with motivations and idiosyncrasies derived from their individuality rather than their gender, whose choices to belong to a larger collective serve as a foundational act of constitution of the United States without which, yellow fever narratives show, the nation would not be possible.

There are two sections in this chapter, each of which details how to read yellow fever narratives as positioning women as central to founding and maintaining democratic society. Section one begins by establishing how yellow fever—cast as an American plague—created the conditions of possibility for determining who was a patriot. Those who proved fearless in the face of susceptibility to disease and offered succor to those suffering from pestilence acted in such a way as to constitute community. Although yellow fever narratives depict whites, blacks, men, and women as all being capable of acting as a patriot in this fashion, I emphasize that, when looking at yellow fever narratives collectively, it becomes clear that specifically women were being identified and put forth as overlooked producers of American nationhood. Section two examines how women came to be overlooked in this way. On the one hand, the erasure of women's natural right to be patriots arises from, these narratives show, a misconception that nationhood can be reduced to the form it takes in certain genres. Nations, like epidemics, are not narratives, regardless of human efforts to testify to their existence through prose. These narratives show that when nationhood is understood as encompassing more than that which is recorded on the page, it becomes possible to view women likewise as more than character types. I discuss next how yellow fever narratives reveal the way that domestic and gothic genres obscure women's role in constructing nationhood by relegating them to passive roles in the national imaginary. Direct discourse provides the means for women to escape these constricting character types, express their individuality, and, in some cases, claim their role in founding the nation. Finally, yellow fever narratives offer, in true democratic fashion, different "remedies" for the nation's literature. Whereas in *Beulah* Evans chooses to reclaim the domestic narrative by

rendering the marriage plot epidemical, the more radical Reizenstein rejects the gothic and, moreover, warns that the yellow fever narrative is also subject to misuse, leaving readers instead with the model of lesbian love as a means for telling a national story free of predetermined narrative and social expectations.

An American Plague

While it remained unclear as to how yellow fever spread, no one doubted that it was a peculiarly American disease. "The idea of the American plague being imported from *Bulam*, or the West-Indian islands," writes British physician and expert on yellow fever Benjamin Moseley, "or any other place is repugnant to reason. I was told a similar tale when I first went to the West-Indies; that the *yellow* fever there was imported in the beginning of the century from *Siam*; that it was a contagious, and an original putrid disease; and that bleeding was death. In my practice I proved the reverse of all this" (quoted in "Review" 1803, 289). These words, appearing in a review of Moseley's (1800) *A Treatise on Sugar: With Miscellaneous Medical Observations* printed in the United States's premier medical journal *The Medical Repository*, identify a commonly held opinion that yellow fever was the Americas' equivalent to the bubonic plague—which was recognized early in the eighteenth-century as never having made its way to American shores (see Byrd 1721, 14-15). Even at mid-century, yellow fever retained its pestilential character, as is captured in *Beulah*'s description of an outbreak:

> In ten days the epidemic began to make fearful havoc; all classes and ages
> were assailed indiscriminately. Whole families were stricken down in a
> day, and not one member spared to aid the others. The exodus was only
> limited by impossibility; all who could, abandoned their homes, and
> sought safety in flight. These were the fortunate minority; and, as if
> resolved to wreak its fury on the remainder, the contagion spread into

every quarter of the city. Not even physicians were spared; and those who escaped, trembled in anticipation of the fell stroke. Many doubted that it was yellow fever, and conjectured that the veritable plague had crossed the ocean. (Evans 1992, 162)

From the late eighteenth century onward, it was hotly debated whether or not this American plague was produced *in situ* by an insalubrious environment or spread by direct contact. The 1793 outbreak of yellow fever in Philadelphia convinced preeminent American physician Benjamin Rush that the disease was not contagious and converted him to the anticontagionist views increasingly held by many Western physicians (Ackerknecht 1948, 563-570). Summer heat and drought that year, Rush writes, were "uncommon… in their influence of upon the human body. Labourers everywhere gave out…and frequently too when the mercury in Fahrenheit's thermometer was under 84" (1794, 15). The effect of the weather combined with miasmas from pile of rotting coffee to produce yellow fever in the city, according to Rush, as was evinced by the example of a woman living near the docks: "Mrs. Bradford had spent an afternoon in a house directly opposite to the wharf and dock on which the putrid coffee had emitted its noxious effluvia, a few days before her sickness, and had been much incommoded by it" (18). To insist that yellow fever was a disorder produced as a result of conditions of life lived in America was to cast the United States as, to a certain extent, defined as a community by its experience of yellow fever.

Historians of the 1793 yellow fever epidemic in Philadelphia have emphasized such links between American sociocultural and political identity and responses to the disease.[13] Perhaps the most well-known argument is put forth by Martin S. Pernick, who

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[13] Medical histories of yellow fever tend to engage specific epidemics. For accounts of the 1793 epidemic in Philadelphia see Powell 1993, Estes and Smith 1997, Kornfield 1984, and Taylor 2001. For accounts of the 1853 epidemic in New Orleans (fictionalized in *The Mysteries of New Orleans*), see Duffy 1966 and

asserts that "the medical controversies generated by the 1793 epidemic over the cause of the disease, its proper treatment, and the conduct of those caught in the crisis, thereby became an integral chapter in the history of the first party system" (1972, 562). Even beyond this concern with the history of the formation of the Republican and Federalist parties, as Jacquelyn C. Miller points out, treatments reflected certain interpretations of what American society should look like. She argues,

> the ramifications of Rush's treatment for yellow fever, then, was not solely medical. Instead, because yellow fever was only one of a long list of 'pestilences' that Rush encountered during the post-war period—including scourges of mob violence, democratic impulses, intemperance, and vice—his reaction to the epidemic is best understood within the context of his larger social and political concerns. Or, more precisely, his response should be envisioned as a struggle to avert a second American Revolution, a conflict he dreaded might lead to a reign of terror comparable to the one underway in France. (1997, 80; see also Kopperman 2004).

Voices from the late eighteenth century, such as Moseley and Rush, as well as those of historians looking back, elaborate the many ways—ranging from the material conditions defined by geography, weather, and trade goods to political positions and social expectations—in which early democratic society is inextricable from pestilential contexts.

These plague roots of American democracy are both derived from and transcend those discussed in the previous chapter on bubonic plague. For Anglo-American writers like Mead, Byrd, Howard, and Equiano, a British community was constituted through a therapeutic relationship amongst its members—a relationship echoed in "The Brothers" when Edward nurses his future bride through yellow fever. Indeed, yellow fever narratives evince the same commitment to therapy as formative of group identity.

Carrigan 1959. For perspectives on yellow fever in the American South, see Carrigan 1994, Grob 2002, and Humphreys 1992.

Grounded in this logic were Byrd's and Equiano's insistence on British heterogeneity, resulting from its expansion along transoceanic networks. But whereas plague discourse offered a new way to imagine the British collective, yellow fever discourse offered Americans a way to imagine a new political formation: democratic society. A globalized sense of *e pluribus unum* achieves an explicit and prominent place in American self-fashioning during the Revolution. Importantly, as a result of its integration into a nation's self-definition that is also making territorial claims on certain geographical portions of the Americas as a part of its declaration of sovereignty, *e pluribus unum* becomes associated more closely with nodes within these networks: cities like Philadelphia and New Orleans. Authors like Brown, Reizenstein, and Evans consider "the many" in light of meeting places and localized circulations. Even by the time Evans publishes *Beulah* in 1859, the United States remained a nation without a long history, and as such, its yellow fever narratives depict American society as in the process of being constituted. The yellow fever plague roots of American nationhood, then, can be understood as a negotiation of flows across permeable boundaries and the pressure to have an internal sense of what made someone American.

Critical accounts of the literary uses of yellow fever tend to read it as signaling progressive politics on the part of the author using it. As a result, scholarship on the cultural meaning of yellow fever in America suggests that this disease, when used figuratively, remains an exclusively abolitionist trope. Relying heavily on readings of Brown's *Arthur Mervyn*, Mathew Carey's *A Short Account of the Malignant Fever, Lately Prevalent in Philadelphia* (1793) and Absalom Jones and Richard Allen's refutation of Carey's racist claims

A Narrative of the Proceedings of the Black People, during the Late Awful Calamity in Philadelphia, in the Year 1793: And a Refutation of some Censures, Thrown upon Them in Some Late Publications (1794), criticism of this kind focuses—understandably—on how the outbreaks of the 1790s in the United States and the textual accountings of them engaged problems of race, commercialism, and politics in the early republic. Jones and Allen's *Narrative* was written to refute Carey's claims that blacks extorted the sick and dying for huge sums of money during the Philadelphian outbreak and that those of African descent were less susceptible to the disease. A writer like Brown is then positioned as taking these medico-social debates one step further and expressing progressive ideals ahead of their time by espousing an egalitarian approach to marginalized others in their midst. The critic Julia Stern, for example, argues that Brown's novel *Ormond* uses "the trope of African American masquerade" to expose "the Janus face of republican freedom—liberty for the few constituted over against the bodies of the many—those Americans who do not 'figure' as citizens and who thus are excluded from freedom's embrace: aliens, Native Americans, the poor, women, and, most pointedly, those of African descent both slave and free" (1997, 213). Stern's reading assumes that the early nation is largely shaped by white patriarchal interests that sought to exclude those unlike them. Yellow fever plots, for critics focused on white male privilege, have been seen as a vehicle for critiquing such interests.

But through an emphasis placed on a common susceptibility to disease, yellow fever narratives point to the shared interests of all individuals living in the United States, regardless of skin color, gender, citizenship status, or class. When we bring this era's understanding of susceptibility-as-defense, as discussed in chapter one, to bear on what

Carey and others had to say about the relative susceptibility of blacks and whites to yellow fever, then it becomes clear that yellow fever narratives were urging for a recognition of blacks and women's natural rights for inclusion, not making arguments *against* their exclusion. Carey's account of the 1793 outbreak has become well-known, thanks to Jones's and Allen's refutation, for its insinuation that yellow fever was less dangerous to both blacks and the French. In regards to blacks, Carey notes that "when the yellow fever prevailed in South Carolina, the negroes, according to that accurate observer, Dr. Lining, were wholly free from it" (1793, 77) but that although the "same idea prevailed for a considerable time in Philadelphia... it was erroneous. They did not escape the disorder; however, the number of them that were seized with it, was not great; and, as I am informed by an eminent doctor, 'it yielded to the power of medicine in them more easily than in the whites.'" (78). Only somewhat contradicting Dr. Lining's findings, Carey concedes blacks' susceptibility to the disease, while still positing a difference between the races. It is precisely this difference in susceptibility that is the sticking point for Jones and Allen: "When the people of colour had the sickness and died, we were imposed upon and told it was not with the prevailing sickness, until it became too notorious to be denied, then we were told some few died but not many. Thus were our services extorted *at the peril of our lives*, yet you accuse us of extorting *a little money from you*" (1794, 15). When they argue for the recognition that blacks are just as much at peril as whites, they assert much more than a common susceptibility to disease. They assert their belonging to the national community, which they succor and for which they suffer at its time of crisis: "Early in September, a solicitation appeared in the public papers, to the people of colour to come forward and assist the distressed, perishing, and

neglected sick...After some conversation, we found a freedom to go forth, confiding in him who can preserve in the midst of a burning fiery furnace, sensible that it was our duty to do all the good we could to our suffering fellow mortals" (3). Jones and Allen declare blacks' natural rights of belonging by foregrounding their corporeal susceptibility to the disease plaguing the community and by their preservation of that community through the execution of their duty, a therapeutic imperative to try and nurse back to health their fellow sufferers.

True patriots, then, are those who *act* in a communitarian fashion—those who stay behind in times of pestilence and help to provide medical care and other social services—rather than those who fit the definition of a certain identity. Such heroic figures are not found just in privileged white men, like Edward Thornton, the protagonist of "The Brothers," who is "indifferent to fear [of catching yellow fever]" (Duncan 1841, 274). Unlike those histories of the outbreak that recount those who fled and cast the epidemic as destructive of early national society, Allen and Jones testify to how those who remained undergirded the community at precisely the moment it was closest to dissolution: "The Lord was pleased to strengthen us, and remove all fear from us, and disposed our hearts to be as useful as possible" (1794, 4). Fearlessness was important, since, as Carey emphasizes, "the effect of fear in predisposing the body for this and other disorders, and increasing their malignance, when taken, is well known" (1793, 76; see also Powell 1993, 102). Indeed, Allen's and Jones's *Narrative* suggests that just as the body is strengthened by a state of fearlessness, so too was the body politic in need of fearless members to protect itself—which the Philadelphian blacks provided. Significantly, fearlessness is not equivalent to or an early version of what will become

immunity-as-defense nearly one hundred years later. Fearlessness does not defend the body, thereby rendering it immunity. Instead, it is a way of lowering an individual's natural susceptibility, thus making it more likely he or she will survive the illness. Nevertheless, survival was not a given and the accounts of Allen and Jones and Carey emphasize the courageous who also fall sick and die. It is their very susceptibility in combination with a resolute performance of civic duty that makes them heroes of the national community.

In fact, those who are seen as exempt from the disease—for instance, the French—are also positioned as neither belonging to the national community nor influencing it in any meaningful way. Carey, for instance, refuses to associate the healthy French with the kind of admirable fearlessness of Americans who nevertheless succumb to the disease: "From the effects of this disorder, the French settled in Philadelphia, have been in a very remarkable degree exempt. To what this may be owing, is a subject deserving particular investigation. By some it has been ascribed to their despising the danger. But, though this may have some effect, it will not certainly account for it altogether; as it is well known that many of the most courageous persons in Philadelphia , have been among its victims" (1793, 75-76). Exemption here figures as grounds for distrust and subtly implies that the French have no physiological connection to the Americans among whom they live. In an era of susceptibility-as-defense national communities were utterly incapable of using exclusion as a means of imagining protection. As a result, accusations of exemption or insusceptibility helped to envision contact with peoples deemed dangerous—as were the French and their excessively violent revolutionary spirit—as nevertheless not a threat to the nation. Exempt from

disease also meant being exempt from the capability to be influential and thus help to constitute collectives.

Not all yellow fever narratives published between 1790 and 1860 engage racial politics—but they all attend to the role of women in the national community. In this regard scholarly focus on race and yellow fever have skewed our understanding of these narratives' significance by accounting only for what they had to say about the nation's racial constitution. Nevertheless, blacks' claims to national belonging as a result of shared susceptibility and lack of exemption were also the means for women to demonstrate that they, too, had natural rights to a nationalist identity. Women characters are positioned as patriots akin to their male counterparts, in some cases because of their fearlessness, and in other cases, because of their lack of exemption from—that is, their susceptibility to—the influences to which they are exposed. Due to her poverty, the protagonist of *Ormond* Constantia remains in the Philadelphia during the outbreak, leaving her in the position of being able to offer care to a neighbor that has fallen ill and been abandoned by her brother. Unlike that of the sibling who leaves his sister uncharitably behind, "the mind of Constance was a stranger to pusillanimity. Death, as the common lot of all, was regarded by her without perturbation" (Brown 2009, 32). This fearlessness helps Constance to face courageously her own case of yellow fever, much like Arthur Mervyn who, when he worries that he has taken ill, says, "I felt as if I had inhaled a poisonous and subtle fluid, whose power instantly bereft my stomach of all vigour. Some fatal influence appeared to seize upon my vitals; and the work of corrosion and decomposition to be busily begun....This incident, instead of appalling me, tended rather to invigorate my courage. The danger with I feared had come. I might enter with

indifference, on this theatre of pestilence" (Brown 2008, 112). Although it is Arthur

Mervyn who enters an infectious Philadelphia in search of Susan Hadwin's fiancé and

although it is he and Wallace who are infected with yellow fever, Arthur Mervyn bears

witness to "outrages of despair in the daughter, and the symptoms of a deep, but less

violent grief, in the sister and parent" (103) and testifies to the fact that "Wallace's delays

would be fatally injurious to the health of his mistress" (102). Brown's novels tend to

emphasize how women are exposed to and affected by the same national disasters as

everyone else. When outbreaks represent a national crisis, yellow fever narratives show,

the collective's female members are as integral as men to its constitutional health.

Indeed, male patriots need not even be present for national constitution to be

maintained, since women function in this capacity as well. In Evans's *Beulah*, the

conspicuous absence of Beulah's adoptive father and future husband, physician Guy

Hartwell, allows the novel to emphasize that his presence is not required to keep the

community from dissolution. Beulah cares for the sick because, as she declares, "I am not

afraid of the fever, and therefore think I shall not take it. As long as I am able to be up, I

shall do all that I can to relieve the sick. Remember, Clara, nurses are not to be had now

for any sum" (1992, 163). A strange echo of Jones and Allen (given the author's pro-

slavery leanings), Evans's novel emphasizes repeatedly that Beulah is one who will

always do her duty without the least bit of trepidation, thus making her into an exemplary

patriot. Readers learn that "among her former schoolmates, the contagion had been

particularly fatal, and, fearless of danger, she had nursed two of them" and that when

Clara falls dangerously ill, it is Beulah that cares for her: "Beulah speedily ordered the

mustard baths, and administered the remedies she had seen prescribed on previous

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occasions. The fever rose rapidly, and undaunted by thoughts of personal danger, she took her place beside the bed" (ibid). In a community on the verge of dissolution as a result of the sick and the dying, Beulah provides the necessary therapeutic bonds to keep it from degenerating entirely.

Ideally, though, a national community would be undergirded by both its female and male members. Eventually Guy Hartwell, too, returns to care for the sick, thus affirming communal attachments rendered questionable by his other actions, including leaving the States after Beulah refuses his financial support after she turns eighteen. Hartwell and Beulah share the task of caring for Clara—an act which underscores that a vital nation requires the influence of independent men and women working together to create a truly egalitarian democratic society. Clara, suffering alike from a hopeless crush on Hartwell and yellow fever, proves emblematic of the barriers domestic plots place in front of women trying to achieve independence. Having prepared a medicinal treatment for Clara, Hartwell overhears her delirious ramblings, which reveal Clara's feelings for him:

> "Has he come? Did he say he would see me and save me? Did Dr. Hartwell send me this?"
>
> "She raves," said Beulah, hastily.
>
> A shadow fell upon his face, and stooping over the pillow, he answered, very gently:
>
> "Yes, he has come to save you. He is here." (168).

The collective enacted here takes on neither patriarchal nor matriarchal form—that is, neither Beulah nor Guy Hartwell triumphs as the "ruler" of this community—and a truly democratic union that draws on both feminine and masculine contributions is achieved, although it is threatened by domestic versions that would reduce women to Clara's

predicament of unrequited love. In contrast to Brown, who emphasizes how women are affected by a nation's travails even when they are marginalized, Evans more forcefully makes the point that they should therefore understood as necessary constitutive forces. No woman deserves relegation to a passive role, since all women are just as capable as men of creating community.

Democratic unions, then, flourish as a result of the active contributions of all members, regardless of gender. In the case of *The Mysteries of New Orleans*, a certain kind of abolitionism is critiqued because it assumes masculine privilege. A 200 year-old Freemason named Uriah Hiram brings the yellow fever to punish the nation for the sin of slavery. But he embodies the exact kind of paternalism that undergirds racial bigotry he sets out to punish. In assuming that he knows better than his female companion Diana Roberts, Hiram becomes no better than slaveholders who position blacks as a child-like people in need of white paternal guidance. Hiram is warned by his companion Diana Robert that his plan to infect the city with yellow fever would be self-defeating, but he refuses to listen:

> "Hiram, I honor your noble wrath, but please do not visit the unhappy city once more with this dreadful disease," the woman said, wringing her hands in supplication. "Think, many of our people die along with the whites, and they would curse you if they knew their murderer."
>
> "Diana Roberts, it is my will, and you know that it will not be altered by any woman's voice....The throttling angel will massacre all he can, and he will not spare your own blood....Tell [your relatives and friends] that when Hiram visits and they see his yellow mask, the city will tremble and weep." (2002, 313)

This conversation represents the discontinuities—that is, the dis-union—that occurs when patriarchal logic is employed. From the moment that Diana Roberts concedes there is some honor to be found in Hiram's wrath, any argument she makes against the

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impending outbreak fails to be meaningful. Hiram speaks with all the weight of divine authority as he verbalizes his commitment to a biblical punishment in the form of pestilence, but in doing so, does not, in fact, achieve any sort of moral good, but simply continues the violence spawned by a slave system in the first place. Violence, no matter how noble its cause, is presented in the novel as literally killing those it intends to save in the first place.

Rather than underscoring the destructive consequences—both corporeal and social—of yellow fever, these narratives use it to figure the way in which union is formed as a result of a therapeutic relationship between its members. In this configuration, women and blacks prove instrumental in constituting the community, while their white male counterparts are depicted often—but not always—as fleeing sites of infection in fear. Those who return after the outbreak participate in a community that is more than male or white and thus exceeds the vision of the nation assumed by sentimental and gothic narratives. A suspicion of generic conventions and storylines expresses a fear that a national literature will do more to stifle the nation than foster its continued vitality. Yellow fever narratives become a way to imagine the nation, not entomb it in inert literary traditions. They suggest that its literary forms should be just as multitudinous and mutable as its constituents. Direct discourse offers a means to give voice to those left out of nationalist genres.

Disastrous Eloquence

Genres such as the novel have been the primary focus of scholars parsing the role of literature in collective self-fashioning. For instance, Shirley Samuels argues that "the

significance of the early American novel lies not merely in its inculcation of national values and its consumption within the home (which aided the promulgation of those values); it also formulated a family structure that, unlike earlier models, was neither patriarchal nor a revolt against patriarchy. Instead, in emphasizing sibling struggles and intergenerational quarrels about marriage, the novel of this period attempted to unite disparate political, national, class, and even racial positions" (1996, 20). In other words, she suggests that novels operate as spaces of imagination that bring together those for whom the exigencies of life tend to foster disconnection or antidemocratic forms of society. Priscilla Wald argues furthermore that for many American authors fashioning of the national collective came in the form of either "nation-builders...[who] were especially aggressive in their efforts to tell an official story of American and in their attempts to press the nation's literati into service to that story" or authors who had an "uneasy awareness of a larger story controlling their stories" and who nevertheless understood that "those larger stories constituted them as authors; they could not tell their stories without the conventions those larger stories provide" (1995, 2-3). The authors of yellow fever narratives were in a similar position, and they, too, understood that generic conventions had to be a part of any story they wanted to tell about the nation. But they rejected the notion that the nation could be fully contained by either an "official story" or a novelistic form. Instead, they sought to foreground the many ways in which the nation existed beyond all attempts to capture it in prose form—much like the epidemics they depicted, which were not contained within the novels and short stories they wrote.

In a certain way, yellow fever narratives operated as anti-official stories. Although often inspired by actual historical epidemics, fictional yellow fever outbreaks

narrate what did not happen. Yellow fever narratives thus underscore how epidemics resist the effort to create "official" accounts. In both *Ormond* and *Arthur Mervyn* conveying the truth of the epidemic in narrative form proves difficult, and it becomes clear that imaging the epidemic does little in the way of actually containing it in narrative form. For Constantia Dudley and Arthur Mervyn, epidemics in story form either render them, paradoxically, unimaginable or solipsistic exercises. Knowing that a "pest" malignant in nature "assailed the metropolis of her own country" nevertheless caused Constantia to find that the story of a coming epidemic "had something in it so wild and uncouth that she could not reconcile herself to the possibility of such an event" (Brown 2009, 27). The imagined epidemic's disruptive power comes from its unreality, its transient and intangible nature defying its concrete introduction into the narrative of *Ormond*.

This inability of one narrative to contain and communicate the reality of an epidemic is underscored throughout the first volume of *Arthur Mervyn*, which begins and ends with the epidemic ongoing. Even as the epidemic is introduced and described repeatedly, first with Dr. Stevens, a physician who stayed in the city to care for yellow fever victims, encountering Mervyn, sick, on the streets of Philadelphia, and again with Mervyn's recounting of the first rumors he heard in the country about the epidemic and then the reality of it when he re-entered the city, the text itself continues to remind the reader that the epidemic never be known in full—only anecdotally. *Arthur Mervyn* reminds readers that although stories about epidemics will convey certain truths about what is actually happening, the act of enjoying such narratives says more about personal pleasures than about the event itself. "This rumour was of a nature to absorb and suspend

the whole soul," admits Arthur Mervyn, "A certain sublimity is connected with enormous dangers, that imparts to our consternation or our pity, a tincture of pleasing. This, at least, may be experienced by those who are beyond the verge of peril. My own person was exposed to no hazard. I had leisure to conjure up terrific images, and to personate the witnesses and sufferers of this calamity. This employment was not enjoined upon me by necessity, but was ardently pursued, and must therefore have been recommended by some nameless charm" (Brown 2008, 101). The "nameless charm" of horror stories critiques more than it substantiates claims by contemporaries and later by scholars that *Arthur Mervyn* records a compellingly accurate account of the 1793 epidemic. Instead, attempts at narration underscore the ways in which epidemics do not translate well into prose forms.

Neither epidemics nor nations, these stories suggest, should be understood therefore as kinds of narratives. In contrast, then, to Homi K. Bhabha's correlation of nation and narration, these yellow fever narratives disarticulate one from the other. These stories resist narrative's stagnating effects on what they see as the dynamic, corporeal quality of nationhood. Bhabha asserts that "the nation as a form of narrative – textual strategies, metaphoric displacements, sub-texts and figurative strategems [sic]" (1990, 2) emerged in contradistinction to "the traditional authority of those national objects of knowledge – Tradition, People, the Reason of the State, High Culture, for instance" (3). The authors of yellow fever narratives depicted nationhood as neither a wholly imaginative nor as a geopolitical and socio-cultural construct. In this earlier era during which the United States was trying to make sense of itself as a nation, it did so during events like an epidemic, thus casting nationhood in physiological terms. Stories and

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narratives had an indirect relationship to nationhood, providing a record of its instantiation in moments when the actions of individuals determine its existence or confirm its dissolution. Stories about its construction track its evanescent constitution in a succession of present moments. Yellow fever narratives attest to a national reality that might go unnoticed if not transcribed into a less mutable form. But they are not, ultimately, its complete re-creation (in the form of a novel) nor its primary form, since corporeality in addition to the imagination were required for its full constitution.

For authors of yellow fever narratives, women remain the most overlooked cornerstone of national constitution, and as a result, they are positioned as suffering from generic conventions that reduced their role within the nation to the domestic sphere and submission to a patriarchal will. Resistance to the allure of such established storylines operates on one level to release female protagonists from narrative expectation. In *Ormond*, Constantia finds she must defy her father's prediction that the epidemic means their doom: "The task was assigned to her, not only of subduing her own fears, but of maintaining the contest with his disastrous eloquence" (Brown 2009, 28). Constantia does indeed fall ill of the yellow fever, but the epidemic proves in no way disastrous to her: "such was the colour of her fate, that the yellow fever, by affording her a respite from toil, supplying leisure for the acquisition of a useful branch of knowledge, and leading her to the discovery of a cheaper, more simple, and more wholesome method of subsistence, had been friendly, instead of adverse, to her happiness. Its disappearance, instead of relieving her from suffering, was the signal for the approach of new cares" (56). The arrival of new cares at the end of an epidemic leaves readers without a narrative trajectory—especially one associated with the attainment of domestic bliss—and

foregrounds instead the role of a woman like Constantia within the national community remains one of tribulation when it returns to normal patterns of governance and commerce. *Ormond* implies, then, that it was not the epidemic, but the social condition in which women find everyday life a struggle that threatens the community. For a woman like Constance to dread the return of normalcy is to underscore the limitations of a nation that imagines itself in domestic terms.

The communities formed during epidemics, it becomes clear, provide a model definition of group bonding precisely because they release individuals from predetermined narratives of home and domesticity. The protagonist of "The Brothers" Cora is at her most independent and self-assertive state when she is in fact sick with the yellow fever, but has not yet fallen so ill she needs Edward's care. For the brief moment that Cora and Edward carry on a conversation—as equals, despite Edward's inability to completely remove patriarchal cadences from his utterances—next to the corpse of Cora's dead father, which signifies her temporary release from the patriarch's authority, the potentially infectious Cora and Edward have an egalitarian relationship, undeveloped and quickly elided by the domestic narrative in which they must enter when Cora chooses to go with Edward (thus replacing her father with a brother and later husband) and be adopted into his family:

> In a moment Edward was at her side; he took her parched hot hand within his own, and in a soothing tone, strove to quiet her fears. "See," he said, as the faithful animal fondled around her, "see, here is your little dog; do you not know him?"
>
> "Lilly," she said, looking first at the dog, and then fixing her large dark eyes on Edward's face, "Yes, I know Lilly, but I don't know you."
>
> "No, my dear, you do not; but you must learn to look upon me as your friend. I have come to take you away from this gloomy place; you will come with me, will you not?"

"Oh, yes," she replied, rising with alacrity, "I will go any where." (Duncan 1841, 274)

Egalitarianism is expressed in this passage through Cora's ability to make decisions and speak for herself in addition being able to articulate a domain of her own, one in which Edward is unknown and has no privileges. Edward asking Cora to come with him significantly underscores how here in the midst of an epidemic women's desires must be taken into account.

Domestic genres, however, assume no such autonomy for its women protagonists. In "The Brothers," the point is underscored by the way in which Cora loses her ability to speak for herself. Upon learning that she might be unwilling engaged to his youngest brother William, Edward reminds Cora their past egalitarian relationship in the midst of the epidemic, trying to restore to Cora her autonomy: "From the hour, Cora, in which I carried you in my arms a helpless child, to the home which as ever since sheltered you in happiness, you have been the unceasing object of my care and solicitude; and I have loved you as if you had been my own most cherished sister" (277). This speech is intended to get Cora to admit out loud that she does not love William and so hearkens back to that time in Edward and Cora's early history in which they were able to speak freely to each other. But it also states outright why Cora is unable to speak on own behalf—she has become the object of not only Edward, but the rest of the family and it is for their mercy that she must silently wait. It is Mr. Thornton, the true family patriarch, who finally is able to set right the matter that Edward brought into the open: "On being made aware of the circumstances of the case, and hearing from Cora's own lips a tearful confession of her repugnance to the marriage, he indignantly rebuked his son for his want of generosity and honour in the whole proceeding" (ibid). Although the epidemic

communal bond brought Cora and Edward together, it is no longer operative in their

relationship, which has become in the resolution of the plot and Edward's words

thoroughly informed by a patriarchal family model. Cora speaks, but only according to

the will of the patriarch, and her words are no longer available to readers. In a story like

"The Brothers," the introduction of a yellow fever outbreak undermines how readers

would typically interpret a domestic tale, thereby indicating the way in which this genre

fails to capture fully women's roles within the nation.

Direct discourse functions as a rhetorical device for allowing women's voice to

not only be heard, but also be crucial to the continued action of a story—and, by

extension, to the collective's continued existence. In *Arthur Mervyn*, for instance, the

story begins with the epidemic ongoing, and the readers meet Arthur Mervyn, sick on the

streets of Philadelphia, when Dr. Stevens, his rescuer from the pestilence, comes across

him. Significantly, for the story to even be possible—which is told by Arthur Mervyn to

Dr. Stevens and his wife—Mrs. Stevens must approve his entrance into their home and be

willing to participate in his care, a proposition that Dr. Stevens lays out to Mrs. Stevens

as clearly as possible so that she might know the risks and make an informed decision:

> To take this person into my house, and bestow upon him the requisite attendance, was the scheme that first occurred to me. In this, however the advice of my wife was to govern me.

> I mentioned the incident to her. I pointed out the danger which as to be dreaded from such an inmate. I desired her to decide with caution, and mentioned by resolution to conform myself implicitly to her decision. Should we refuse to harbour him, we must not forget that there was an hospital to which he would, perhaps, consent to be carried, and where he would be accommodated in the best manner the times would admit.

> Nay, said she, talk not of hospitals. At least let him have his choice. I have no fear about me, for my part, in a case where the injunctions of duty are so obvious. Let us take the poor unfortunate wretch into our protection and care, and leave the consequences to Heaven.

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I expected and was pleased with this proposal. (Brown 2008, 6)

Approached as an intellectual equal, Mrs. Stevens is able to respond with the foundational act of the community: the offer of therapeutic care. Importantly, it is in Mrs. Stevens's mouth that the words of Jones and Allen make their way into Brown's novel; she expresses fearlessness in the face of a duty "so obvious" to offer a fellow sufferer succor. Jones and Allen voiced the contribution of blacks in maintaining the collective during the epidemic, and here Brown capitalizes on their precedent to likewise position women as essential to maintaining the union.

In *Beulah*, Evans transforms the typical marriage plot into an epidemical union in order to solidify women's central role in constituting the collective in the national imaginary. In keeping with the notion that epidemics and nations exceed their discursive instantiations, Evans uses direct discourse to establish how women, too, are more than what can be recorded in a novel. Conversations between characters provide more insight into Beulah's character, her relationship with Guy Hartwell, and, by extension, the work that must be undertaken to provide a solid foundation to union than anything Beulah will admit to or the narrator reveals. Beulah's hidden depths are not so impenetrable that those around her cannot see the fraught nature of her relationship with Guy Hartwell. Says his housekeeper at the onset of the epidemic: "'Oh, I will warrant, if everybody else—every man, woman, and child in the city—takes it, you won't! Miss Beulah, I should like to know what you are afraid of!' muttered Harriet, scanning the orphan's countenance, and adding, in a louder tone: 'Have you heard anything from master?'" (Evans 1992, 155). Innocent in content, Harriet's final question about news of Guy Hartwell of course insinuates that Beulah is not so impervious, at least when it comes to her benefactor. This suggestion that Beulah is indeed afraid of something—Guy Hartwell—oddly enough

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undermines the other implication of Harriet's comment that Beulah is not just fearless and therefore protected from infection, but in fact exempt from it. Rather crucially, Harriet's remarks position Beulah as a fearless patriot who nevertheless remains susceptible to the influences that surround her. It is this kind of fearless susceptibility that Beulah will need to develop in order to become united, in marriage, with Guy Hartwell. In this regard, *Beulah* recovers the marriage plot by rendering it epidemical.

The novel's message about national union, then, hinges on how it employs the marriage plot as an extension of the kinds of community forged by the offer of therapy during an outbreak. Notably, in comparison to New England domestic narratives such as *The Wide, Wide World* and *The Lamplighter*, *Beulah* depicts the protagonist's active resistance of marriage to her benefactor, choosing instead to pursue financial and intellectual independence. *Beulah* thus offers a solution to the problem of finding a place in the nation for women raised by other yellow fever texts. Whereas Brown and Duncan illuminate how women are denied recognition of their role helping to constitute the national community, Evans both rejects the kinds of marriage plots that create these kinds of elisions and reinvents the story of marital union in such a way as to foreground female equality. But before such equality can be achieved, Beulah needs to come to terms with being in susceptible relationships, which are the basis of community. A conversation with Clara right before the outbreak draws out the flaws in Beulah perception of her relationship with Guy Hartwell:

> "It is a mystery to me, Beulah, how you can feel so coldly toward Dr. Hartwell."
>
> "I should very much like to know what you mean by that?" said Beulah, involuntarily crushing the flowers she held.
>
> "Why, you speak of him just as you would of anybody else."

"Well?"

"You seem to be afraid of him."

"To a certain extent, I am; and so is everybody else who knows him intimately."

"This fear is unjust to him."

"How so, pray?"

"Because he is too noble to do aught to inspire it."

"Certainly he is feared, nevertheless, by all who know him well."

"It seems to me that, situated as you have been, you would almost worship him!"

"I am not addicted to worshiping anything but God!" answered Beulah, shortly.

"You are an odd compound, Beulah. Sometimes I think you must be utterly heartless!"

"Thank you."

"Don't be hurt. But you are so cold, so freezing; you chill me." (156)

This conversation casts Beulah's feelings for Guy Hartwell in much the same terms as an epidemic. For one, their estranged relationship results from a mystery, much like the outbreak of yellow fever, which appears without warning in the local hospital (155). Although Beulah remains unafraid of yellow fever, she is fearful of Hartwell. Importantly, though, this plague of bad feeling is one of coldness, not burning fever, signaling along with her fearfulness the unnaturalness of the distance she imposes between the two of them. While encouraging readers to root for the eventual marriage of Hartwell and Beulah, the direct discourse here allows the marriage plot to unfold according to Beulah's wishes. Together direct discourse and the epidemic quality of the relationship create a domestic narrative in which women's choices are central and union is forged through therapeutic bonds, rather than forced through rhetoric alone. Indeed,

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when Beulah finally recognizes her love for Hartwell, she admits that she loves him "better than teaching school, and writing learned articles," thus underscoring the limitations of narratives to provide fulfillment (412). Nations, too, by implication are not things made just of words, but of real living people.

To cast unions, whether marital or national, as epidemical is in fact to insist on the corporeal and experiential nature of nationhood, not to foreground an example of one's inherent corruptness. This is most clearly seen in the scenes of Beulah and Hartwell's engagement, when their relationship is still described in terms of epidemics, but those aspects that lead to healthful unions. When they announce their pending nuptials to their mutual friend Dr. Asbury it is in a room that Asbury declares "is as hot [...] as if the equator ran between my feet and the wall" and when he asks, "what ails you, child," Beulah responds, "Nothing ails me, I am well" (414). Even though Beulah can be read as symptomatic by her physician friend in an environment evocative of fever, she is not sick. She is well because the relationship between her and Hartwell has been restored to its proper balance. This new, successfully therapeutic quality to their relationship is referenced after their marriage, when Hartwell asks, "Oh, Beulah! my wife! why are you afraid of me?" to which she replies "I am not afraid of you now. May God bless my guardian! my husband!" (417). Fearlessness promotes health both in situations of epidemics or unions. Finally, there remains a mysterious cause providing a greater purpose to their union:

> "Your religion is full of mystery," said her husband, gravely.
>
> "Yes, of divine mystery. Truly, 'a God comprehended is no God at all!' Christianity is clear, as to rules of life and duty. There is no mystery left about the directions to man; yet there is a divine mystery infolding it, which tells of its divine origin, and promises a fuller revelation when man is fitted to receive it" (419).

It is important to understand that what makes Beulah and Hartwell's relationship epidemical is not casualties, but the potentiality of a connection between individuals evolving into a community. The right response to an epidemic produces a viable community. In the case of Beulah and Guy Hartwell, their estrangement produced a tense situation in which union was unable to occur, but in admitting their mutual love, they were able to turn an interconnection into a union. In the case of the American nation, then, its female and male constituents, the novel suggests, likewise need to embrace their inextricable interconnections to each other in order for it to be healthfully constituted.

Rather than try to rehabilitate the gothic genre, Reizenstein dismisses entirely generic and other narrative forms, preferring only the nationalist stories that arise from pure direct discourse. *The Mysteries of New Orleans* shows first how the gothic urban mystery novel cannot be saved as a genre because it naturalizes masculine violence as part of the national character. The gothic urban mystery novel is typically understood as a genre that reveals the corrupt undertakings of city dwellers, who engage in questionable commercial and immoral sexual activities. The texts by authors such as Eugène Sue, Ned Buntline, and others have been credited with using fact thinly disguised in fiction to draw out social degenerates into public scrutiny. *The Mysteries*, too, exposed the questionable morals and economic endeavors of many of New Orleans's well-known and well-to-do citizens and German émigrés. As the translator and editor Steven Rowan notes, Count Emil (one of the main characters in the book), readers speculated was perhaps Count Seckendorf, who the novel depicts as abandoning his wife for a torrid affair with an emancipated slave who was suspected of making her living either by "stealing small Negro children" or "selling her charms, since she was occasionally able to exploit the

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wealth of a lovesick fool" (von Reizenstein 2002, 12). But more importantly, it exposed

how those corruptions were so commonplace that it was in fact community-building ways

of life that were increasingly hidden from view. Yellow fever in this novel, as we have

already seen, gets linked with a violent, patriarchal abolitionism frighteningly similar to

the kind of patriarchal violence employed in slavery. In doing so, the novel signals the

misuses to which yellow fever has been put in the effort to create a national narrative. But

rather than imagining the nation as requiring a more egalitarian relationship between men

and women, *The Mysteries* suggests that the nation needs to shed entirely its masculine

cast.

Operating as a counterpoint to scenes leading up to and ultimately culminating in

the epidemic are voices from the New Orleans outpost of Lesbos that warn against

violence and death as a solution to a socioeconomic system that likewise perpetrates

violent acts against innocents for no other reason than the color of their skin. The

romance that blossoms between two characters, the lesbian lovers Orleana and Claudine

offers an alternative narrative model to the one promulgated by Hiram and, as such,

complicates Reizenstein's abolitionist message. In his introduction, Rowan paradoxically

both acknowledges the author's sympathetic treatment of lesbian lovers Orleana and

Claudine as "a gentle revolt" against patriarchal dominations and simultaneously

dismisses the "lesbian episode" as "serv[ing] no purpose in moving the plot forward"

(xxxi). The portion of the *Mysteries* dedicated lesbianism is no mere interlude, but a

narrative salvo aimed at the oppressive patriarchal rhetoric used to undergird both

justifications of slavery as a paternalistic social order necessary for a supposedly child-

like people and abolitionist narratives of divine retribution. Instead, the novel

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demonstrates that the nation can recover from its corruptions by recognizing the diverse elements, corporeally speaking, that serve to constitute it.

More than ascribing to abolitionism, then, Reizenstein advocates for an inclusive definition of Americanism. Freeing slaves was just one element of a larger nationalist project on the author's part to envision the multitudes as creating an American collective, a reality materialized in New Orleans where "[b]lack, yellow, white, brown, and red families—all colors mingled together like a colorful mosaic" (19). Reizenstein's own status as foreign-born and his subsequent adoption of the United States as his home and country enables this perspective. Ludwig von Reizenstein was born in Marktsteft am Main on July 14, 1826 to Baron Alexander von Reizenstein-Hartungs and Baroness Philippine von Branca. The eldest son amongst one other brother and at least ten sisters, Ludwig proved a troublesome young man, resistant to disciplinary education and prone to frivolously spending his father's money. After the 1848 revolutions, Reizenstein shipped to America with an Herr Steinberger in order to run his farm, and when Steinberger died of cholera on the way, Reizenstein was left to his own devices for financial support, which led him to a number of jobs, including publishing. Although a weekly German newspaper he started in 1851, *Alligator*, quickly failed, he soon became a contributor to the more radical of the two major German dailies published in New Orleans, the *Louisiana Staats-Zeitung*. Reizenstein's biography reveals him to be a man enmeshed in networks along which peoples and ideas circulated, which helped him remain attuned to the multicultural dynamism of American society at mid-century.

Trying to see beyond the pall that slavery and racial bigotry cast over the national community to a happily harmonious future, the novel offers a glimpse into a union

unfettered by either social expectations for appropriate behavior and narrative

expectation, one that is consummated in the boudoir of the impossibly elegant,

incomparable Orleana, a woman whose person has, to paraphrase the narrator, never been

sullied by the touch of a man. Her lover Claudine is a rather sad case, abused and then

abandoned by her husband Albert. It is the scene of their first lovemaking that suggests

that truly felicitous unions arise from an acceptance of bodily diversity and a release from

patriarchal narratives, both aspects of which are made possible by the use of direct

discourse. The narrator, who for most of the text is a classic omniscient third-person

voice, becomes a physical presence in Orleana's bedroom on the night that she and

Claudine first make love: "Softly, softly!" the narrator whispers, "Quiet, quiet now! Trust

not the night—close the curtains as tightly as possible; don't talk so openly....so the evil

world cannot hear!" (147). Then the narrator's presence fades in and out while Orleana

and Claudine's conversation in the form of direct discourse takes over the narrative:

> "Do you really love me, Claudine?"
>
> "Oh, how the fresh warmth of your proud neck drives me wild!"
>
> "How your breasts make my blood boil!"
>
> "Orleana, Orleana, how excitingly loose your clothes are!"
>
> "Claudine, Claudine, how tightly you are corseted!"
>
> "Orleana, Orleana, how easily your clothes fall away!"
>
> "Claudine, Claudine, how difficult it is for me to get these things off of
> you!"
>
> "Orleana, how pure and white your shoulders are!"
>
> "Claudine, where did you get the scars on yours?"
>
> "Orleana, Orleana—Albert did that."
>
> "And you really love me, Claudine?" (149)

The extensive and underscored use of direct discourse serves to overthrow the patriarchal narrative authority of third-person narration and installs in its place lesbian voices. It is in this space where "no man at all!" will be found that love replaces patriarchal violence (147). And this is a revolution that the narrator finds worthy: "How small and pitiful the nattering of parties seems, how petty the drama even of our own revolution, against the titanic struggle of sensuality against law and morality" (151). This argument for making love, not war thoroughly undermines the violently abolitionist message voiced throughout by Hiram. When used to promote destruction of the collective, the novel shows, epidemic yellow fever can no longer help to build community. Therefore, its narrative structures should be abandoned in favor of those that promote bonds amongst the diverse peoples living in the nation.

The novel's conclusion with Hiram's successful precipitation of a virulent epidemic in New Orleans may seem like pessimism on Reizenstein's part—his inability to imagine unions modeled on lesbian love as actually coming to fruition in the United States—but again, only if the yellow fever frame is privileged. Just as Orleana and Claudine's unprecedented, yet perfect union born out of a gentle revolution that put all other revolutions to shame undercuts the narrative inevitability of Hiram's tale of vengeance, so too does this fictional story about a future that does not come to pass suggest that New Orleans—and, by extension, the nation—need not fatalistically accept its own self-destruction as the inevitable result of conflict over slavery. In other words, even though the novel ends with a population decimated by yellow fever, the book as a whole has a rather hopeful (if stern) message for the citizens of the United States. Indeed, the final words of the entire work come in the form of a warning: "*Ruin awaits him who*

does not take heed!" (538). Orleana and Claudine, along with countless others, may be dead, but the national community is not, and it still has time to reverse its descent into self-destruction. Yellow fever, Reizenstein's novel points out, operates as an imperfect narrative device for realizing the United States's non-violent future. Only the liberated voices of New Orleans's lesbians have risen above the constraints of narrative and genre.

A cautionary tale, then, against the dangers of national mythologies, which glorify death as a form of liberty, *The Mysteries of New Orleans* warn readers to take heed lest they destroy the natural and more important revolutions that take the form of love and commitment. What mainstream nationalist discourse sees as a sexually-deviant, effeminate South acquires in Reizenstein's prose the narrative authority to rewrite the nation's story. Instead of valuing white masculinity and racial purity achieved through the policing and impregnating of the female body—which is often the implicit sociopolitical objectives behind other examples of potboiler sensation fiction—the Baron Ludwig unearths the darkest pits of a small geographical region within the United States in order to show how the very best the nation has to offer must hide behind curtains, while corruption walks the streets in broad daylight.

An Odd Compound

Ultimately, yellow fever narratives attest to how American nationhood is, like Beulah, an odd compound—a collective constituted by many different types, so multiple in the lives that they lead and their pursuits of happiness that no one narrative can contain them all. Figures of pestilence allow the authors of yellow fever narratives to draw out this multiplicity because times of plague tend to demand the assistance of everyone in

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order for the community to survive. What we learn is that epidemics were indeed bad things—but they were also inevitable things. As such, they had to be engaged in definitions of collective self-fashioning. Moreover, they could be used to signify how a community came together, despite destructive forces—such as disease, but also corrupt commercialism, slavery, and misogyny. Epidemics in these fictions, then, should be read as the materialization of the community, showing in particular how those who typically remain voiceless in political or legal discourses are often the very individuals that keep the national community from utter dissolution—at times of crisis, but also on a daily basis. Stifling the vitality of those individuals, these novels warn, will eventually end in the collective's self-destruction. In the next chapter, I examine a series of autobiographical essays, some written by authors searching for a uniquely American national literature, that seek in foreign and domestic contexts influences that will similarly reinvigorate national self-fashioning. These stories from sites of containment— both cholera quarantines abroad and Sing Sing prison during the 1832 outbreak in New York—not only disrupt narrative but also spatial containment by showing how the best kinds of nationalism can take shape abroad or amongst inmates.

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Chapter 5

Lazaretto Life and Collective Belonging in the Context of Containment

Throughout, this project has emphasized the dynamic quality of eighteenth- and nineteenth-century nationhood. Whether drawing on the figure of smallpox to show how a collective's continued vitality depended on exposure to other cultures or using plague discourse to insist that community formation was a kind of therapeutic act, early American writers have depicted nationhood as constantly undergoing the process of constitution, particularly as a result of its interaction with diverse peoples. On the one hand, these interactions could emerge while traveling in quite distant lands. Quarantine proved the perfect locale within which to come into contact with the globe's multitudes and facilitate acts of nation-building. On the other hand, one need not journey very far within one's national home to encounter the Other. Prisons, too, were sites of containment that proved quite connected with global networks that carried travelers, trade goods, news, and, of course, disease. This chapter examines how containment became during the antebellum era a figure that depicted the permeable boundaries connecting and separating the world's nations. Whether detaining the potentially ill or proven criminals, quarantines and prisons were places where strangers mingled and friendships grew. As such, they provided the models of collective belonging during the era of imagined exposure.

The nineteenth century was an unusual time for quarantine. Employed since the 1400s, this temporary form of detention was used at ports from Asia to Europe and,

eventually, in the Americas to keep watch over potentially infectious individuals as local officials awaited the appearance of yellow fever, cholera, or plague symptoms. Those who remained well after a designated period were deemed non-contagious and allowed to continue on their travels. Those who fell ill, however, stayed in the *lazaretto* (a prison-like building used to hold both the sick and the quarantined) until they either recovered, or died. But by the early 1800s, a school of thought known as anticontagionism had captured the minds of medical practitioners and lay persons alike. Its proponents argued that the "big three" epidemic diseases were transmitted through poisonous miasmas generated in a particular place rather than through physical contact with sick persons. Anticontagionist thinking carried potentially devastating consequences for quarantine, a practice that had been relied upon—virtually unchanged for over three hundred years—to halt disease transmission. Suddenly, this respected institution became a potential propagator of infection, as anticontagionists blamed unsanitary *lazarettos* and filthy living quarters on board ships as likely sources of epidemic disorders (Ackerknecht 1948, 563-570).[14] Nevertheless, beginning in the 1830s, recurrent cholera outbreaks across the globe demanded action of some kind, and in the absence of any viable alternatives civil authorities continued to insist on quarantine as a protective measure, despite this new aura of fallibility (Rosenberg 1987, 4-25).

For readers of the American press avidly consuming cholera news, European reports appeared to confirm that strictly enforced quarantine regulations were failing to deter cholera's westward march from Russia through Europe and finally across the

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[14] American anticontagionism developed primarily because of the 1793 yellow fever outbreak in Philadelphia (which convinced Benjamin Rush and Noah Webster of the disease's non-contagiousness) and the influence of practitioners working in the West Indies (such as refugee physicians from San Domingo like Jean Devèze, who directed the hospital at Bush-Hill during the 1793 epidemic). See Ackernecht 1948, 570-571.

Atlantic. And indeed, the nineteenth century saw a lethal series of cholera epidemics in the U.S., first in 1832, then again in 1849 and 1866. American travel writers voyaging abroad during the 1830s and 1840s delighted in substantiating accounts of quarantine's inefficacy by sharing with those back home their decidedly non-pestilential sufferings in foreign *lazarettos*. Set in a medical milieu but invariably written by lay persons, these reports took an assortment of prose forms, including letters, essays, and narrative fiction. The predominantly white, male, and well-educated authors underscored the absurd and onerous nature of the quarantine rules they encountered overseas. Dwelling in quarantine, however, provided these privileged writers with more than quaint anecdotes about their travails as tourists. As this chapter argues, their exceedingly popular narratives more importantly interrogated the larger conceptual ties between, on the one hand, medical practices that contained (ostensibly) diseased outsiders to protect a population's health and, on the other hand, discursive practices that excluded (seemingly) dangerous foreigners to protect a nation's integrity. Their point of view as non-infectious travelers from faraway places enabled them to invert this kind of thinking and instead conceive of a robust sense of national belonging as in fact arising from promiscuous foreign contact.

These fascinating stories from inside *lazaretto* walls constitute a sub-genre of travel writing that I am calling the *quarantine narrative*. This chapter examines twelve texts, once fashionable but now little-known and understudied, published between 1832 and 1847. Written primarily by itinerant Americans—including titans of the antebellum periodical scene, Knickerbocker authors Nathaniel P. Willis, Theodore S. Fay, and Henry T. Tuckerman—these works collectively disseminate an anticontagionist perspective that derides the practice of quarantining "dangerous elements" to protect the wellbeing of a

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population. Linked together by an exposé prose style aimed at demystifying and debunking medical detainment, and by the use of irony intended to prompt new thinking about national identity formation, these narratives convey a surprisingly positive attitude toward foreign influence during an early period of global travel, commerce, and cultural circulation.

This sub-genre, in short, leveraged a medical hypothesis about disease transmission into a sociopolitical manifesto about how to belong *responsibly* to a national community that was also inextricably and increasingly linked to like collectivities from all over the world. It did so by focusing on the temporary, motley, and oddly congenial domesticity that emerged when strangers of far-flung origins were detained together in a *lazaretto*. By the turn of the twentieth century, however, a nation's sense of its duty to its members, who remained exposed to the vagaries of a transnational existence, would take on a distinctly different cast. After the advent of germ theory, nations came to be perceived as precariously fragile and inherently susceptible to the destructive influence of outsiders, who were imagined as carriers of dangerously contagious microbes and cultures. With Robert Koch's discovery in 1876 that microorganisms caused disease, the quarantine narrative would eventually be supplanted by fast-paced, triumphant tales of medical detectives who worked to protect kin and country by successfully tracking disease carriers across the globe and mapping transmission routes. According to Priscilla Wald in her compelling monograph *Contagious: Cultures, Carriers, and the Outbreak Narrative*, after the identification of HIV a "paradigmatic story" evolved from these predecessors into what she calls the outbreak narrative (2008, 2). This narrative "follows a formulaic plot that begins with the identification of an emerging infection, includes

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discussion of the global networks throughout which it travels, and chronicles the epidemiological work that ends with its containment" (ibid). This much more familiar story presents quarantine as either unambiguously capable of disciplining foreigners so as to make possible their assimilation into a new community or as a necessary, unquestioned punishment for the recalcitrant.

Whereas the outbreak narrative traces the tragic escalation of a virus and the deaths it causes in order to arrive invariably at a site of Foucauldian containment, the quarantine narrative in contrast *begins* at such locales and dwells in a leisurely, often comedic fashion on the non-emergence of a deadly disease. Travelers in a quarantine narrative endure a tediously dull delay of days, weeks, or even months only to discover what they already knew all along: that infectious diseases were nowhere in evidence. In 1835, for instance, a popular American magazine *The New-York Mirror* reprinted a brief autobiographical account written by an unnamed Englishman detained at Calais, France, who despite "reiterated protestations and expostulations of *'Mais, Monsieur, je ne suis pas cholerique*!*,*" bears witness to a sound and fury of epidemiological activity that ultimately signifies nothing: "how busily fumigation was carried on by a bunch of sanatory [sic] officers, peering out of a temporary hut, while, baboon-like, they made a cats-paw of a poor doctor .... We were given over by the medical authority to the civil— by the civil to the military, and finally handed over to no authority at all, but shut up pell-mell in the old dismantled fort, to live or die, as it might happen, under the protection of the yellow flag" (72). Unlike outbreak narratives, which cast disease as ultimately controllable, the quarantine narrative describes an earlier time during which disorders were considered mysterious and undiscoverable, and individuals could be easily

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disconnected—at least temporarily—from the global networks that were ostensibly responsible for the transmission of dangerous diseases, cultures, and ideas.

Importantly, such instances of disconnection did not mean that individuals were cut off from the larger community—quite the opposite, in fact. In an account of the outbreak of cholera during 1832 in New York's infamous Sing Sing prison, physician Alanson Jermain Prime makes the case that neither were prisoners undeserving of inclusion in definitions of national belonging, using common susceptibility to cholera to underscore his point. Discussed in the final portion of this chapter, Prime's essay, published in the *Christian Parlor Magazine* in 1847, serves as an important confirmation of the quarantine narrative's message that national belonging can be fostered in unexpected contexts. Cholera may not have been an illness susceptible to idealization, given its rapid onset of severe symptoms like diarrhea, acute spasmodic vomiting, cramps, and consequent dehydration and cyanosis, a bluish tint to the skin (Rosenberg 1987). But the disease's disregard for containment measures brought out communitarian sentiments amongst the inmates of Sing Sing, a model to the rest of the nation, the members of which fled cities rather than stay and care for the sick. Prime writes that the prisoners "knew the whole history of the progress of the disease—I know not how—and had been expecting it, and when it came I venture to say no community was better prepared for it. They were well cared for, and they took good care of each other" (1847, 3). Curiously well-informed and compassionate, the inmates of Sing Sing model the kind of communitarian behavior produced by the interconnections of a globalized world.

It is important to note, therefore, that narratives from sites of containment— whether foreign or domestic—do not portray a provincial period in the United States'

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early history, striving for but not quite achieving a stable conception of national identity, which takes place long before globalization (see Giles 2011, 5; Loughran 2009, xix; Baker 2006, 10-15). Instead, they paint a picture of a *prior era* of globalization, different from the one we live in now, during which an experience of the common humanity of all nationalities was a source of comfort rather than a distressing sign of national dissolution. Wald describes quarantine as a solution to a homogenizing globalization that is often perceived as a threat to discrete national identities, as represented by invidious communicable diseases that transgress sovereign boundaries. A coercive system of isolation, exclusion, and expulsion, quarantine as figured in the modern outbreak narrative is for Wald "the most apparent assertion of the nation on the epidemiological landscape" (51). Prime's account of cholera in Sing Sing underscores how in the nineteenth century, nations had no such powers of self-defense: "when it fell upon New York thousands upon thousands fled. The city was desolate" (1847, 2). Failed quarantines at the borders of New York precipitated national dissolution, rather than affirmation of its continued existence in the face of outside threats—if not for the sense of community that was reinforced by those put in a position to medically care for one another. Not dealing with illnesses, the quarantine narrative nevertheless also embraces containment as an opportunity to build community and takes pleasure in the *lazaretto*'s inability to enforce distinctions between nations, thereby allowing for rejuvenating cross-cultural contact. "You would have been amused to see our motley band of men and women, of all nations and degrees," says the writer imprisoned at Calais, demonstrating that, rather than preventing indiscriminate mixing, quarantine promotes it (72). The disparate collectives that coalesce in the quarantine narrative thus foreground the natural, salutary, and

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inextricable interconnections of nineteenth-century nations—an amalgamated reality reiterated in *The New-York Mirror*'s publication of a British story because it expressed ideas commensurate with American values and therefore was considered worthy of inclusion in pages otherwise dedicated to creating an elite national literary culture.

The bulk of this chapter elaborates the distinctive characteristics of the quarantine narrative in contrast to both travel writing and outbreak narratives. Although often embedded within works that chronicle long voyages stretching across multiple countries, the quarantine narrative testifies to the significance of *stasis*: interludes of enforced immobility that allow the itinerant to inhabit—rather than merely visit—the foreign. The quarantine narrative thus provides a discursive space akin to the *lazaretto* itself, in which hurly-burly renderings of places seen and people met slows down and a foreign domesticity is fondly detailed. Unlike outbreak narratives, these assertively anticontagionist reports of nationals detained in extraterritorial ports and eventually released—as disease-free as before their containment—back to their travels preclude pathologization of imagined Others. Rather than figuring a nation as an inviolate or uncontaminated domestic domain, the quarantine narrative describes, counter-intuitively, the *salubriousness* of "infections" resulting from contact with peoples from strange lands. Unaccounted for in our scholarly assumptions about the necessity of hard boundaries for a nation's existence, these writers' vision of a vitally strong, permeable version of American belonging was an important facet the United States' collective self-fashioning at mid-century. Quarantine makes clear the arbitrariness of borders, and authors of the quarantine narrative embrace instead an existence in a world without borders—a world of flows, exchange, and circulation. From these convergences and divergences coalesces

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what I term *cis-nationhood*. Latin for "on the same side," the prefix *cis* offers a new interpretive frame in contrast to the border-crossing ethos of its antonym *trans*. The quarantine narrative offers a way of being national while "on the same side" as other cultures. To explore the notion of cis-nationhood in the context of the United States proper, I conclude with a reading of Prime's essay in which I demonstrate how cholera is used to position national community emerging from a recognition of being "one the same side" even at times of epidemic crisis when fragmentation seems just as likely an outcome.

Stasis

Quarantine narratives emphasize an unglamorous yet unavoidable aspect of world travel: waiting. Perhaps unsurprisingly, delay and detention have been almost entirely unexamined by scholars, despite their ubiquitous integration into travel texts. Instead, critics have focused on how Americans craft their identity by way of fleeting, often picturesque encounters with the foreign while passing quickly from space to space (see Leed 1991, 21-22; Pratt 2008, 3-8; Roberson 2001, xi-xxi; Stout 1983, 13-18). Placing mobility at the center of travel writing has helped to establish what Terry Caesar refers to as the essential homelessness of all travel texts, especially those in which American travelers "discover their own otherness in other countries as they use these countries in order to invent themselves" (1994, 45-46). Immobilization in a *lazaretto* or on board a quarantined ship, however, unearths travelers' similarities, despite their origins in different countries and their disparate destinations. Holding still, the quarantine narrative reveals, precipitates a home away from home, impermanent but unexpectedly

rejuvenating. A contributor to the *Southern Literary Messenger*, identified only as "M.,"

writes to her sister in 1840 about the "new and clean" *lazaretto* she stays in during ten

days quarantine at Tenos, Greece:

> The buildings, which are commodious and extensive, are one story high,
> surrounding a large square, into which all the doors and windows open,
> and where the temporary prisoners take air and exercise....Our rooms were
> separated from those of the public by high palings, that left us a private
> walk, which we enjoyed very much in the bright moonlight evenings...I
> did not find myself at any loss for amusement. Every day we had visitors,
> whom we received in the court....After telling you of the charms of our
> quarantine life, I must add, that we lived in two rooms with *ground floors*,
> and bare stone walls. But really, the time passed so rapidly and pleasantly,
> that I might have fallen in love with the ground floor and a life of poverty.
> (763)

The quarantine narrative's descriptions of domestic scenes such as these are striking for

the lack of abjection, an affect integral to Caesar's equation of travel and homelessness.

Even as the language of imprisonment in a strange land seeps into this author's

description, the pleasant trifles of quotidian life overwhelm any indication that travelers

to Tenos should be treated or regard themselves as frightening, pathogenic outsiders.

By exposing "quarantine life" to public scrutiny while simultaneously

foregrounding its serendipitous hominess, the quarantine narrative resists the

dehumanizing effects of a contagionist understanding of disease, which figures people

not as someone's father, mother, child, or lover but rather as potential disease carriers.

Detained travelers actively complain about the myriad ways their humanity was denied

by quarantine officials, whether they describe being treated as prisoners and animals or

recount disregard for their physical well-being and personal property. Writing about his

quarantine in Marseilles, correspondent and novelist Theodore S. Fay (remembered today

for his novel *Norman Leslie* and its unkind reception by Edgar Allan Poe) depicts being

utterly at the mercy of civil officials: "We were aroused this morning at daybreak by the

pilot, to await the quarantine physician, in order to be driven into the cabin like a flock of poultry, counted, and fumigated....Some of us were asthmatic, and suffered real alarm at the prospect of being suffocated with heaven knows what poisonous chemical abominations" (1834, 388). Purification procedures such as fumigation, which aimed to "smoke out" any lurking seeds of contagion, represented to anticontagionist writers not only bad science, but more importantly the unwarranted power quarantine officials had over those hapless individuals arriving in their ports. The incarcerated, therefore, took every opportunity to subvert that authority. A travel writer for a sporting magazine called the *Spirit of the Times*, identified only as "Rambler," enjoys toying with his Maltese captors, telling readers that they "could not have been more careful had we been rattle-snakes," but even a "beardless youth" like him "had but to turn round suddenly to scatter a half-dozen portly whiskered and mustached fellows, looking brave enough to beard a lion" (1847, 601). Using humor and irony, quarantine narratives acknowledge and push back against the degrading bureaucratic procedures associated with enforced detention.

Instead of representing an alienating experience of dogmatic supervision and confinement with sinister strangers, most quarantine narratives describe a time of bonding during which friendships grew, romance blossomed, and ad-hoc families developed. "Our company, at least, were soon established on the intimate terms of a family," writes essayist and novelist Henry T. Tuckerman in 1838, from a Neapolitan quarantine, "and the indifferent observer could scarcely have augured from appearances that we were but a knot of strangers, brought together by the vicissitudes of travelling" (499). Even "indifferent observer[s]" (such as the quarantine officials who had the group

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under surveillance) would have witnessed a significant phenomenon: the amiable

cohabitation of diverse nationalities, even under unpleasantly impoverished conditions.

Ironically, then, quarantine provides the necessary opportunity to conceive of

prolonged contact with strangers not in terms of possible infection (literal or

metaphorical), but instead in terms of reunion. The extraordinarily popular magazine

writer Nathaniel P. Willis likewise records "dinners *en plein air*" in an Italian *lazaretto*

that "would convince a spectator that we were a very merry and sufficiently happy

company" and recounts conversations that reveal unremembered past associations among

those who considered themselves strangers until they were detained together. "The

surgeon has been in Canada and the west of New-York," he writes, "and we have

traveled the same routes, and made, in several instances, the same acquaintances....I turn

to our Parisians, whom I find I have met all last winter without noticing them at the

parties" (45). These passages reveal the wisdom of that old adage "home is where the

heart is." Although the spaces of quarantine were often little more than sparsely furnished

cells, time spent in detention provided the conditions for domestic happiness

unachievable through the frenetic encounters of unhindered movement from city to city.

No wonder, therefore, that Mark Twain, a master at avoiding Mediterranean quarantine

as evinced in *The Innocents Abroad* (1869) his account of his voyage to the Holy Land,

succeeded in his search for "something thoroughly and uncompromisingly foreign—

foreign from top to bottom—foreign from centre to circumference—foreign inside and

outside and all around" in Tangier, whereas his quarantined contemporaries found

something much more unexpected, yet decidedly welcome: intimate companionship with

foreigners (76).

Contra Caesar's argument, then, that the American traveler feared becoming "an emigrant who renounced the only, true New World," the quarantine narrative tells a surprising story about the absence of such alienation in foreign circumstances (12). Instead it figures the world as one big, sprawling residence in which it was possible to feel *at home* no matter how far away from home a traveler was. These narratives show how the practice of quarantine—which may look to modern eyes like a system for policing geo-political boundaries—was in fact part of the vast, rapidly growing networks of multinational interconnections that constituted what many conceived of as a globalized world at mid-century. The tales of travel writers like Fay and Willis characterized this world as becoming increasingly familiar and less alien as more and more individuals were gaining access to it through tourism, trade, and the written word. Of course, we know now that these global networks were also responsible for many a population's exposure to new diseases like cholera. When looking back to this earlier time in the history of global epidemics, it can be tempting to map onto an account of a specific occurrence the outlines of the outbreak narrative. For instance, in Charles Rosenberg's definitive history of cholera in the United States, he identifies the mobile immigrant population moving south in 1832 from Canada as responsible for carrying the disease across the border into the poorer districts of New York at the same time that, as the *Evening Post* recorded on July 3, 1832, the "roads, in all directions, were lined with well-filled stage coaches, livery coaches, private vehicles and equestrians, all panic struck, fleeing from the city" (quoted in Rosenberg 1987, 28). The quarantine narrative challenges our tendency to cast outbreaks, in our historical recounting of them, as macabre versions of travel writing in which the mobility of diseases along global

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networks materializes a community's fears of dissolution resulting from its poorly mediated contact with other cultures. From the perspective of disease-free immobility devoid of panic that defined *lazaretto* life arose a narrative structure for resisting the demonization of foreigners even during times of epidemic disease—a point of view apt to be elided in scholarly criticism favoring of a brand of storytelling commensurate with the microbial truths of the outbreak narrative.

Anticontagionism

Produced while Willis worked as a foreign correspondent for *The New-York Mirror*, his travel writing caused the circulation and popularity of the magazine to sky-rocket in the early 1830s (Healy 2002, 4; see also Baker 1999 and Auser 1969). A literary magazine considered a key source of Knickerbocker culture, *The New-York Mirror* boasted of a national readership over 34 years of publication, a long life for a periodical in a young country (Ostrander 1998, 129; see also Chielens 1986, 272-279). It typically combined serious discussions of the arts with notes on fashion and gossip about the Broadway scene. Rarely did the magazine feed the public's voracious appetite for cholera news, but on August 11, 1832, the words Willis had penned some weeks earlier from the *lazaretto* at Villa Franca, Italy were certain to resonate with his cholera-stricken New York brethren. "We are all here in this pest-house," he announces, "and a motley mixture of nations it is" (45). This phrasing likely evoked both contagionist fears that indiscriminate mixing was responsible for the spread of disease and anticontagionists' suspicion that pest-houses and other sites of containment accumulated poisonous miasmas within their walls. It is easy to see how Willis's deft anecdotal style sought to

refute the contagionist position by revealing that direct contact with strangers in his *lazaretto* was transmitting nothing more than congeniality: "Our small quarters bring us in contact continually, and we harmonize like schoolboys" (ibid). More difficult to comprehend—especially from our modern perspective that is so deeply influenced by the logic of the outbreak narrative—is how anticontagionist authors could read quarantine spaces both as a domestic hearth uniting the denizens of the global village and as a potentially sinister cesspit belching out noxious effluvia and other foul material to contaminate countless innocent individuals while contagionist physicians engaged in a fool's errand searching for persons or cargo responsible for a disease's importation into their country. This seeming contradiction, however, indicates instead a way of thinking grounded in a presumption of health completely alien to the assumed presence of pathology that fuels contagionism.

More than taking a stance against direct contact as the cause of disease transmission, the quarantine narrative militates against the medical and cultural pressure to approach the world's inhabitants solely in terms of their potential infectiousness. As much as the authors of the quarantine narrative believed that miasmas, often generated in the enclosed spaces typical of buildings or ships used to hold those required to undergo quarantine, were responsible for epidemic disease, they saw this problem as one easily remedied. Sites of medical detainment, if properly managed, did not have to be sources of infection, according to anticontagionist physicians, who argued for simply keeping such spaces clean. Writing to the health-officer of the port of New York Richard Bayley, in a letter published in the United States' first medical journal *The Medical Repository*, American physician Thomas D. Mitchill argued that "the never-failing methods of *house-*

cleaning should be applied to *ship-cleaning*" and "when sea-vessels shall be kept as clean as genteel habitations on shore, their crews and passengers will suffer as little by infection and pestilence; and then the dream of importing diseases from foreign countries will be forgotten, or insisted on no more as reality" (1802, 254). To imagine pestilence being overcome with something as simple as house-cleaning was to understand pathology as a minor problem in scale and scope.

However (as we well know today), contagionism requires pathogenic elements to be the ultimate villains, needing to be stopped regardless of the costs, a position anticontagionists sought to undermine. In a report to Congress in 1803, Mitchill deplored the fact that "the nations of the earth [....] often looked upon each other as lazars or lepers" with good reason, since fearing that one's national neighbors were the bearers of devastating epidemics justified the perpetration of any number of horrors against innocent travelers and immigrants (460). Another important proponent of anticontagionism, writing in 1834, Dr. Charles Caldwell describes the lamentable tragedy that an ostensibly protective verdict of quarantine sets into motion: "not only have thousands of persons, suspected of contagion, been sickened and destroyed, by tyrannical and needless confinement in foul and loathsome places, under the influence of depressing passions, unwholesome food, and other grievous and wasting privations; in their attempts to escape from the power of their oppressors, not a few of them have been slain" (58). Caldwell portrays here a thanatopolitical medical totalitarianism that, driven by its need to defend itself from those it deems potentially pathological, cannot even recognize how its exercise of power has become as deadly as any epidemic disorder. The quarantine narrative stands as a remarkable bulwark against contagionist narratives that, in their

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effort to quell cultural anxieties about pandemics and analogously threatening cross-cultural influences resulting from globalization, find pathology wherever they look.

Instead, the quarantine narrative attempts to release its readers from the self-destructive obligation, precipitated by fears that cholera could appear at any moment, to be constantly searching for signs of potential illness in themselves and others. Through its vignettes of quarantine life, it trains readers to see that there is more to the world than potential sources of epidemics. It can be a strange experience to read through the examples of the quarantine narrative only to come to the realization that neither the authors nor those they meet in quarantine are sick. All the *lazarettos* and ship's holds the quarantine narrative allows readers to visit through the medium of the printed word prove healthy according to both contagionist and anticontagionist standards. Whereas the engine driving outbreak narratives is the discovery and containment of pathogens, carriers, and their analogously pathogenic cultures, the quarantine narrative unfolds through the exposure of the diseaselessness of *lazaretto* interiors. Collectively quarantine narratives thus enact a relentless pursuit as well, but their endgame is, disconcertingly, the discovery of precisely nothing.

Against the Exclusionary Nation

Indeed, it is hard to imagine Knickerbocker-style writers pursuing dire tales of epidemic tragedy, and only rarely did they choose to do so. More often than not, they mobilized the subject of transmissible disease to craft the next witty quip or cleverly comedic turn of phrase to delight and amuse the reading public while simultaneously making important contributions to a body of work they saw expressing core American

values. Whether using humorous or serious stories, though, the quarantine narrative aimed to undermine both the medical and political implications of a belief that persons— rather than miasmic spaces such as the Roman Coliseum, or a swampy part of Boston, or a fetid *lazaretto*—conveyed deadly infections. American travel writers who wrote quarantine narratives were especially aware of how the *lazaretto* represented authoritarian and anti-democratic politics. Their stories took up the opportunity to unmask the un-American principles undergirding medical detainment for the express purpose of warding against the infiltration of tyrannical tendencies into their national character, which, ideally, extended its democratic doctrine to the tolerant treatment of all kinds of people. Regardless of authorial nationality or a writerly preference for a light-hearted or more serious tone, the quarantine narrative critiqued insular or exclusionary forms of nationalism that could signal a downward spiral into authoritarianism or even totalitarianism.

For instance, Tuckerman's account of the 1837 cholera outbreak in Sicily is written—surprisingly—as a quarantine narrative in order to spin out a cautionary tale warning against the self-destructive end destined for collectivities defined by who they were able to exclude. "The Cholera in Sicily" begins with the requisite detailing of the innumerable dead piling up in the streets (common to many outbreak narratives), but quickly becomes a story about how the country's "rigid and absurd quarantines" represent not only a medical error, but more importantly provide an untenable basis for maintaining a viable national community (49). According to Tuckerman, the government put the quarantines into place to prevent the importation of cholera from Naples, and because it was unwilling to take any additional preventive measures, many individuals

died from the epidemic. To make matters worse, the Sicilian populace came to the

conclusion that the cholera was brought into the country in the form of poison by their

French Bourbon rulers with the express purpose of "ridding themselves of a superfluous

and burdensome population" (ibid).[15] In response, they stage an ultimately unsuccessful

revolution under "the yellow flag [...] of Sicilian Independence" during which leaders of

a long-term movement against Ferdinando II's rule were executed, bringing an abrupt

end to "[t]he gradual, healthy spread of liberal sentiment" (50). Although ascribing to the

cholera different origins, both the foreign government and the native population rely on

contagionism's model of importation. But all either group has to show for their

protectionist efforts, in the end, is an extraordinarily high number of deceased members.

Such was the fruit of power authorized by tyrannical force and exercised to keep pure the

national community; such was the dangerous potency of a person-centered, infectious

model of disease transmission.

For American globetrotters, examples of tyranny abroad stood out given their own

nation's recent bid for freedom, and cases like Sicily's abortive 1837 revolution

undoubtedly would have struck a chord with the recently-minted citizens of the United

States reading about it back home. But for most quarantined travelers enduring the

metered time of medical detainment within a quite constricted space, it was not about

getting to *see*, in a voyeuristic sense, the privations of those on the wrong side of political

power, as might be expected from a genre heavily invested in providing picturesque

descriptions of striking peoples and the places they lived. Instead, the quarantine

narrative tends to underscore through irony how quarantine produced a situation in which

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[15] For more on Bourbon rule and Sicilian politics from 1815 to1860, see the first two chapters of Lucy Riall, *Sicily and the Unification of Italy: Liberal Policy and Local Power, 1859-1866* (Oxford: Oxford UP, 2002).

white and/or well-to-do travelers *experienced* what it was like when such forms of privilege failed to obtain and they became—temporarily—the subjects on whom tyranny was exercised. Irony provided a means to cast descriptions of imprisonment and physical privations as unjustified, but also to signal their transient nature, alluding to the more permanent abuses endured by the unprivileged. For example, after enumerating the abuses he suffered upon his arrival at Villa Franca, including the "near suffocating" result of his fumigation, poor quality food, and a "desolate" *lazaretto* with no furniture, Willis reports, "our imprisonment is getting to be a little tedious" (1832, 45). In this passage, Willis creates a rather complex moment of dramatic irony set to unveil how the privileged can become dangerously self-important. Willis presents the contagionist *lazaretto* official as deluding himself into thinking that suffocating and starving his charges was actually preventing the spread of disease, knowing all the while that his sympathetic anticontagionist audience would enjoy feeling superior to the officials in the Mediterranean who appeared to be pettily employing bad science to exercise a modicum of power for a short period of time over a handful of travel-worn strangers. However, Willis also mocks himself, whose complaints about tedious imprisonment, if read with the proper tone, come across as the whining of a conceited buffoon who has confused a minor delay with criminal punishment. Willis thus uses irony to underscore, on the one hand, the pointlessness of these temporary forms of detainment and, on the other hand, to critique the notion that a collective identity requires some individuals, as prisoners, to perform a "sacrifice of life" in order to achieve "the citizen-subject's transcendent humanity" (Smith 2009, 13). Identifying some individuals as requiring exclusion, even

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only temporarily, these stories show, will ultimately divide a community rather than aid in it coalescence.

The quarantine narrative thus provided a formal means for pointing out contagionist logical contradictions and their tragic political ramifications. Confident in the knowledge that they were not sick, authors of the quarantine narrative were keen to convey to readers back home what they saw as the utter ridiculousness of their confinement in *lazarettos* or on board ship, but they also underscored how the dangers of contagionist thinking extended beyond the medical to sociopolitical realms. The intimate, confiding tone of travel writing lent itself to the verbal irony these authors employed to mock the institution and to make a larger point about its role in the loss of liberty. "We beheld the edifice appropriated for the cure of well folks," solemnly declares the unnamed author of "Quarantine in a Convent" upon his arrival at a *lazaretto* off the coast of Spain (1835, 25). The implication of this statement—that the *lazaretto* is in fact an edifice more likely to produce the conditions for making healthy travelers ill—makes clear how the day-to-day experience of being quarantined did not appear to follow the rules of logic propounded by either contagionists or anticontagionists. Renowned English travel writer Julia Pardoe, for instance, described being sentenced to quarantine at Orsova and having to travel to the *lazaretto* via cart, which also carried a young woman headed elsewhere. Highlighting the irony of their situation during which they came into contact with a denizen of the country *before undergoing purification*, Pardoe tells of how their traveling companion "laughed heartily at my pressing invitation to her to share our imprisonment" (1838, 143). On the surface an amusing anecdote, this passage takes on a darker meaning when the amicability of the encounter casts into sharp relief the serious

consequences that could ensue, following either contagionist or anticontagionist dictates to their logical conclusion. Either proponents of direct contact are correct, and the young woman risks death because she had the mischance to travel with an infected party, or, Pardoe's company is being sentenced to imprisonment in a building potentially teeming with deadly noxious effluvia. For either a sympathetic or suspicious audience, it is clear that contagionst protectionist mindset puts individuals into precisely the kind of deadly, infectious situation it supposedly prevents.

Occasionally, white, male authors of the quarantine narrative would even come to realize how their experiences in quarantine were small doses of the kinds of harsh conditions racial "others" endured every day of their lives. Thus, even as the authors of the quarantine narrative sought to use humor to help to make the best of their situation, their quips tended to strike deep, implicitly critiquing dangerous social inequities. Forced to put up with the arbitrary rules and privations of quarantine, the authors of the quarantine narrative become aware of similar illogical mistreatment of those with black skin. Quarantined outside Lubeck in 1843, the pseudonymously identified British travel writer Benjamin Bunting jokes, "We were now obliged to pass our time as well as we could; and tried to do it after a certain Sambo's plan; who, when asked by a friend how he passed his time, politely remarked, 'Me no pass me time; me cock up me leg, and let time pass me.'" (114). Disturbingly racist as this joke is, its placement within the quarantine narrative serves a decidedly serious, anti-discriminatory purpose. It unmasks slavery as a perpetual quarantine, a life sentence imposed by those who can hardly bear the thought of a couple weeks in a like condition. Quarantine thus reveals, to some, the senselessness of a race-based system of slavery.

It also demonstrated how inculcating irrational fears of other races in the mindset of United States' citizens was an affront to the nation's stated sociopolitical ideals. As if confessing to his Boston readership, the author of "Quarantine in a Convent" admits to being relieved to move from his quarantined ship to a *lazaretto* because, he explains, "there was on board of the Emmet, in the combined capacities of cook and steward, a native of the island of Madagascar, upon whom I could never look without shuddering" (25). Another case of situational irony, this passage underscores how this native of Madagascar is free, with the rest of the crew of the Emmet, to continue on his voyage, while the white American must endure poor food, boredom, imprisonment, and fumigation. This context leads the author to an epiphany about the injustice perpetrated against people of the "wrong" skin color: "Moreover, the tremendous truth, 'Of such, are those in bonds,' had not then flashed upon my mind, and disclosed to it the wrongs inflicted on his race—else, my fear might have become facetiousness, and I, even, have added wrong to wrong" (ibid). Of course, he knows—and expects his audience to agree—that he *is* being facetious and has done wrong fearing "Madagascar," as he dubs him, simply because he is black. The quarantine narrative demonstrates how the American national community's ability to imagine itself as inclusively democratic is deeply impaired by the exclusion of racial others.

The many uses of irony in the quarantine narrative provide a means for working out the medical and political contradictions of a contagionist approach to disease transmission and community formation. Contagionism aims to protect populations by identifying those other populations that are a threat to it. But, its methods of isolation and purification do more harm than good, especially when translated to non-medical realms.

Thus, even though contagionism will eventually "win," historically and scientifically speaking after the advent of germ theory, the quarantine narrative reveals the non-inevitability of both the outbreak narrative and its corresponding politics. The irony of the quarantine narrative, capable as it is of speaking to both contagionist and anticontagionist sides, particularly works against the discursive linkage between contagious disease and contagious cultures that will be cemented together in the outbreak narrative. Authors of the quarantine narrative worked against contagionism's dire and potentially tragic consequences for their national character.

Ironically Infectious

Charmingly paradoxical anecdotes of homey *lazarettos* in exotic locales and a cleverly ironic evisceration of contagionist medical science and politics set the stage for the quarantine narrative's much larger point that American efforts at national self-fashioning were headed down the wrong road when they sought to define their collective identity in terms of its difference from other nations. Instead, the quarantine narrative aimed to remind its audience back home that the heterogeneous foreign roots that made possible the United States' constitution as a democratic republic remained the nation's key source of identity and character formation. Tuckerman, for example, presents his traveling companion Delano as transcending "the idea of thrift, the eager sense of self-interest, and the iron bond of local prejudice, which too often disfigure the unalloyed New-England character" because these attributes "had been tempered in their just proportion, in his disposition, by the influence of travel and society" ("Love in a Lazzaret" 1838, 494). The Knickerbocker generation of writer, prone as it was to foreign

adventures, saw that national independence should not mean a country's isolation from the rest of the world—even as the reality of cholera seemed to justify and necessitate such political actions. An unusual stance to take in an era that scholars such as Paul Giles (2011) and Anne Baker (2006) have described as anxious about what challenges its fluctuating and unsettled boundaries placed in the way of preserving the nation's integrity. The quarantine narrative underscores through metaphors of infectious love how the United States will be able to survive by continuing to benefit from foreign influence and by recognizing that the permeable boundaries between it and the other nations of the world was the source of its strength and national integrity.

It may seem contradictory for an anticontagionist sub-genre to use metaphors of infection, but such figurations represent what these authors saw as the salubrious permeability existing amongst the different nations of the world. This last and most powerful instance of verbal irony deconstructs contagionist logic through the playful repurposing of the image of infectiousness in order to show that good can come from cross-national mixing. As might be anticipated in stories that celebrate unforeseen domesticity found in overseas *lazarettos*, the quarantine narrative turns to marriage plots and other tales of romance in order to unsettle assumptions that the foreign is diametrically opposed to home and strangers are intent on doing harm. Typically the victims and villains in moralistic tales, coquettes and lotharios become the heroes of the quarantine narrative, which seeks through the language of attraction a way to conceptualize foreign influence as desirable—even to Americans whose multinational heritage made them leery of "backsliding" into what they sometimes interpreted as the corrupted European identities they left behind after they declared independence. The

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enforcement of strict barriers between those undergoing quarantine and a country's inhabitants was never capable of keeping separate those who are attracted to one another. Enlivening Willis's Italian quarantine was Carolina "the guardian's daughter, who stands coquetting on the pier just outside the limits" (1832, 45), and the author of "Quarantine in a Convent" describes the "prescribed limit" of quarantine difficult to obey "when visited by a dark-eyed damsel or two," which caused him and his companions to feel "strangely tempted to resist restriction" but for the guard preventing them engaging the women in more intimate conversation (1835, 26). These men and women evince no fear of each other's potential physical or cultural infectiousness. Such tales of flirtation in the context of quarantine undermine the implicit pathologization of those locked inside the *lazaretto* and in turn accomplish the revelation that quarantine barriers are temporary and fleeting, while the connections between nations is much more enduring.

As that first, horrifying cholera epidemic in the States receded into memory, the quarantine narrative became more focused on providing fictional narrative structures for seeing foreign influence as an integral part of the national future of America. In 1842, Willis returned to the quarantine narrative, this time to tell a light-hearted fictional story about falling in love abroad. His "Flirtation and Fox-Chasing," published in *Godey's Lady's Book*, imagines a romance blossoming between a backwoods Kentuckian and an English lady, despite the barriers put in place by class and country. This narrative is in fact a story within a story and a quarantine within a quarantine, set in a Maltese *lazaretto* during which Tom Berryman helps to pass the tedious days by telling his former school chum, who is also the unnamed narrator, about his "embargo" at Castle Tresethen where he recovers from a feverish distemper under the care of Lady Caroline and her family:

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"You smile—(Tom said, though he was looking straight into the water, and had not seen my face for half an hour)—but, without the remotest hope of taking Lady Caroline to Kentucky, or of becoming English on the splendid dowry of the heiress of Tresethen, I still felt it impossible to escape from my lover's attitude—impossible to avoid hoarding up symptoms, encouragements, flatteries, and all the moonshine of amatory anxiety" (227). Willis here adapts a storyline first assayed by Tuckerman, whose autobiographical "Love in a Lazzaret" narrates how the American Delano and the Italian Angelica De Falco are engaged to be married. Delano, like Berryman, presents "the most incontestible [sic] symptoms of love" (497). Rather than a frightening story of falling victim to the deadly charms of a foreigner (typical of early seduction narratives like Susanna Rowson's *Charlotte Temple*, a bestseller in American literature well into the nineteenth century), the transatlantic seductions of the quarantine narrative end happily—Tuckerman's with Delano's impending nuptials and Willis's with Berryman recovering from his crush to attend, with pleasure, Lady Caroline's wedding. All fear of foreign infectiousness is overwritten with narratives of enduring friendships or wedded bliss. The quarantine narrative privileges stories about the bonds that can grow between strangers as models of how nations should interpret the inevitable encounters with foreigners as transatlantic networks continued to expand.

As modern readers, casting an international romance as "infectious," as do both Tuckerman and Willis, perhaps invokes our ambivalent view of outsiders as Janus-faced bearers of much-needed genetic diversity and fearful contagions who must be carefully assimilated into our community so that we might derive the invigorating benefits of the former while avoiding the deadly consequences of the latter (Leed 1991, 89; Wald 2008,

57). But no such conceptual double-edged swords exist so as to produce conflicted, anxious approaches to outsiders in the thinking of anticontagionists. Blissfully unaware of both genetics and microbes, these anticontagionist writers can use flirtation or marriage plots as literary devices more (or even completely) free of the kind of paradoxes that will become the norm after the advent of germ theory. Metaphors of infectious, international love (whether it results in a union or not) diffuse fear of foreign influence precisely because it underscores how non-deadly it is. The comedic form of stories of flirtation show that falling in love across national boundaries is nothing to be afraid of— and neither is using one's exposure to the foreign to craft a better version of one's national self. Thus, although Alfred Bendixen (2009, 104) may be right that Americans did not travel with the express purpose of being influenced by the foreign, the quarantine narrative makes clear that not all itinerants from the United States desired a strict distance be maintained between themselves and those they met while abroad. Some actively sought that kind of intimacy with the foreign once they got over their fears of it.

The authors of the quarantine narrative were not usually very specific about what benefits would accrue from acquiescing to foreign influence, despite being very clear that it was nothing to be afraid of. They did not offer a tired formula to be followed by every unimaginative traveler that retraced their footsteps. Instead, they insinuated that the future of the United States as a nation capable of holding its own on the global scene depended on its ability to recognize how the nations of the world made up one rather extended family and that they should treat each other as such—a position exemplified in the quarantine narratives of Tuckerman. One year after publishing "Love in a Lazzaret" in *The Knickerbocker*, Tuckerman published *Isabel; or Sicily. A Pilgrimage*, a poorly

disguised travel book masquerading as a novel by virtue of a narrative frame describing how Isabel Otley, traveling with her uncle Clifford Frazier, goes abroad to find her father. In a storyline similar to his earlier travel essay, Tuckerman's *Isabel* describes a cross-national engagement between the American Isabel and Sicilian native Count Vittorio she meets in quarantine at Messina, which is the subject of the novel's first chapter. It isn't until the end of the novel that Vittorio unknowingly reunites the Otley family when he brings home a friend for Isabel to meet: "There was a quick, short cry of recognition, and the next moment she was in the arms of her father" (228). The constitution of this American family occurs thanks to the agency of a foreigner in a foreign country. Isabel's marriage to this foreigner, then, is not a rejection of her national home, but the promise of its future: "Beneath that emblem of her far distant country, the marriage vows of Isabel were uttered" (229). Although far from home, Isabel remains loyal to it. Cross-national marriage thus provides the quarantine narrative with a structural device for understanding how nations can exist and develop as a result of their contact with each other.

Far from being the shallow dandies of a frivolous high society, Willis and the other authors of the quarantine narrative being published in the magazine outlets that represented America's efforts at producing refined literary culture proved themselves capable of taking the comedic forms of Knickerbocker writing to political realms without becoming pedantic or preachy. They used their art to showcase their knowledge of the pressing concerns of their nation, whether arising in the form of a medical debate, a culture war with condescending European literary elites, or the tyrannical oppression of black-skinned peoples. Unlike the authors of the outbreak narrative, for whom the "*conspicuously imagined* community" was a requisite form of immunity, they sought not

to envision themselves as invulnerable to and therefore safe from the foreign found within and outside the nation's borders (Wald 2008, 53). Instead, they created ways of imagining productive infections crossing porous boundaries and making each collectivity the stronger for it.

By taking its point of reference temporary inhabitations on the high seas, the quarantine narrative makes Atlantic networks central and the formation of national subjectivity as a process born of embracing the influences therein encountered. Quarantine makes possible a way of viewing the globe as a series of interconnected homes. The proliferation of homes—found on board ship and in lazarettos or, conceptually, in the promise of domestic bliss—challenges a perception of abroad as alien and dangerously infectious. Sanguine science proffered localized disinfectants and basic house-cleaning as further proof that strangers need not be stigmatized as (potentially) diseased. Quarantine narratives and their anticontagonist medical counterparts reposition nations as nodes within a network of other nations. The nation in this formulation cannot exist beyond other nations, since it is utterly implicated within them. In the quarantine narrative, international romance proves an apt metaphor for this version of nationhood: one in which its totality is best understood in its harmonious unions with other nations. Rearticulating the meaning of quarantine through the lived experiences of actual travelers, the quarantine narrative helped to profoundly revise what it meant to be an American national in the antebellum era.

Cis-nationhood

Ultimately, the quarantine narrative—especially in the hands of a writer like Tuckerman—aspires to take the "trans" out of transnational. Rather than seeing border-crossing as a way of overcoming dangerous insularity, as many American Studies scholars engaged in the transnational turn have used to revitalize the study of American culture, the quarantine narrative offers modern readers a glimpse of a borderless world. Paul Giles recently argued that the "nationalist phase of American literature and culture extended from 1865 until about 1981 and that the current transnational phase actually has more in common with writing from the periods on either side of the War of Independence, when national boundaries were much more inchoate and unsettled" (2011, 21). I agree with Giles's assessment of pre-Civil War era literature as dealing with "inchoate and unsettled" boundaries, but not his assumption that "the country's sense of national identity was as uncertain, as provisional, as its cartography" (5). Rather, American travel writers saw first-hand the possibility of life and work along transatlantic networks, and they often lived borderlessly, potentially forever "inchoate and unsettled." Giles raises an interesting point about pre-1865 American culture: it lived without the benefit of settled boundaries. But the transnational perspective still privileges the border conceptually, and quarantine and cholera writing shows how nineteenth-century individuals lived without the benefit of border-defined thinking. The quarantine narrative underscores that individuals can come to experience the national belonging alongside and not in opposition to other nations. This is a phenomenon I call *cis-nationhood*.

We have seen that the surprisingly homey experiences undergone in quarantine came to represent nations as mutually benefiting each other—a kind of exchange that

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highlights the extent to which containment only served to demonstrate that, far from

being on opposite sides of finite boundaries, the world's nations came to be constituted

alongside one another. This notion of being notion of being "on the same side" is that

which the prefix "cis" in cis-nationhoood refers to and is captured in a physics metaphors

used in Tuckerman's "Love in a Lazzaret." "There is a law in physics," he explains,

> called the attraction of cohesion, by which the separate particles
> composing a body are kept together, till a more powerful agency draws
> them into greater masses. Upon somewhat such a principle, I suppose it
> was, that the parties convened in the Lazzaret, darting from one another in
> zig-zag lines, like insects on the surface of a pool, were brought into more
> intimate companionship, from being denied association with those around,
> except at a respectable distance, and under the strictest surveillance.
> (1838, 499)

This passage serves as an argument for cis-nationhood, given that it is preceded by a

description of the "variety of nations and individuals thus congregated within such

narrow bounds" (498). While living in the geographical space that in the language of

border-drawing is one's national home, the individuals of that national "body" are "kept

together" and perhaps tend toward dangerous insularity. But when "a more powerful

agency"—in this case, literal quarantine—intervenes, such elements of the national body

are "denied association" with their countrymen and must join other "parties." As readers

know from Tuckerman's initial description of Delano, such new groupings do not erode

one's national identity, but instead transform it into a stronger alloy. Indeed, all the

metaphors covered in this chapter—the tempered national, love as contagion,

international marriage, and bigamy—represent a cis-national perspective. New,

temporary allegiances formed in spite of efforts at containment express an assumption

that nations require contact with each other in order to exist.

Being disconnected from the members within one's own national collective can likewise foster anti-communitarian activities. Cis-nationhood depends as much on realizing that the collective comes to be constituted not because it excludes the criminal or the sick, but in spite of efforts to do so. In 1847, physician Alanson Jermain Prime began to publish essays anonymously in the *Christian Parlor Magazine*, the first of which enacts cis-nationhood by showing how those ostracized through imprisonment nevertheless offer to each other the foundational act of community—therapeutic succor— and thus hold the nation together at a time of crisis. Called "Passages in the Life of a Physician," the first installment was a piece with the subtitle "Cholera Asphyxia—A Thrilling Incident." In it he gives his account of Sing Sing's (New York's state correctional facility located in Ossining) experience with the disease. Prime received his medical license just shortly before the 1832 outbreak of cholera in New York. When the disease made its appearance in the prison, Prime was appointed as a special physician for the prison (Prime 1888, 75-76). Not an overtly nationalistic bit of writing, Prime's essay is nonetheless telling a version of an important national story: the cholera's first arrival in the United States. The essay begins with a very short section on the country's reaction to the cholera in New York, its reign of terror over the course of weeks, and its sudden disappearance during a thunderstorm. The second, and longest, portion of the essay tells the story of Prime's bond with one of the prisoners in Sing Sing named Henry Morley. The essay concludes with a brief section that uses another American narrative: going West. Prime recounts an unexpected reunion with Morley somewhere in the southwestern states. Every episode in this essay underscores how American community takes shape as

a result of recognizing the common humanity and shared national values between members that society attempts to keep separate through identities like "prisoner."

A convicted murderer and former minister, Morley is an unusual choice for a sympathetic protagonist, but Prime brings together cholera and prison through Morley's story in such a way as to give shape to cis-nationhood. Overall, cholera in the essay operates to remind American readers they exist "on the same side" even in times of crisis and that moments like an epidemic are a time for national solidarity rather than fragmentation. The perspective from prison underscores how American society is threatened by internal fragmentations. Morley, the essay proves, is an upstanding citizen, despite his crime, as is shown by his pardon (arriving the day after he escapes from the prison and the cholera comes to an end) and his return to the ministry (Prime 1847, 8). The interweaving storylines of the cholera and life in Sing Sing during the outbreak serve to underscore the formation of an American nation during cholera and for the free and imprisoned alike, regardless of whether or not all citizens choose to recognize it.

Cholera, like other epidemic diseases that plagued the nineteenth-century, made a mockery of the boundaries created to compartmentalize and organize human societies. As Prime recounts, "The scourge fell upon all places alike. It gave no notice of its approach; it did not even creep gradually on from town to town, but, having done its fearful work in one city or village, fell with appalling suddenness upon some distant point, and men rose from their beds in the morning to lean the dreadful news that the scourge had come. It despised all quarantine laws and health regulations....I believe that no class of men was exempt. It fell upon all alike. At least, such is my own experience, and few saw more of it than I did. The strong and vigorous, the sickly and weak, old and young, beauty and

deformity, all furnished their victims to swell the hecatomb offered to the destroyer" (2).

More than a destructive force, cholera represented a natural order in which no place or class of person was meaningfully differentiated from others. As evinced in the above quote, Prime applies recognizable rhetoric associated with the idea that epidemics are the great equalizers of humanity, the logic of which he extends to the specific case of democratic society in the United States. The first and second parts of the essay in fact tell the same story: the New York outbreak of cholera in 1832. But whereas the first telling recounts the country's general reaction to the disease, including despair, fear, and "thousands upon thousands" (ibid) fleeing the city, the second telling from within the walls of the prison reveals how the epidemic was met with community support: "It might have been expected that the convicts would have been driven to despair—that they would have felt as if they were tied up to certain and inevitable death, and so would have been disposed to escape. But such was not the case .... they took good care of each other" (3). The cholera demands a group response, and although the convicts and the other inhabitants of New York respond differently, they become united in their common response to the epidemic. Importantly, Prime narratively links the two groups through the double telling of the outbreak. Prime reminds American readers that while they may not be imprisoned, those in Sing Sing experience the same story of cholera as their free counterparts, even though they respond differently.

Although the inhabitants of New York and Sing Sing share a common story of national crisis upon the arrival of the cholera, the contrast that Prime draws between the two groups' responses to the epidemic foreground a problem of fragmentation within American society. The New Yorkers' flight from the city, while perhaps helping some

individuals, is not nearly as effective as the prisoners' communal response. Their successful preparation and efficacious care of each other was made possible by their communal ties. Even though the prison contained different classes of men—poor and educated alike—their differences proved unimportant in the face of their need to overcome a common trial. Ultimately, the New Yorkers' fear of each other and of their city represents, in Prime's essay, a disturbing failure of social cohesion.

At numerous points in a rather short piece does Prime emphasize that fearlessness is a remarkable prophylactic against the disease. Fear, he argues, create a "strong predisposition" for the disease and that he attributes his own escape from it as a result of "courage, or rather fearlessness" (2). Morley, too, survives a severe case of the cholera according to Prime precisely because he does not fear death: "I regard his case as one to strengthen my opinion that in this disease especially fear is a powerful exciting cause. His utter indifference to it has, I believe, done much to conquer it" (4). As we saw in chapter three, fearlessness in the face of susceptibility to disease was a mark of a patriot. Moreover, fearlessness becomes a necessary mode of life an age of borderlessness. Since there is no way, truly and efficaciously, to quarantine oneself—from disease or from other elements of society—then fearlessness becomes a way to navigate inevitable contact safely. To live in fear of contact, Prime shows, destroys the community, rather than protects it, because the only choice when confronted with something or someone potentially dangerous is to flee. But to flee is to refuse community and to dissolve the nation. The prison and the convict Morley come to represent how to overcome the fragmentations and literal and metaphorical fleeing that forbids true national formation.

Detainment, whether medical or legal, is imposed often to foreclose temporarily the power to access nationhood and thereby exist according to certain sovereign rights. But from inside prisons and quarantines, the authors covered in this chapter show, comes the proof that imposing the border of detainment does not actually have the power to prevent national belonging and in many ways fosters it. Borderlessness in these narratives underscores that no matter how one is physically or imaginatively kept from one's home, one always has access to the flows and exchanges that will produce that home anew. This way of thinking insists that national belonging can be experienced anywhere. However, this conception of a nation arising from cross-cultural contact would only last another couple decades. The next chapter examines how domestic fictions from mid-century sought to resist, like Prime's essay, fears that nations were prone to internal fragmentations and required protection from "outsiders" who threatened the integrity of the larger group.

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Chapter 6

Consumptive Communitarians and Inclusive Nationhood's Final Decades

Since at least the eighteenth century, a disease known alternately as pulmonary

consumption or tuberculosis (to name only two of its popular monikers) has repeatedly

captured our imagination. An iconic romantic disease in the eighteenth and nineteenth

centuries, pulmonary consumption was cast a disorder that "dissolved the gross body,

etherealized the personality, [and] expanded consciousness" (Sontag 1977, 19-20). It is

also now known as the disease *tubercle bacillus*, which Robert Koch viewed under the

microscope in 1876 and was associated with a new age in medicine increasingly capable

of effectively combating epidemics as a result of knowledge that microorganisms were

responsible for certain illnesses. By the end of the twentieth century, Paul Farmer and

others reminded us that, for many of the world's poor, tuberculosis was neither romantic

nor a disease conquered by the miracle modern medicine, but in fact " the world's leading

infectious cause of preventable deaths in adults" (Farmer 1999, 185; see also Ryan 1993

and Ott 1996; for general histories of tuberculosis see Dormandy 2000 and Daniel 1997).

From the eighteenth century to the present, tuberculosis transitioned from a signifier of

otherworldliness to a symbol of a states of abject poverty and medical

disenfranchisement. This transformation gestures to a broader epistemological shift in

regards to how bodies—from the human to the national—were understood. I argue in this

chapter that before the 1850s, consumption, believed to be a hereditary, environmentally-

triggered illness, represented the potential for the community to heal itself, emphasizing

the regenerative qualities of diverse kinds of bodies, whereas by the end of the nineteenth century in its new form as infectious disorder, it symbolized the need to protect an inherently fragile physical frame and larger collective from "invading" and "pathogenic" outsiders.

An abundance of scholars have articulated arguments in regards to what happens, culturally-speaking, after the advent of germ theory—many of whom have been engaged already in this project. Priscilla Wald (2008) on the outbreak narrative, Laura Otis (2000) on the membrane model, Ed Cohen (2009) on immunity-as-defense, Bruno Latour (1988) on the pasteurization of France—all of this work elaborates the conditions of possibility of a modernity shaped in a large part by the medical community arriving at a consensus in regards to the etiology communicable disease. Wald, Otis, Cohen, and Latour describe how medicine's mastery over the microbe created a new conception of bodies as fragile. Tuberculosis played a key role in that history, particularly in terms of constructing bodies—both human and national—as easily succumbing to insidious incursions.

Being able to track microbes into the body and there perceive the degenerative processes they produce, did more, however, than simply cast bodies as fragile— embodied life itself became a form of degeneration. Michel Foucault's *The Birth of the Clinic* argues that being able to "open up a few corpses" revealed degeneration as a vital principle: "as in the case of tuberculous degeneration, when the ulceration of the nuclei causes the destruction only of the parenchyma but of the tubercles themselves. Degeneration is not, therefore, a return to the inorganic; or, rather, it is such a return only insofar as it is infallibly orientated towards death...Degeneration lies at the very principle of life, the necessity of death that is indissociably bound up with life, and the most

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general possibility of disease" ([1973] 1994, 157-58). In other words, during the nineteenth century life becomes defined as that which is dying. Foucault's account underscores how corpse-like living bodies become when science takes as its object the human being. This was a fragility that many Americans were unwilling to accept fully in the nineteenth century, even as they trained in the Parisian Clinical School.

The primary lesson the French School taught the world about pulmonary consumption was that the disease confirmed a new insight into embodiment as prone to internal degeneration. American physicians incorporated this idea into their longstanding commitment to offering patients therapeutic interventions, which they prioritized over their own understanding of pathogenic processes. Medical historians have cast the antebellum period as the "French period" in American medicine because of the large numbers of practitioners from the United States who went abroad to France to get trained (see, for example, Jones 1973 and Shryock 1947, 21-36; for histories of the French Clinical School, see Ackerknecht 1967 and Hannaway and La Berge 1998). But even as American physicians were energized by what was happening in Parisian medical circles—particularly by their empiricism, which provided, according to John Harley Warner "an egalitarian foundation for knowledge not shrouded as a professional mystery...[and was therefore] well-suited to the political tenor of antebellum American society" (1998, 9)—they remained "scornful of the patient care they witnessed in the Paris hospitals, which embodied what they interpreted as a perverse French valuation of knowledge above healing" (10). While on the one hand doctors in the United States tried to meld a French empiricism with an American healing sensibility, laypersons promulgated interpretations of disease that emphasized simply their treatability.

Section one in this chapter examines, then, the differences that emerge between what American physicians had to say about pulmonary consumption from the 1830s to the 1850s in light of increasing influence from the French School and what laypersons living in and caring for those afflicted with the disease thought as a result of their study of the domestic spaces considered sites of the disease's origin and treatment. In particular, I focus on Catherine Beecher and Harriet Beecher Stowe's *The American Woman's Home* (1869), a domestic economy manual that represents these two writers' assessment, developed over decades of writing about women's work in the home, of what women needed to do to become not only good housekeepers, but also good *healthkeepers*. Equating women's domestic labor with therapeutic undertakings, Beecher and Stowe challenge their contemporary medical practitioners' empiricism with one of their own, one developed out of the careful study of domesticity. While deeply aware of the body's interior—as evinced, for example, by the diagrams of lungs included in their volume—Beecher and Stowe affirm that if what is outside the body can influence the inside, then a healthkeeper can ensure the salubriousness of those outside surroundings. Ultimately, both medical practitioners and average individuals like Beecher and Stowe resisted the French Clinical School's implication that bodies were inherently fragile and sought to retain a sense of the body as capable of regeneration, not just prone to degeneration.

Section two argues, on the one hand, that consumptive characters were literary authors' means for engaging this shifting definition of embodiment and, on the other hand, that they represented a belief in the regenerative potential of the body politic. Perhaps the most iconic American consumptive from the nineteenth century is Little Eva

in Stowe's *Uncle Tom's Cabin* (1852), whose death in the novel prompts her father to reconsider slaveholding and inspires her New England aunt to overcome her racial prejudices. Other consumptives, such as Mrs. Sullivan in Maria Cummins's *The Lamplighter* (1854) and Alice Humphreys in Susan Warner's *The Wide, Wide World* (1850), likewise function as teachers and moral guides to the young orphaned protagonists of whom they take charge. In their position as moral superiors, these consumptives—and their deaths—may seem to confirm what Susan Sontag deems the "standard achievement for TB deaths in fiction": passing "a test of moral character" through a "redemptive death for the fallen…or a sacrificial death for the virtuous" (1977, 40). But, I assert that these three characters—when read as healthkeepers with agency beyond the grave—signify instead an argument for continuing to see bodies in light of potential resiliencies, even if some individuals die tragically young. More than moving memories of their deaths, these characters leave behind a permanent transformation of the domestic spaces in which they lived in the form of a pervasive influence that continues to beneficially guide their loved ones. These communitarian consumptives provide, paradoxically given their own dissolution, the bonds necessary to constitute the collective.

Given its focus on community formation, this literary resistance to a French Clinical School's interpretation of pulmonary consumption speaks to a larger concern that new ideas about bodies' fragility extend to the body politic. Fears of internal fragmentation took many forms at mid-century, but most importantly in regards to

increasingly rancorous debates between abolitionists and slaveholders.[16] As Peter

Coviello points out, whiteness became one way for the nation to affirm its sense of self

and coherence: "American nation-ness existed, and had meaning, as a kind of relation—

for some, an intimacy—that bound together a scattered, anonymous citizenry; and that

the language of race, with its progressively escalating aggrandizement of whiteness,

provided one powerful way to realize this unlikely dream, that of an intimate nationality"

(2005, 5). Domestic novels depict this intimate nationality by ensconcing it within the

home and by bringing strangers, sometimes of different races or genders, into a familial

relationship with each other. Consumptive characters often prove most adept at joining

the disenfranchised and the ostracized to the larger community with sympathetic bonds.

Consumptive characters were able to build community because they saw the

health of the community as dependent on diversity. As a result, such forms of

community-building are achieved, in fact, without attention to racial difference. A novel

like *Uncle Tom's Cabin*, as Coviello recognizes, "refuses the notion of a strictly *racial*

coherence for America" and a nation constituted as a result of whiteness "was not a

nationalist vision to which Stowe was willing to subscribe. The unique strength of a

model of nationality rooted in the human susceptibility to emotional wounding and loss

thus lay, for Stowe and many other sentimental writers, precisely in the fact that anyone,

white or black, could be grief stricken, and could therefore be included in the vast

embrace of an affective nationality" (167). In earlier chapters of this project, pestilence

was shown to be used in quite similar ways to figure union by invoking universal

susceptibility to disease. But importantly—and this is the register that Coviello overlooks

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[16] Classic and more recent scholarship locates two kinds of union—"federative" and "incorporative"—that address alternative ways in which early Americans sought to understand their collective belonging. See for example Sacvan Bercovitch (1980), Susan Manning (2002), and Richard Slotkin (1973).

when he attends only to Stowe's insistence that the national community requires that individuals "see to it that *they feel right*" (quoted in Coviello 2005, 167)—models of pestilent nationhood arise from the therapeutic succor that members of the community offer to each other. Coviello, like many other scholars of sentimentalism, tend to ignore that for Stowe, feeling right has a physiological component. Not only should they "see to it that *they feel right*," she writes, readers also should recognize that "an atmosphere of sympathetic influence encircles every human being; and the man or woman who *feels* strongly, healthily and justly, on the great interests of humanity, is a constant benefactor to the human race" (quoted in Tompkins 1985, 132-133). Significantly, feeling right for Stowe is not emotional and only partly an intellectual commitment to social justice; it is mostly equated with a strong and healthy corporeality. Consumptive characters, despite their own infirmity, create just these kinds of atmospheres of "sympathetic influence" that then produce men and women who feel "strongly, healthily, and justly."

At stake, then, in narratives about consumptives is something beyond a sense of national intimacy: the very possibility of nationhood itself is threatened when French Clinical interpretations of pulmonary consumption reduced domestic spaces and their consumptive communitarians to simply containers of decay and degeneration. As Gillian Brown explains, at mid-century the democratic liberal individual depended on domesticity: "the domestic sphere provided an always identifiable place and refuge for the individual: it signified the private domain of individuality apart from the marketplace" (1990, 3). This understanding of the domestic sphere cast interiority as fecund and capable of producing a vital, active individuality not subject to market forces. In domestic fiction, it is the consumptive who is this productive force, helping to create,

as Nina Baym argues, self-sufficient women, "who [are] deprived of the supports [they] had rightly or wrongly depended on to sustain [them] throughout life and [are] faced with the necessity of winning [their] own way in the world"(1993, 11). Indeed, as Brown asserts, what Alexis de Tocqueville wrongly interprets as American anti-communitarian being—the "individual whose 'feelings are turned in upon himself'" and "'feeling which disposes each citizen to isolate himself from the mass of his fellows and withdraw into the circle of family and friends'" (Brown 1990, 2)—was precisely the "domestic circle" from which emerged "American individualism" (3). If the very essence of American communitarianism required the domestic sphere and if that domestic sphere was imagined as being made communitarian by the influence of consumptives, then it had to remain a domain capable of producing health, rather than simply the dwelling place of a doctor's patient.

While *The Lamplighter, The Wide, Wide World*, and *Uncle Tom's Cabin* explicitly undermine physician authority, either through characterization or refusal to use medicalized ways of describing illness, none of the novels examined here makes the case against doctors' expertise better than Hannah Gardner Creamer's *Delia's Doctors*, which, unlike the other novels, positions the consumptive as curable by a non-medical professional. This chapter concludes with a case study of this novel in which a school teacher—not the parade of physicians making house calls to diagnose Delia—identifies the treatment that will cure the young woman's developing case of consumption. In Creamer's story, the consumptive is rescued from the medical authorities that would deny Delia's ability to return to vitality, resumes her rightful place in the domestic community, and moreover, becomes a constitutive element of a likewise vital nationhood. Ultimately,

these characters have special agency not because they are consumptive (and therefore available for a sacrificial death) nor in spite of their illness (signifying a privileging of spirituality that nevertheless capitulates to the French Clinical School's degenerative notion of embodiment), but because their physical, intellectual, and spiritual condition invites therapeutic engagement, thereby producing community.

Healthkeepers

With the rise of the French Clinical School came a focus on anatomical pathology, which in turn shifted agency away from patients to diseases, doctors, and medicinal therapies. That is, as lesions within the body began to acquire etiological meaning, doctors' knowledge and deployment of medicinal therapies became more important than patient action in treating and understanding disease. The unmistakable influence of the French Clinical School can be seen quite clearly in the publications of medical periodicals from the late eighteenth century to the mid-nineteenth century, especially in terms of tuberculosis. American physicians' descriptions of pulmonary consumption over the course of the first half of the nineteenth century redistribute agency in such a way as to minimize the role of the patient in favor of the disease and its treating physician. Thus, whereas Benjamin Rush, the preeminent American physician of the late eighteenth and early nineteenth centuries, depicts pulmonary consumption as a result of the combined influences and agencies of individual body, behavior, and the environment, in which all participated in the incidence and treatment of the disease, physicians by the mid 1800s would describe the disease almost exclusively in terms of the appearance of tubercles and its treatment in terms of the agencies of physicians and medicines.

From the late eighteenth-century through the early national period, the patient's actions were his or her own best defense against a disorder like pulmonary consumption. In his 1794 essay "Free Thoughts Upon the Cause and Cure of the Pulmonary Consumption," Rush positioned individualized human actors working with their inherited constitutional tendencies, their local climates and terrain, and their dietary and physical regimes to ward off or treat consumption. The influence of Rush's ideas about pulmonary consumption extended well into the nineteenth century, with the republication of this essay in 1830 in *The Boston Medical and Surgical Journal*. Drawing on the precedent of Native Indians and white European "*first settlers*" (1794, 196), Rush positions individual occupations—their chosen activities for livelihood—as central to the treatment of pulmonary consumption. He concludes, "From these facts it would seem, that the most probable method of curing consumption, is to revive in the constitution, by means of exercise or labour, that vigour which belongs to the Indians, or to mankind in their first stage of civilization" (197). Individual agency, then, whether used to pursue an invigorating occupation or to wallow in a sedentary lifestyle, becomes central to causing, preventing, and treating pulmonary consumption. More than medicinal treatments or a physician's advice or a change in climate, the patient's individual actions are crucial to the treatment of pulmonary consumption.

In contrast, beginning in the 1830s doctors began to consider how their agency and that of the patient contended with a new agency: the disease itself. From the 1830s to the 1850s, medical descriptions of pulmonary consumption become more and more focused on the morbid action within the lungs and how physicians and their patients should respond to it. In 1830, reprints of Philadelphia surgeon Joseph Parrish's essays on

pulmonary consumption reveal some lingering ties to Rush's theories for treating pulmonary consumption, but a clear shift in prioritized agencies. Whereas Rush positioned the individual's choices as the primary agent in shaping environmental effects so as to benefit health, Parrish's environment has agency over the patient: "Man is connected by a thousand different ties, moral as well as physical, which the objects around him, all of which exert a greater or less influence over his vital functions, and maintain health, or produce disease, according as they are in exact adaptation, or otherwise, to the wants of his system" (1830, 145). Although the individual is imagined as a part of a much larger system of interconnections, his or her agency is not a part of the system in which the actors that can influence the development of health or disease. In fact, the physician becomes the primary agent in treating the disease:

> The enlightened physician, therefore, looks abroad into nature; considers the various circumstances of climate, or season, or situation, in which his patients may be placed; weighs well the influence of their social relations, their private habits, their mental peculiarities; and neglects nothing which can affect their health, whether it operates immediately upon the body, or indirectly through the mind. He is thus prepared to bring in aid of the more obvious remedies numerous agents, which lie unnoticed by the common observer in the mass of daily incidents; and when he cannot by his own personal efforts, or the agency of medicine, relieve the diseased action, may so place the sufferer, with regard to all the circumstances that surround him, that every cause tends to aggravate the disease may as far as possible be avoided, and every favourable influence be adduced to alleviate or remove it. (145-146)

The physician is positioned as the source of knowledge about what might influence an individual's health; he keeps in mind not only potential physical influences but also social and mental ones, which may directly or indirectly affect the health of the individual. His choices in regards to medicinal agents will be that much more efficacious because he knows of more useful agents than the "common observer." And while even disease is constructed as active—pure action in fact: "diseased action"—the patient has

become a passive "sufferer"—the site of innumerable influences from which she must be moved by another in order to receive the most benefit.

By the 1850s, the patient has lost all agency in treatment, and disease became a battle between physicians and pathogenic processes within the body. Medical accounts of pulmonary consumption cease to see the patient as even a passive observer. As the language of pathological anatomy dominates medical accounts of pulmonary consumption, the patient, his or her environment, society, and morals no longer matter in the pursuit of health. In 1854, Samuel Lewis writes, in his treatise on the relationship between inflammation and consumption,

> if we advert to the respective sites of the tubercular deposit, and pneumonic inflammation, we observe that while tubercles are most generally found in both lungs, the signs and indications of pneumonia are *generally* limited to one lung. We further notice that the deposition of tubercles is attended with a more or less abundant deposit of the same matter in other different organs of the body; whereas, in those cases where pneumonia has existed, simple and uncombined, there have been no such morbid appearance discovered. (151)

Lewis's account of consumption limits its scope to the activity that takes place in the lungs. His interest focuses on the alteration of lung tissue under the action of pneumonia or consumption. The emphasis on the morbid activity in the lungs only underscores absence of the tubercular patient as agent; the only meaningful activity is that which occurs in the bodily organs themselves. In the French Clinical School model, then, patients become the owners of bodies that are no more than corpses in the making—a collection of degenerative processes that only a physician can perceive and treat.

Domestic fiction of the 1850s offers a strikingly different interpretation of individual agency and the pursuit of health—an interpretation that positions patients as indeed capable of undertaking the task of healing and promoting regeneration and

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vitality. In an effort to undermine the degenerative rhetoric attached to pulmonary consumption, the consumptive character is shown to retain a vitality and agency even beyond the grave. The memory of Eva gives Tom the strength to reject Simon Legree's efforts to possess him body and soul: "Something within the black man answered No*!* and, as if repeated by an invisible voice, came the words of an old prophetic scroll, as Eva had often read them to him,—'Fear not! for I have redeemed thee. I have called thee by my name. Thou art MINE!'" (Stowe [1852] 1994, 293). The echo of Eva's voice affirms Tom of his Christianity and, by extension, the self-possession faith offers in worldly domains. In *The Lamplighter*, Mrs. Sullivan come to accept her own death because she comes to "believe that [her son's] living mother might be powerless to turn him from temptation and evil; but the spirit of that mother will be mighty still, and in the thought that she, in her home beyond the skies, is ever watching around his path, and striving to lead him in the straight and narrow way, he may find a truer shield from danger, a firmer rest to his tempted soul, that she could have been while yet on earth" (Cummins [1854] 1988, 172-73). Refusing the passive role according to the consumptive by the French, authors of domestic fiction reclaim the consumptive's natural right to agency. They position the consumptive as a healer of social ills, reflecting a larger cultural interpretation of the feminine domestic as therapeutic to the national collective.

Physicians were not the only individuals at mid-century who took their role as healers seriously; laypersons also sought to promote health by creating salubrious environments. Manuals and self-help guides provided Americans with the knowledge and practices they could undertake to prevent disease in their homes. The product of many decades of collaboration and publications by both sisters on domestic economy and

maintaining family health, Beecher's and Stowe's opus *The American Woman's Home* was published in 1869 (for examples of their other work on home and health, see Beecher 1842, 1846, 1855, 1856, 1873 and Stowe 1865). Beecher and Stowe stressed the sacred and scientific calling of domestic work: "the honor and duties of the family state are not duly appreciated, that women are not trained for these duties as men are trained for their trades and professions" (2002, 19). Often noted for its inclusion of diagrams of ideal kitchen designs, *The American Woman's Home* also includes reproductions of microscopic images of lungs and hearts, alongside detailed descriptions of the process of respiration in the body. To average women, then, Beecher and Stowe accorded not only the agency to ensure the health and well-being of their family members, but also the expertise, garnered from both personal experience and the study of works like *The American Woman's Home*.

By focusing in particular on the relationship between the quality of the air and individual health, Beecher and Stowe position women as both potential patients and their own doctors. They explain that pulmonary consumption afflicts many in the United States because of poor ventilation: the inability to breathe in pure air—that is to say, air laden with oxygen—forbids the body to exhale its waste product carbonic acid, which slowly poisons the body. This poison then weakens the constitution of the individual, particularly the lungs. Over time, pulmonary consumption develops. Such poisoning of the body can be avoided with a precise understanding of how the lungs work as a conveyer of oxygen to the rest of the body: "By calculating the number of air cells in a small portion of the lungs, under a microscope, it is ascertained that there are no less than eighteen million of these wonderful little purifiers and feeders of the body. By their

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ceaseless ministries, every grown person receives, each day, thirty-three hogsheads of air into the lungs to nourish and vitalize every part of the body, and also to carry off its impurities" (43). This description informs readers about anatomical facts as revealed under the microscope and help to position healing as housekeepers' domain. The air cells purify and feed the body, which Beecher and Stowe see as ministering. And indeed, the ministering activities of the cells are the same as the activity of the domestic health- and housekeeper in her own home: actively working to remove impurities and create a clean and orderly home. While Beecher's and Stowe's text does not guarantee absolute health for everyone, it does promise the ability of the housekeeper and healthkeeper to retain therapeutic agency—both at the level of physical and communal health.

Stowe dramatizes the importance of these principles in *Uncle Tom's Cabin* by showing the far-reaching negative consequences when homes lack a healthkeeper. Little Eva's case of pulmonary consumption serves as a reminder of the dangerous consequences for society when domestic spaces suffer from neglect. Although Eva's case of pulmonary consumption appears to be a metaphor for her overwhelming piety, it in fact says more about the unhealthy environment in which she lives. Her father St. Augustine suffers from "a mind diseased" ([1852] 1994, 133) after the loss of his one true love, and her mother Marie, who developed "a selfishness the more hopeless, from its quiet obtuseness, its utter ignorance of any claims but her own," (134) is also a sickly woman leading a "life of constant inaction, bodily and mental" and "whose time was divided among a variety of fanciful diseases, and who considered herself, in every sense, the most ill-used and suffering person in existence" (135). In addition to being surrounded by invalid parents, Eva lives in a house that certainly fails to meet the

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requirements of good ventilation and cleanliness that are the standard of Miss Ophelia's

New England home and the homes described in *The American Woman's Home*. The

house was "built in the Moorish fashion,—a square building enclosing a court-yard" and

the "galleries that surrounded the court were festooned with a curtain of some kind of

Moorish stuff, and could be drawn down at pleasure, to exclude the beams of the sun. On

the whole, the appearance of the place was luxurious and romantic" (141). In short, the

St. Clare home is structured to seclude the individual from the outside world and it is

cultivated toward pleasuring the animal senses. Her mother spends her days "plunged

languidly into the depths of a voluminous and pillowy lounge" breathing not fresh air, but

smelling salts from "an elegant cut-glass vinaigrette" (149). And the kitchen, where

Dinah "smoked on in sublime tranquility" is the epitome of disorder: "The more drawers

and closets there were, the more hiding-holes could Dinah make for the accommodation

of old rags, hair-combs, old shoes, ribbons, cast-off artificial flowers, and other articles of

vertu" (181). This is all in contrast to Miss Ophelia's home a "large farm-house, with its

clean-swept grassy yard…. Nothing lost, or out of order" and an interior of "wide, clean

rooms," where the work is already "*done up*" (135). The message of *Uncle Tom's Cabin*

is, of course, that such homes as are capable of promoting individual and societal health

cannot be run with slave labor. The institution of slavery instead produces mothers like

Marie St. Clare, who see no one as their responsibility and in their selfishness let the

health of their home's inhabitants suffer. A passive sufferer of her own imagined

ailments, Marie St. Clare represents the dangers to the larger collective when individuals

lose their agency and seek through introspection not the divine but signs of internal

pathological processes. Unlike physicians trained to look only for pathological processes,

healthkeepers are individuals capable of intervening on the physiological, environmental, intellectual, and moral levels of existence, and when they are replaced with doctors capable of treating physical ills only, society suffers degeneration.

Consumptive Communitarians

Paradoxically, characters suffering from pulmonary consumption operate as significant healthkeepers. Many believed in this time period that consumption was a hereditary disease, often exacerbated by poor living conditions. It is possible, then, that readers would have assumed that characters like Little Eva, Mrs. Sullivan, and Alice Humphreys were suffering from a disorder that, despite having done everything possible to create a healthful environment, still had fatal results. More importantly, though, these characters represent a refusal to become passive victims of their circumstances. Despite their own illnesses, these characters sought to produce health for others at the level of community. They emphasize that the physically well contend with a far greater problem than the sick: the state of their earthly collectivities. While the dying consumptive knows that she will ascend to heaven, she still undertakes worldly concerns as her responsibility, and as a result, she seeks to minister to those around her in order to assure a healthful communal environment—one that a successor will have to take charge of after her death. Even if her body suffers from an internal degeneration, the consumptive helps to demonstrate how the bodies around her—both human and politic—are not of a necessity similarly afflicted and can in fact be invigorated by effecting the production of communal bonds.

The inability to cure the consumptive in these novels only underscores the necessity of a healing intervention at the level of the collective. These novels mobilize incurability to resist the French School's prioritization of the individual body since such a paradigm forecloses the possibility of focusing on the body politic. For Ellen Montgomery, the young protagonist of *The Wide, Wide World* who readers meet watching others through a window day after day, it is imperative that she join society, rather than remaining forever at the outskirts (Warner [1850] 1987, 17). Her mother must go abroad for her health (a common treatment of consumptives), even though her doctor wonders "if she'll live till she gets to the other side!"—a departure and eventual death that will force Ellen to go live with her aunt Fortune (19). It is on her aunt's farm that Eva will learn to establish connections with others and belong to a collective. Later, the death of her mentor Alice Humphreys, who, bearing all the classic marks of a consumptive, "was very thin, and seemed to want her old strength, whether riding, or walking, or, any other exertion; [and had] the bright spots of colour...just like what [Ellen's] mother's cheeks used to wear in her last illness" positions Ellen to not simply belong to a larger community, but to be instrumental in its creation (472). Alice requests that Ellen take her place in the Humphreys family: "You must come here and take my place, and take care of those I leave behind; will you?—and they will take care of you" (432). Ellen thus becomes Alice's successor, the one responsible for maintaining the family after Alice is gone and, as a result, in a position also to keep the national collective functioning by helping to create a home within which the American democratic individual can flourish.

Community, these novels suggest, is like health in that it requires work and active engagement of individual members in order to exist. Even if the protagonists of domestic

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novels must find their own way in the world, the novels themselves show that self-dependence should exist within a larger collective. *Uncle Tom's Cabin*, for instance, underscores how no amount of independence and morality on the part of Eva alone will produce the kinds of democratic societies espoused in the *Constitution*. Speaking to her father St. Clare, Eva exhorts him to free his slaves: "You want me to live so happy, and never to have any pain, —never suffer anything, —not even hear a sad story, when other poor creatures have nothing but pain and sorrow, all their lives; —it seems selfish....Papa, isn't there any way to have all slaves made free?" (Stowe [1852] 1994, 241). Eva's abolitionist sentiments here allude to the way in which too much independence—what she calls selfishness—harms the community by causing the suffering of individuals who make a part of democratic society. Moreover, St. Clare's passivity and particularly his lack of urgency in regards to freeing his own slaves represent how an American society with slavery undermines and deconstructs itself. *Uncle Tom's Cabin* illustrates repeatedly how the institution of slavery causes domestic spaces—what Gillian Brown identifies as the condition of possibility for democratic liberal subjectivity—to be broken up and destroyed. In the case of the St. Clare family, their domestic community is destroyed by the death of St. Clare, which results in the sale of his slaves. The novel emphasizes how slavery creates spurious domesticity in which all the key elements are there—a mother, a father, dependents, etc.—but the kinds of self-possession required to create democratic society become impossible for both the enslaved and the slaveholders dependent on them.

Despite difficulty in achieving it, truly equitable community remains what novels like *Uncle Tom's Cabin* and others nevertheless aim to achieve. Its creation can begin, in fact, with just one relationship. In Stowe's novel, Eva's death fails to inspire a plantation

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owner like St. Clare to make a major sociopolitical statement by freeing his slaves, and thereby potentially effecting more widespread change, but it does inspire Eva's cousin Miss Ophelia to overcome her racial prejudices. Although an abolitionist herself, Miss Ophelia cannot bring herself to love—or even touch—black-skinned peoples: "'I've always had a prejudice against negroes,' said Miss Ophelia, 'and it's a fact, I never could bear to have that child [Topsy] touch me" (246). But after Eva's death, Miss Ophelia proves to be Eva's most successful pupil and ready to fulfill her role in holding the community together: "'Topsy, you poor child,' she said, as she led her into her room, 'don't give up! *I* can love you, though I am not like that dear little child. I hope I've learnt something of the love of Christ from her. I can love you; I do, and I'll try to help you to grow up into a good Christian girl" (259). Despite enormous odds, Eva's influence transforms some individuals of the St. Clare household, producing in them the seeds of an egalitarian community, one build across different races and ages. Once established, such communal bonds tend to flourish.

In novels not concerned with the corruptions of a slave society, opportunities for therapeutic intervention reveal expansive networks of interpersonal relationships that make up community. In *The Lamplighter*, for instance, the orphan Gerty, suffering from inadequate care by a landlady named Nan Grant (in whose house Gerty's mother had died), is quite sick when a local lamplighter Trueman Flint takes her home, nurses her back to health, and ultimately adopts her. This act of care more importantly inserts Gerty within a larger community for which, in adulthood, she will take responsibility. Gerty, suffering from "a high fever, her head and limbs aching, and with every symptom of severe illness," (Cummins [1854] 1988, 16) eventually "grew delirious, and for some

days had no knowledge how she was taken care of" (17). As it turns out, the neighboring widow Miss Sullivan has been watching her while Trueman was out, and Miss Graham, a blind philanthropist, has sends along a "parcel of *arrer*root" that she says is "excellent in sickness" (18) and commissions Miss Sullivan to sew for Gerty two new suits of clothes (19). *The Lamplighter* thus underscores that collectives take shape in response to another individual's need of care. In other words, Nan Grant's neglect of Gerty reflects anti-communitarian sentiments and actions—not, importantly, a market-driven collective's rejection of a poor girl. On the other hand, Trueman, Miss Sullivan, and Miss Graham, in rescuing Gerty from a severe illness and abject poverty, promote Gerty's personal health and produce a vital community. By welcoming Gerty into their homes, these characters provide her with the self-possession to make her way in the world—an act of benevolence she returns later in the story. Trueman suffers a stroke, which "struck down the robust man, and left him feeble as a child" (87). Gerty takes over the role of healthkeeper: "During four or five years that he has cherished the frail blossom, she has been gaining strength for the time when *he* should be the leaning, *she* the sustaining power; and when the time came,—and it came full soon,—she was ready to respond to the call...from morning till night, the faithful little nurse and housekeeper labors untiringly in the service of her first, her best friend" (88). Community thus finds its own renewal in its amelioration of the condition of the sick.

In contrast, then, to scholarly readings of representations of sick women that cast them as alternatively symptomatic of patriarchal ideologies and forces of subversion reclaiming women's subjectivity, this reading emphasizes how figurative illness operates to precipitate communal formation (on the use of medical knowledge to define women, in

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contrast to men, as ill, see Gilbert and Gubar 1979, Smith-Rosenberg 1985, Ehrenreich

and English 1973, Showalter 1985, and Poovey 1988; on illness a form of subversion, see

Showalter 1985 and Treichler 1984; on mental illness as a form of feminine power, see

Chesler 1972, Cixous 1983, Irigaray 1985, Douglas 1973, and Tompkins 1985). In such

scenarios, women are invalid in none of the senses discussed by Diane Price Herndl: "a

lack of power as well as a tendency toward illness....[and] the not-valid" (1993, 1).

Indeed, consumptive characters demonstrate how women in general do not tend toward

illness since their successors exemplify health. Moreover, the consumptives and the

women they mentor in moral principles exert tremendous influence over those around

them. Rather than being "not-valid," then, they get represented as the only individuals

with the power to affirm the existence of the larger collective. While the consumptive

characters in these three novels do not survive their own illnesses, they play a

fundamental role in helping individuals to overcome an illness of isolation and enter into

a state of health that takes the form of community.

The Case of Delia's Doctors

Despite the generic markers it shares with canonical sentimental novels from the

early 1850s, *Delia's Doctors* diverges from its pattern. In novels like *The Lamplighter*,

The Wide, Wide World, and *Uncle Tom's Cabin*, the moral guide character is often the

one suffering and dying from pulmonary consumption. But in Creamer's story, the

spiritually and intellectually lackluster Delia—instead of her foil and moral guide

Adelaide Wilmot—develops an increasingly severe case of what is undoubtedly

pulmonary consumption. By the penultimate chapter of *Delia's Doctors*, Delia presents

with many of its symptoms. She has a "pale face […] hollow eyes," and transparent

hands, and she experiences an irregular pulse (Creamer [1852] 2003, 216-217). Also,

Adelaide points out that Delia's poor posture is damaging her lungs: "Throw your

shoulders back, that your lungs may not suffer compression" (227). And she locates one

source of Delia's headaches as "an imperfectly ventilated apartment" (220). But Delia

does not perish from her condition, instead deciding to obey Adelaide's "four simple

maxims" for living a healthy life—"'Rise early; keep the back straight; the head cool; the

feet warm'" (222)—and aspires to more than satisfying selfish desires: "'I will try to be

well,' she observed, 'that I may fill some noble sphere'" (233). Like other consumptive

characters, Delia's independence serves a larger social good. Importantly, though, in

positioning Delia as a consumptive capable of healing herself, Creamer explicitly situates

the burgeoning cultural authority of medical professionals as hindering the formation of

healthful communities.

Whereas in texts of Stowe, Cummins, and Warner lingers an ambivalence in

regards to doctors' expertise, allowing it some place within the larger collective,

Creamer's novel identifies—through resistance—as problematic the increasingly

medicalized passivity of consumptive patients. In her novel, community and health

become even more tightly linked and therefore in need of explicit protection from

encroaching empirical narratives that would transform the consumptive into patient rather

than healthkeeper. Without the need for non-medical practitioners' therapeutic

engagement, the novel insinuates, community could not exist at all. In *Delia's Doctors*,

the rejection of the French Clinical School's interpretation as the body as degenerative

comes in the form of a commitment to the ideas of George Combe, renowned

phrenologist, who also wrote a more general treatise on health called *The Constitution of Man*. Cited in the novel as the authority behind Adelaide's four simple maxims and the concept of "laws of life," Combe's book positions Christian faith as inherently material because, as phrenology argued, the brain was the organ of the mind. This material aspect of faith makes it subject to the laws laid out for the functioning of God's creation. Such a system positions piety—a function of the intellectual and moral faculties—as capable of over- or under-use, and as a result, can be a source of disease itself—and often was associated with the physical development of pulmonary consumption. Because an excess of piety was treated as a cause of pulmonary consumption and in fact a form of selfishness, pulmonary consumption could not be available as a metaphor for religious sentiment. In *Delia's Doctors* pulmonary consumption functions, therefore, not as a metaphor for excessive passion (particularly not a pious variety), and instead, it operates as another domain suitable for the energies of a healthkeeper, thus bringing under her auspices professional medical knowledge in addition to personal and collective health.

 Delia's Doctors offers an alternative model to individual agency, suggesting that even in an age of medical science that is becoming more reliant on anatomical pathology the patient can still positively participate in his or her treatment. As Adelaide points out to Delia, her condition is not the result of a diseased organ. She thus recognizes a certain kind of efficacy to be drawn from anatomical pathological perspectives when trying to find a means of understanding disease. But Adelaide marginalizes this paradigm in favor of her own ideas about Delia's particular illness, which she does not position as relevant to what anatomical pathology might have to say about it. Instead, she repositions a physical illness—like a diseased lung—within a theory of illness that encompasses the

body, the world in which it lives, and the morality that guides individual action. The fictional Adelaide references Combe's outline of three sets of laws established for the well-being of mankind. This model reestablishes individual agency as central to maintaining physical and moral health. Combe's ideas, then, form the basis of what sentimental novelists while define as the source of Christian agency.

In *The Constitution of Man*, Combe outlines three types of natural laws set out by God for ordering the world and humankind's relationship to it. "We are," he writes, "physical, organic, and moral beings, acting under the sanction of general laws" ([1834] 1974, viii). The three types of laws corresponds to these aspects of being: physical laws govern objects external to humans (e.g. gravitation), organic laws describe the uses and capabilities of the human body, those shared with animals, what he refers to as the animal propensities or faculties, and the moral and intellectual laws, which regulate those faculties singular to humans and that, according to Combe, should be used to do the most good for the most people (3-13). Each set of laws is in a relation to the others, meaning that neglect of one may have effects in the ability to follow the other: "our moral sentiments desire universal happiness. If the physical and organic laws are constituted in harmony with them, it ought to follow that the natural laws, when obeyed, conduce to the happiness of moral and intelligent beings, who are called on to observe them; and that the evil consequences or punishment resulting from disobedience, are calculated to enforce stricter attention and obedience to the laws, that these beings may escape from the miseries of infringement, and return to the advantages of observance" (10-11). Harmony, Combe concludes, occurs when all three sets of laws are being maintained, with moral and intellectual laws regulating organic laws. A healthy, moral person is one who is

knowledgeable of physical laws, meets organic needs in moderation, and exercises both body and mind. In this model, the individual's actions remain of the highest importance in determining the physical and moral health of the individual. Only the individual can create harmony for him or herself and those around him or her by actively choosing to become informed and behave in a particular way. As Combe asserts, knowledge of anatomy, physiology, chemistry, and natural philosophy will help an individual develop the proper instincts for obeying organic laws and understanding their relationship to objects in the external world and to the physical laws. This knowledge will serve also to meet the needs set out by the intellectual and moral laws by so exercising the brain and exerting the moral faculties. Therefore, when Adelaide offers Delia a diagnosis and treatment plan that asks her to stop breaking organic and moral/intellectual laws, she in fact positions pulmonary consumption as the means for locating the divine truth of Combe's system.

Because Delia's consumption is described as being the direct result of impiety, the novel can make the case both for the authority of Combe's ideas and for the independent treatment undertaken by Delia under the instruction of Adelaide. Delia's indulgence in rich foods, her lack of interest in exercising her body and mind, and her tendency to languish at home in a rocking chair next to the fire are the selfish manifestations of turning her face from God. As Adelaide points out, to disobey these physical laws, what she describes as the four maxims, is a sin on par with breaking commandments: "By disregarding the rules discovered for the preservation of health, they disobey the Author of all law, as much as if they slighted the commands of the decalogue" (Creamer [1852] 2003, 223). In *Delia's Doctors*, then, we see a significant

shift from the standard interpretation of consumption as metaphor for piety and moral exemplar. Rather than undergoing a virtuous sacrifice or a redemptive death, Delia's test of moral character comes through a renewed commitment to life and to physical health (40). Delia's conversion rests on her decision to follow Adelaide's four maxims, and as such, conversion in *Delia's Doctors* is depicted as an absolute commingling of the spiritual and the physical. When Delia decides to throw her shoulders back so as to not compress her lungs, when she chooses to get up early in the morning instead of lying in bed, when she sits in a straight-backed chair instead of a rocking chair, she expresses her faith and protects her health—and in fact one is also the other: to protect her health is to express her faith and to express her faith is to protect her health. A consumptive character like Delia and her conversion's conflation of physical and spiritual health mark out a kind of divinity found in the physical world. Rather than the opposition assumed between the celestial and worldly spheres, this novel points a material experience of the divine in the course of temporal life that individuals can access after conversion. In the case of Delia, she begins to access this material divinity through her body and her renewed interest in keeping it healthy. *Delia's Doctors* thus repositions pulmonary consumption as an illness best understood by those versed living moral life intellectually and physically, rather than as the domain of those studying merely the physiological subset of what they saw as God's creation. It is this association with divinity and the link reasserting healing as a divine act that further undergirds the consumptive's role as communitarian, rather than as a threat to public health.

Understanding simply pathological processes, *Delia's Doctors* shows, proves ineffectual in promoting real change, and therefore, healing remains the priority. In

actively pursuing her own health, Delia also pursues the health of the community. By

choosing to take active control of her own health (rather than waiting passively for a

physician to determine what medicine she should take), Delia opens up for herself the

possibility of doing good for others. Moreover, Adelaide shows her that good health, a

long life, and the ability to do promote the well-being of others affects the quality of

one's future heavenly experience. To make the point, Adelaide explains why she would

not want to die young:

> Unnumbered years will be spent in heaven. Every moment will afford
> happiness. This life, beautiful as it is, can not be compared to that. But,
> were I immediately transported to the celestial world, my happiness would
> be less intense, than if I were to remain on earth till the period of old age. I
> have now reached maturity. I am beginning to have the full exercise of all
> my powers. If I live fifty years longer, I can accomplish a vast deal of
> good, the remembrance of which will be a source of happiness even in
> heaven. What can not be done in fifty years, by one who is determined to
> employ all her time and influence for the promotion of the true and the
> right! (216)

Even though Adelaide distinguishes between "the celestial world" and her life on earth,

she presents the lives lived in each as intimately related. She explains that "every

moment" in heaven is a source of happiness, but she emphasizes that the memory of fifty

years spent doing good will also be a source of heavenly happiness. Just as Beecher and

Stowe envisioned interconnections and interdependencies between bodily design,

domestic economy, and the realization of divine plans on earth, Adelaide believes that

divinity—traditionally understood as having its home in the celestial sphere—has one of

its sources in the material world: it is located in her actions as a living, breathing human

being. Delia, too, is enlivened by the possibility: "Delia's eyes were now bright with

anticipation. 'I will try to be well,' she observed" (233). Conversion—often understood

as a transformation from one state to another—can in the case of these novels be seen as

a kind of return to the laws originally established to run God's creation. *Delia's Doctors* shows readers how to be both humble before God and active in faith. Her consumption teaches her to not wait passively for death and heaven; rather, it gives her the means to assert control over her life and in the process come to embrace Christianity that will be rewarded on earth and in heaven. The earthly reward takes the form of a collective strengthened by the work of its healthkeepers who maintain not only their own health, but also the health of others.

In contrast, then, to other novels featuring consumptive characters, *Delia's Doctors* equates the literal health of individuals with the health of the community. Whereas in *The Lamplighter*, *The Wide, Wide World*, and *Uncle Tom's Cabin* the incurability of the consumptive sought to highlight the greater problem at the level of the collective and its ability to fashion itself, *Delia's Doctors*, having replaced the French Clinical School's interpretation of the body with Combe's, is able to circumvent the notion of the fragile body not by way of non-corporeal forms agency—usually in the form of memory—but through the belief that the corporeal and the divine were two facets of the same phenomenon. *Delia's Doctors* offers, as a result, an important recasting of the message of other domestic novels. Instead of assuming that the next generation of healthkeepers would rescue the nation by renewing the collective with even stronger bonds, Creamer's novel sees domestic individualism—and democratic society as a whole reinvigorating itself in the immediate present. A rather hopeful message at mid-century, when the nation appeared to be fracturing over the issue of slavery. Stowe's vision of the difficult path that lay ahead of the country's healthkeepers was perhaps more realistic:

> "It's jest no use tryin' to keep Miss Eva here," [Tom] said to Mammy, whom he met a moment after. "She's got the Lord's mark in her forehead."
>
> "Ah, yes, yes," said Mammy, raising her hands; "I've allers said so. She wasn't never like a child that's to live—there was allers something deep in her eyes. I've told Missis so, many the time; it's a comin' true, —we all sees it, —dear, little, blessed lamb!" ([1852] 1994, 240).

The voices of the enslaved in this moment speak to the end of an era—one guided by the moral and scientific codes of the healthkeeper and housekeeper. In this regard, Eva's death, rather than being a sacrifice, signifies a much greater loss: the end of a time in which it was possible to imagine diverse individuals, of many races, religions, classes, and genders, as constitutive of American democratic society. It is doubtful that Stowe, who, as we know, continued to publish about healthkeepers well after the publication of *Uncle Tom's Cabin* and the Civil War, meant for this passage to mark the passage of one era in which therapeutic bonds undergirded collective self-fashioning. Nevertheless, it is a nearly prophetic moment in the novel when Tom and Mammy agree that Eva was "never like a child that's to live." Neither would the kind of inclusive nationhood she represented survive the end of the nineteenth century. As tuberculosis was recognized as a communicable disorder and the germ theory of disease that explained its transmission gained credibility, so too did forms of national belonging solidify, grounded in the exclusion or eradication of those symbolically linked with contagious illnesses.

Conclusion

For all that F.O. Matthiessen did not recognize it, *The Wide, Wide World, Delia's Doctors*, *Uncle Tom's Cabin*, and *The Lamplighter* belonged to what he identified as the American Renaissance, the period from 1850 to 1855 during which Ralph Waldo

Emerson, Nathaniel Hawthorne, Henry David Thoreau, and Herman Melville published

works that are held up as exemplars of the young nation's literature. Indeed, as David S.

Reynolds emphasizes in *Beneath the American Renaissance*, these authors believed

themselves to be influenced by the ideas and popular stories that surrounded them; they

were not, in other words, geniuses toiling in isolation. He explains, "Emerson

perceptively noted that more influential than sources is the temper of the age, which

becomes a cultural determinant of the themes and style of great literature. As he writes in

Representative Men: "[T]he ideas of the time are in the air, and infect all who breathe

it....We learn from our contemporaries what they know without effort, and almost

through the pores of our skin.' Literary genius, in Emerson's view, lies in 'being

altogether receptive; in letting the world do all, and suffering the spirit of the hour to pass

unobstructed through the mind.' The present book describes the socioliterary 'air'

surrounding the major writers and explores the process by which this air seeped through

the pores of their skin" (1988, 5-6). The recovery work of Nina Baym and other has

shown that the domestic novels discussed in this chapter were more than just

"socioliterary 'air'" for other writers but were works of significance in their own right,

resulting from "suffering the spirit of the hour to pass unobstructed through the mind."

Granted, each of these writers came to different conclusions about what stories should be

told—and what form they should take—but all contributed to a body of works that spoke

to the state of the American nation at mid-century.

That Emerson would cast this literary corpus as infectious is not surprising—

throughout, this project has drawn out how figures of contagion likewise provided the

means through with to understand collective belonging. What is interesting in Emerson's

choice of metaphor, though, is what it suggests about the American Renaissance.

Emerson's figuration invokes the medical and literary discourses around pulmonary

consumption and, taking the side of Stowe and the other domestic novelists, underscores

how a body of literature is invigorated by the salubrious "air" that surrounds it. Thus,

rather than seeing the extraordinary literary output of the early 1850s as, in Matthiessen's

assessment, the "fulfillment to the potentialities freed by the Revolution, to provide a

culture commensurate with America's political opportunity," Emerson decisively

positions mid-nineteenth century literature within a creative tradition that extended back

to even before the Revolution (1968, xv). Just as Creamer, Cummins, Stowe, and Warner

retained established ideas about pulmonary consumption, its aggravation or amelioration

by the surrounding environment, and the patient's agency in curative measures —all

leveraged to make a case that, no matter what the French were saying about the fragility

of bodies, the American national body politic remained as dynamic and diverse as it had

been since the Revolution—so, too, did Emerson, when trying to describe that nation's

literature, hold on to a vision of it as likewise inescapably influenced—and made stronger

as a result—by all kinds of ideas. Emerson's notion of what constituted American

literature not only concurred with the view of his contemporaries writing domestic

novels, but also hearkened back to the earliest expressions of American national self-

expression.

I would like to conclude, then, by suggesting the possibility that the American

Renaissance was a rebirth only in the sense of a re-entrenchment—an effort to hang onto

something that was slipping away. I am not trying to dispute the fact that these pieces of

literature may very well represent some of the best work of American authors. Rather I'm

questioning their status in the development of an American national self-consciousness. Matthiessen argues, "It may not seem precisely accurate to refer to our mid-nineteenth century as *re-birth*; but that was how the writers themselves judged it. Not as a re-birth of values that had existed previously in America, but as America's way of producing a renaissance, by coming to its first maturity and affirming its rightful heritage in the whole expanse of art and culture" (vii). The works discussed in this chapter, in light of their responses to the epistemological consequences of ideas regarding embodiment, do not evince a sense of "first maturity" or seem to be claiming a "rightful heritage." Instead, they cling to principles of national constitution, at the levels of embodiment and literariness, that were laid out decades before.

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