

Writing Bodies: Gender and Medicine in the Nineteenth Century

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<1>With the recent rise in interest surrounding the medical humanities, the interdisciplinary role that medicine plays in cultural constructions is becoming ever more central. It therefore gives us great pleasure to introduce a special issue of *Nineteenth-Century Gender Studies* that focuses on the interaction between gender and medicine. The subject itself has been the focus of a great deal of critical attention in the last fifteen years; canonical texts such as Catherine Judd's *Bedside Seductions: Nursing and the Victorian Imagination, 1830-1880* (1998), Kristine Swenson's *Medical Women and Victorian Fiction* (2005), Miriam Bailin's *The Sickroom in Victorian Fiction: The Art of Being Ill* (2007), and Tabitha Sparks's *The Doctor in the Victorian Novel: Family Practices* (2009) have explored the diverse ways that medicine and gender interacted in the Victorian cultural imagination. However, critical discussion of gender and medicine in the nineteenth century has often relied on a dichotomy in which 'male medical discourse' (Vertinsky, *Eternally Wounded Women*) stands in opposition to the image of the female patient. Furthermore, most feminist research on gender and medicine in the nineteenth century has been done on the medicalization or, in the *fin de siècle*, "hysterization" of women.

<2>This is precisely the dichotomy which this special issue seeks to explore and problematize by reformulating its approach to gender and medicine. Medical technologies, institutionalisation, and more complex approaches to the practitioner/patient relationship have tended to be excluded from discussions of gender and embodiment in the nineteenth century, but they are essential to a comprehensive exploration of medicine as it evolved throughout the century. The emergence of modern clinical medicine throughout the eighteenth century and the subsequent privileging of empiricism and positivist science within the medical sphere meant that by the nineteenth century producing and legitimating medical authority and professionalism became increasingly significant (Foucault xi-xii; Porter 144-145; Dingwall, Rafferty, and Webster 21-22). This had a marked impact on the gender politics in the medical profession, which in the nineteenth century reworked and reformulated the roles of doctors, nurses, and patients (not to mention the nature of doctoring, nursing, and patienthood).

<3>This shift is in part colourfully captured in William Ernest Henley's 1877 collection of poetry, *In Hospital*. The two poems "Staff-Nurse: Old Style" (13) and "Staff-Nurse: New Style" (15) contrasts the image of the Dickensian old style nurse – a "slovenly, drunken battle-axe" (Porter 145) – with the Florence Nightingale new style nurse who "gives at need (as one who understands) / Draught, counsel, diagnosis, exhortation" (Henley 15). The professionalization of nursing was closely linked with female emancipation: while these links

may not have been made explicit until the 1890s with the figure of the New Woman nurse, a little-known text by Nightingale herself, the 1852 fragment “Cassandra” which was never published during her lifetime, criticises a “conventional” society which suppresses women’s “passion, intellect, [and] moral activity” (396). Nightingale posits a professional occupation, one that demands both study and training, as an essential part of a woman’s life as much as it would be any man’s: “Women long for an education to teach them *to teach*, to teach them the laws of the human mind and how to apply them – and knowing how imperfect, in the state of the world, such an education must be, they long for experience, not patch-work experience, but experience followed up and systematised” (406).

<4>The importance of professionalization would only increase as women began to enter the medical profession as doctors. Arthur Conan Doyle’s short story “The Doctors of Hoyland” demonstrates the degree to which professionalism and medical technologies became key to constructions of both masculinity and femininity in the figure of the physician throughout the late nineteenth century: the pedantry and ambition of the established Dr. James Ripley, who “prided himself on being able at a moment’s notice to rattle off the seven ramifications of some obscure artery” (296) is pitted against the superior “elaborate instruments” and “ponderous volumes” (300) of his rival Dr. Verrinder Smith, who pairs these professional hallmarks with “two or three parasols and a lady’s sun bonnet” (299). The engagement with modern medical science and technologies was crucial to the recognition of the female doctor as bearing legitimate authority and skill; at the same time, other of Doyle’s medical tales, notably “Behind the Times”, demonstrate that constructions of masculinity in medical men were no less open to fluidity with regards to gendered traits. The aged Dr. Winter’s out-of-date sympathetic approaches to medicine are mocked at length by his protégés, and, crucially, explicitly feminized: “The sight of disease affects him as dust does a careful housewife” (6). Yet it is precisely this “soothing”, feminine frame of mind to which both the young narrator physician and his colleague turn in their own illness, as the “modern instruments”, “cold, critical attitude” and “tests and tappings” (7-8) of the modern medical man become repugnant.

<5>Nineteenth-century fiction, then, helps illustrate the way in which constructions of gender both influenced and were influenced by the evolving clinical reality of modern medicine. Perhaps this speaks to the notably literary perspective of many of the articles in this issue, and indeed to an equally literary response to this special issue more generally. Each article incorporates, to some extent, a literary approach, and thereby adds color and complexity to what can only be described as the vast and permutable landscape of gender as it relates to nineteenth-century medicine. Helen Williams offers an engaging insight into women’s relationship with alternative forms of medical care, an often overlooked but undoubtedly essential part of nineteenth-century healthcare. By comparing contextual sources including medical case reports, personal correspondence, and even household recipe books with Wilkie Collins’s 1872 novel *Poor Miss Finch*, Williams offers a window into a compelling alternate history of women and medicine that resists the narrative of oppression which is undoubtedly more common to many historians of medicine and gender. Exploring communities of women who demonstrate an active interest in, and appropriation of, medical skills, Williams’s article discusses the way in which Collins’s novel negotiates knowledge and ownership of the female body and subverts the trope of the female body as medical spectacle.

<6>Similar questions of authority and authorship are raised by Joanne Townsend in “‘Unreliable Observations’: Medical Practitioners and Venereal Disease Patient Narratives in the Nineteenth Century”. Interrogating the narrative authority of the medical case history, Townsend reveals the extent to which social, sexual, and moral expectations of the mid-nineteenth century influenced the translation of the venereal disease patient’s story of infection, transmission, and transgression. While adopting a more traditionally historicist approach, Townsend likewise emphasises the significance of the literary elements of medical case histories, revealing an active process of reading and interpretation, supplemented by a more insidious method of fictive construction, embedded in the supposedly dispassionate and objective reports.

<7>Questions of transgression and transmission are likewise essential to Abigail Boucher’s exploration of fertility and masculinity in G. W. M. Reynolds’s 1850’s serial, *The Mysteries of the Court of London*. Boucher considers Reynolds’s use of feminization and emasculation in his construction of three infertile aristocrats as a method of impugning the aristocratic system itself. The article demonstrates that Reynolds makes use of contemporary medical values regarding not only gender but also reproduction to alternatively neuter male characters of definitively masculine traits or imbue them with feminine ones. Merging politics, medicine, and gender, Boucher explores mid-nineteenth century attitudes towards decadence and deviance both in the social and the sexual realms.

<8>The manipulation of traditional gender roles for subversive purposes which Boucher discusses in Reynolds’s 1850 serial is also significant in Christine Crockett’s “Medical Gothic and Narrative Transvestism in *Zofloya*”. Although published in 1806, nearly fifty years before *The Mysteries of the Court of London*, Charlotte Dacre’s Gothic novel presents an even more subversive portrait of gender transgression. As Crockett demonstrates, the confluence of both gender and professional transvestism in *Zofloya* challenges the authority of early nineteenth-century medical orthodoxy. Positing *Zofloya* as a medical Gothic text, a hybrid narrative that models a pseudo-empirical style and structure modeled after medical texts for the very Gothic end of titillating and entertaining readers, Crockett considers the novel’s form in light of the still fragile authority of the medical profession in the early nineteenth century. This manipulation of medical discourse is directly linked to the gender transvestism of the novel’s protagonist, Victoria, revealing the performative nature not only of gender, but also of the medical profession.

<9>From criticising the authority of a highly masculine medical profession, the final article in this issue moves to considering the interaction between two equally dominatory institutions: medicine and marriage. Julia Fuller’s “Nursing and the Marriageability of Unconventional Heroines: The Marriage Plot Rewritten in *The Tenant of Wildfell Hall* and *Diana of the Crossways*” assesses nursing, most commonly read in Victorian fiction as an indicator of angelic femininity, as a mechanism which can be used to subvert the traditional marriage plot’s culmination in the happy first (presumably only) marriage. Examining two novels from different points in the nineteenth century, Anne Brontë’s *The Tenant of Wildfell Hall* and George Meredith’s *Diana of the Crossways* – both of which present the second marriage as the right one for their transgressive heroines – Fuller argues that nursing functions in these texts as a narrative device which can intercede to alter the marriage plot. Going further, Fuller unites scholarship

focusing on the sickroom and female friendship to explore the way that these novels make use of nursing to comment on the state of marriage itself.

<10>In identifying the importance of reading nursing into the nineteenth-century marriage plot, Fuller's article nicely articulates one of the primary aims of this issue: to build upon the well-established conversations about medicine and gender that focus on the role of women in the medical sphere, and branch out to identify a wider range of circumstances and contexts in which medicine and gender interacted throughout the century. Rather than focusing on the role of women in the medical sphere, the articles in this issue expand their approach, exploring masculinity, sexuality, authorship and authority in an effort to understand the way that notions of gender influence medical narratives just as medical narratives influence constructions of gender. Perhaps more importantly, each of these articles attempts to open the framework of the medical field, acknowledging yet moving beyond the clinic and the case report to uncover the diverse ways that this mutually influential dynamic impacted the social and political reality throughout the nineteenth century.

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