

**MIAMI UNIVERSITY**  
**The Graduate School**

**Certificate for Approving the Dissertation**

**We hereby approve the Dissertation**

**of**

Shawna Rushford-Spence

Candidate for the Degree:

**Doctor of Philosophy**

---

Director

Dr. Cynthia Lewiecki-Wilson

---

Reader

Dr. Timothy Melley

---

Reader

Dr. Katharine Ronald

---

Dr. Carolyn Haynes

Graduate School Representative

## ABSTRACT

### WOMEN'S RHETORICAL INTERVENTIONS IN THE ECONOMIC RHETORIC OF NEURASTHENIA

by Shawna Rushford-Spence

*Women's Rhetorical Interventions in the Economic Rhetoric of Neurasthenia* analyzes how turn-of-the-century American women writers used the rhetoric of neurasthenia to negotiate their disabilities and argue for renewed understandings of women's work. At this crucial moment, neurasthenia was a commonly diagnosed disease, most common amongst elite intellectuals and women, writers and other cultural producers, "brain-workers" rather than muscle workers. In order to describe neurasthenia to doctors and the larger American public, Dr. George M. Beard, a prominent neurologist, constructed an economic metaphor, in which individuals possessed a finite amount of "nerve-force" that could be saved or spent, reinvested or wasted. When stores of nerve-force were low, individuals could experience "nervous bankruptcy." This metaphor formed the basis for what became, according to scholar Tom Lutz, a "discourse" by which individuals could negotiate their reactions to the large-scale changes taking place during this historical moment. Alice James, Jane Addams and Charlotte Perkins Gilman were each diagnosed with and treated for neurasthenia and used neurasthenic rhetoric to discuss their disabilities. This rhetoric allowed them not only an "available means" by which to understand and negotiate their ailments but also the language to think about women and economics as well as make arguments about women's disability and women's work. This study asks how these women used this language to talk about their disabilities in ways the larger culture could understand but also challenge medical assumptions about women with disabilities at a time when most doctors were male and the prescribed treatment for women involved isolating them in houses or bedrooms for six to eight weeks just as they were rallying for opportunities for higher education and public work.

There is no single pattern of how this rhetoric was used; each woman used the language in her own way. James used the economic metaphor to secure an identity outside of "invalid," to challenge male medical conceptions of women's disabilities and to establish her worth. Addams developed the ability to "affectionately interpret" the poor of East Chicago and to understand that women's and society's health relied on a balance of different kinds of work—manual and intellectual labor. Gilman challenged the ingenuities of Dr. S. Weir Mitchell's "rest cure"

treatment and argued for the importance and necessity of women's public work. Each author posed important challenges to the ideological positions of the male medical establishment and turn-of-the-century American culture. Each of my chapters builds on the next to show how these writers responded to, challenged and used dominant discourse to for their own rhetorical purposes and, in so doing, constructed an early disability rhetoric.

WOMEN'S RHETORICAL INTERVENTIONS IN THE ECONOMIC RHETORIC OF  
NEURASTHENIA

A DISSERTATION

Submitted to the  
Faculty of Miami University  
in partial fulfillment of  
the requirements for the degree of  
Doctorate of Philosophy  
Department of English

by

Shawna Rushford-Spence  
Miami University  
Oxford, Ohio  
2010

Dissertation Director: Dr. Cynthia Lewiecki-Wilson

©

Shawna Rushford-Spence

2010

## Table of Contents

Introduction.....	1
Chapter One: Neurasthenic Rhetoric and Turn-of-the-Century American Women's Writing .....	5
Chapter Two: "How well one had to be, to be ill!": Neurasthenic Economies in <i>The Diary of Alice James</i> .....	31
Chapter Three: "[R]estore a balance": Economies of Work in Jane Addams's <i>Twenty Years at Hull-House</i> .....	65
Chapter Four: "[S]o many women break down": Charlotte Perkins Gilman's Transformations of Neurasthenic Rhetoric .....	87
Bibliography .....	114

## Acknowledgments

Miami University's English graduate program played a significant role in the creation of this manuscript. The Sinclair Dissertation Fellowship, as well as Department of English Teaching Assistantships, allowed me the time to work on this project. I want to thank my committee: Dr. Cynthia Lewiecki-Wilson, Dr. Timothy Melley, Dr. Katharine Ronald and Dr. Carolyn Haynes. I am grateful to Tim Melley for helping shape the initial ideas for this dissertation. Your thoughtful, intelligent feedback on my prospectus and on my chapter drafts was invaluable. Thank you also for introducing me to topic of neurasthenia. I want to thank Kate Ronald for inspiring and supporting me as a teacher and scholar. Your graduate courses sparked my interest in women's rhetoric(s). Your keen insights about my chapters and throughout this process were incredibly useful. Thank you also for introducing me Jane Addams and *Twenty Years at Hull-House*. To Carolyn Haynes, thank you for your support and feedback throughout this process. Finally, Cindy Lewiecki-Wilson, my dissertation director, could not have been more helpful or supportive over the last several years. Working with you in the composition office was the highlight of my graduate career. From the beginning of this process, you have been supportive and encouraging. I am deeply indebted to you for your careful readings of each stage of the manuscript and the consistent engagement you offered me as a teacher and a scholar. I truly owe a debt of gratitude for the supportive environment my committee fostered throughout the process.

Fellow graduate students at Miami University were integral to my development as a teacher, a writer, and a human being. Angie, what can I say? We have poured our blood, sweat and tears into the process of learning to be teachers and scholars together for nearly a decade. Thank you for talking with me, sometimes for hours, about this project. And, thank you for helping me in the final, revision stages of this dissertation. Lisa, thank you for being such a good friend and colleague through the years. Thank you also for supporting me through this process. Wioleta, it was wonderful working in the composition office together. I'm so glad we became such good

friends and camping companions. Finally, I'd like to thank to all the other graduate students at Miami who I've had the privilege of sharing ideas with through the years.

I could not have made it through graduate school without the support of my amazing family. Mike, we've been through thick and thin together. Through it all, you've been an awesome brother and friend. Dad, even though you haven't always understood why I've been in school for so long, you've always been proud of me. Thank you for that. Mom, thank you for supporting me every step of the way, from the beginning of my college career until the end. I can't express to you how grateful I am for you for all of things you've done for me throughout this life.

To the Spence's, thank you for welcoming me into your family and for supporting me through the process of writing this dissertation. Thank you, Jason. I could not have done this without your love, support and patience through the years. Thank you for always believing in me and in this dissertation. And, finally, thank you, Liam. You've inspired me to finish this dissertation. I love you more than any words can express.

## Introduction

This dissertation analyzes how Alice James, Jane Addams and Charlotte Perkins Gilman, three turn-of-the-century women writers, used the rhetoric of neurasthenia to define and describe their ailments and to make arguments about what constituted women's work. Neurasthenia, a term no longer used today, was a common medical diagnosis at the turn of the last century in America and in Europe. George Miller Beard, a prominent neurologist at the time is credited for popularizing neurasthenia as a disease and the economic rhetoric that accompanied it. In *American Nervousness, Its Causes and Consequences*, published in 1881, Beard presented an understanding of how neurasthenia affected the human body using an economic metaphor, a banking metaphor in which individuals could either save/invest or spend/waste nervous energy or nervous force and could experience "nervous bankruptcy" when nerve-force was improperly invested or wasted. Individuals in turn-of-the-century America used this language, this metaphor for many different rhetorical purposes. In *American Nervousness, 1903: An Anecdotal History*, Tom Lutz explains that individuals used the "discourse" of neurasthenia to negotiate the large-scale changes taking place in turn-of-the-century America. In fact, as I will show in the following chapters, Beard argued that development of neurasthenia was partly a result of the processes of modern civilization—industrialization, technological and scientific innovation and women's education—and that individuals most likely to develop neurasthenia were those whom were overly sensitive to these changes. In analyzing how women writers used the rhetoric of neurasthenia at the turn of the last century in America, I shed light on the interesting connections between writing and the culture in which it was produced as well as neurasthenic rhetoric and how it functioned for individual women writers. In the chapters following, then, I argue that neurasthenia was a rhetoric with a particular appeal to certain kinds of audiences, namely those diagnosed with and treated for the disease.

In Chapter One, I reread Beard's text with an eye toward more fully fleshing out his language, the gendered nature of his discourse, and his economic and mechanistic metaphors. First, I look at "cultural components" of the neurasthenic rhetoric, and the idea that neurasthenia as an American disease, most likely to occur in women. I focus on the gendered nature of neurasthenic rhetoric and how that functioned to produce gendered cures, specifically S. Weir Mitchell's "rest cure" that Charlotte Perkins Gilman famously criticizes in "The Yellow

Wallpaper.” I look at “definitions” of neurasthenia—medical definitions and metaphorical definitions and how these combined discourses functioned to create a rhetoric that both the male medical establishment and the larger culture could understand and use. Finally, I argue that in constructing neurasthenia as a disease, Beard constructed a rhetoric that was used by James, Addams and Gilman toward their own specific rhetorical ends, to define and describe their experiences of living with a diagnosis of neurasthenia (and undergoing treatment) and to make different arguments about women’s productive work.

Chapter Two focuses on *The Diary of Alice James*, an understudied text, in which James records the daily events and her experience of living with a diagnosis of neurasthenia in the final four years of her life. In this chapter, I argue that James takes up Beard’s rhetoric of neurasthenia in order to define and describe her ailments, to resist neurasthenia and the male medical establishment, to assert a sense her self as a subject rather than as a passive object, and to make an argument about the “work” of managing pain. In this chapter, I illustrate that James’s disability (invalidism) has often been read as her career, and I argue that we see her disability as James saw it, as requiring a certain kind of “work” but not as a chosen career. The rhetoric of neurasthenia, specifically, the language of the “nerves” and the economic metaphor, allows James to assert talk about her ailments in a way that would be understood by the larger culture. The economic metaphor provides James with the means to discuss her “worth” in an economy that largely valued either men’s productive or women’s reproductive work, rather than women’s writing or the “work” women with disabilities or women diagnosed with neurasthenia did in order to resist the ways in which the dominant culture classified invalid women as in-valid.

Chapter Three focuses on Jane Addams’s *Twenty Years at Hull-House*, though I also discuss some of her other texts. I focus specifically on this text because Addams overtly discusses her experience of living with a diagnosis of neurasthenia—albeit a brief discussion—and because she uses the rhetoric of neurasthenia to make arguments about women’s education and women’s work. In particular, Addams takes up some aspects of Beard’s language, including the language of the “nerves,” terms such as “nervous exhaustion” and “nervous depression” and the economic metaphor, with its associations with “energy” and “balance,” in order to assert an argument about women’s education and the importance of putting knowledge to “work.” I look at Addams’s discussion of “industrial maladjustment,” the reason Beard argued for the

development of neurasthenia in America, and argue that Addams uses the rhetoric of neurasthenia to show that while industrial maladjustment was part of the problem, the larger issue was that newly educated women were having trouble adjusting to having to either return to the home to fulfill the duties of wife and mother, hanging about uselessly without the means to put their knowledge to work. I look also at Addams's discussion of "waste" and argue that Addams uses the rhetoric of neurasthenia to illustrate that women and immigrants' energies were being wasted instead of reinvested in society, resulting in a national illness that she thought the work she was doing at Hull-House could help to cure. I argue that Addams suggests, throughout the course of her autobiography, that when women's education/knowledge is saved in the mind and not invested in society, it is wasted and causes nerve imbalance and nervousness. However, when reinvested, it has the potential to restore societal health.

Chapter Four focuses on several texts written by Charlotte Perkins Gilman's, including, "The Yellow Wallpaper," *Women and Economics*, "The Nervous Breakdown of Women," and *The Home: Its Work and Influence*. In the first part of this chapter, I reread "The Yellow Wallpaper," which has been analyzed a countless number of times, in order to suggest the ways in which Gilman uses the rhetoric of neurasthenia to construct an argument about women's writing as important and productive work. I look at both *Women and Economics* and *The Home* and how Gilman uses the rhetoric of neurasthenia, especially the economic metaphor, to argue for an understanding the importance of women's public and productive work rather than their private and reproductive work—that which was prized by the dominant culture in turn-of-the-century America. Finally, I tied all of Gilman's texts together, including her autobiography, *The Living of Charlotte Perkins Gilman*, to show how Gilman uses the rhetoric of neurasthenia to construct an early disability rhetoric, one that challenges the dominant medical models for understanding disability and in particular women's disability. This chapter is the culmination what I hope is an interesting story of how women have used the rhetoric of neurasthenia toward their own specific rhetorical purposes and, in so doing, have transformed our understanding of how this rhetoric operated for individual writers, those diagnosed with neurasthenia and treated for neurasthenia and the larger culture.

Neurasthenic rhetoric offered James, Addams and Gilman a means to talk about their ailment and make arguments about women's work. I argue in the following three chapters that

these women used neurasthenic rhetoric for their own ends, and in many ways prefigured the kinds of criticisms offered by late 20<sup>th</sup> century disability studies: critiques of medicalization, stigma, labeling, ableism, and the norm. These women and other women writers were, in fact, critical of doctors and skeptical about treatments. They were aware of the social stigma of being labeled as disabled and testified to their intellectual strengths in spite of the physical weaknesses. Finally, they challenged societal “norms” about ability and inability and what even ill women could be expected to accomplish.

## Chapter One:

### Neurasthenic Rhetoric and Turn-of-the-Century American Women's Writing

In this chapter, I apply two critical lenses, rhetorical and disability studies, to the discourses of neurasthenia and selected writings of James, Addams, and Gilman. While their writing and neurasthenia itself have been studied before, these two critical lenses shift the focus of inquiry and bring to light new angles from which to view these women's work and the rhetoric of neurasthenia. Instead of regarding their neurasthenic diagnoses as cultural symptoms—e.g. looking at their physical ills as metaphors for something else, such as social malaise—a disability studies lens allows me to understand their conditions instead as central to their identities and experience. The dual lenses of rhetorical and disability studies also allow me to reread George Miller Beard's *American Nervousness: its Causes and Consequences*, a text considered foundational to turn-of-the-century understandings of neurasthenia, in new ways. In *American Nervousness, 1903: An Anecdotal History*, the most recent and most renowned analysis of neurasthenia, Tom Lutz identifies what he calls a "rhetoric" of neurasthenia, a discourse which he reads as a cultural symptom of the times. I extend and revise Lutz's ideas about neurasthenia by combining a disability studies focus and a deeper rhetorical analysis. I examine the commonplace arguments and founding assumptions of Beard's discourse of neurasthenia and show that the arguments and metaphors of neurasthenic rhetoric were taken up by these women writers for their own ends and purposes, particularly in terms of the ways they revise the topic of "work." Instead of perceiving the label of neurasthenia, then, as fatally labeling and limiting these women, rhetorical and disability analysis brings to light how these women used the rhetoric of neurasthenia for their own ends.

Previous analyses of James, Addams and Gilman have promoted these writers' illnesses/disabilities as metaphors for something else. For example, analyses of James's diary have often read her neurasthenia metaphorically as a response to and rebellion against the constraints of her feminine role. In her *Over Her Dead Body: Death, Femininity and the Aesthetic*, Elisabeth Bronfen argues that James's "nervous ailment was intimately connected with both the feminine role her culture ascribed to her and with her resistance to the lethal boredom of enforced uselessness, the stifling of her active nature, [and] the frustration of her youthful hopes that went along with being a young woman in mid-nineteenth-century New

England” (385). In “Negative Mentorship in the Case of Alice James,” Esther F. Lanigan argues that James’s ‘nervous diseases’ were “a rebellion against her assigned family role and its constraints” (76). In *Women and Autobiography in the Twentieth Century*, Linda R. Anderson writes, “For Alice, like many other nineteenth-century women, hysterical illness was one way of responding to her intolerable plight as a woman, the conflicts and tensions of her social role; but it was a highly ambivalent response” (25).

Arguments such as these that see James’s neurasthenia as a metaphor for resistance deny the painful realities involved with living with a condition at that time diagnosed as neurasthenia. Such realities are at heart of *The Diary of Alice James*. In *Illness as Metaphor*, Susan Sontag claims that, “the most truthful way of regarding illness—and the healthiest way of being ill—is one most purified of, most resistant to, metaphoric thinking” (3).

Analyses of Addams have often only briefly mentioned her disability as a temporary experience in her life that she exaggerates for the sake of constructing a good narrative in *Twenty Years at Hull House*. The most naïve readings of Addams’s work, by biographers such as Gioia Diliberto, position her as an American heroine with the gumption to “overcome” her disability and become a widely successful social worker, writer, public speaker, and Nobel Peace Prize winner.

In *Claiming Disability: Knowledge and Identity* Simi Linton points out that, “The ideas imbedded in the *overcoming* rhetoric are of personal triumph over a personal condition” (18; emphasis original). The problem with ideas about “overcoming” is that disability can then be viewed as a personal rather than a social problem, as something to be dealt with by the individual rather than by the society. In other words, it is the individual who has to overcome obstacles, not the society that has to change the built environment to suit all bodies. This line of thinking is antithetical, as I will later show, to Addams’s thinking on the relationship between the individual and the society as well as societal responsibility.

Analyses of the writing of Gilman, especially of “The Yellow Wallpaper,” have sought to diagnose Gilman, most commonly with postpartum depression, and, as in the case of Addams, to ignore the possibility that her experience of living with a disability may have had anything to do with her social thought. Characterizing James’s disability as a metaphor, Addams’s disability as a something she was able to “overcome,” and Gilman’s disability as a temporary limiting factor

in her life limits how their writing can be understood, and I think it is ultimately an unproductive way of understanding women's illness and disability because it erases their lived experiences of living and working with bodily conditions, just as much as ignoring their gender would.

Instead of reading disability as a metaphor for something else, I adopt a disability studies approach, which views disability as central to the life experience of the disabled person and critically examines how disability is represented in medical and social discourses. Centering disability in the case of James, Addams and Gilman means understanding their experiences of living with neurasthenia as central to their lives. *The Diary of Alice James*, in particular, makes a strong case for understanding disability as central to experience and perhaps to identity. For example, James centers her experience of living with a disability from the beginning of her diary, when she explains that she began keeping a diary as a means of gaining some sort of "relief" from the overwhelming mental and physical sensations she experienced in her daily life. James's diary is also an excellent example of the many ways women with disabilities, even as early as late nineteenth-century, have sought to construct a view of themselves and their disabilities outside of the limiting representations of women with disabilities in medical discourse. James's diary provides an interesting dialogue between women patients and male doctors about the disability experience and how it is often misread, misinterpreted and misrepresented. Seeing the experience of living with neurasthenia as central to these women's experiences allows for a more comprehensive understanding of their use of the rhetoric of neurasthenia in their texts. As I show in the chapters following, these women used neurasthenic rhetoric to define and describe their ailments, to resist typical roles and to argue for new relations to work, writing, and women's social roles.

## **Defining Neurasthenia**

The two main ways neurasthenia has been defined are by Dr. George Miller Beard and Tom Lutz, the former a nineteenth-century physician and the latter a contemporary scholar of literary history. In 1881, Beard, a prominent neurologist, published *American Nervousness: Its Causes and Consequences*, a book-length volume, in which he used popular terms and

commonplaces to create a unified disease called “nervousness” or “neurasthenia”<sup>1</sup> making it accessible to the larger American public. Neurasthenia, a term no longer used in the United States, was, at the turn of the last century, a common diagnosis. Scholars credit Beard with popularizing the term neurasthenia in American culture. Although Beard first used the term neurasthenia to mean a medical condition in an article written for the (largely male) medical establishment in 1869, it did not gain in popularity until the publication of *American Nervousness* in 1881, at which time doctors had already accepted the term and the disease it described and had begun to recognize patients’ complaints as suggestive of this new brand of nerve disorder. By the late 1880s, Lutz points out, the term (and its accompanying rhetoric) was widely accepted and used by physicians as well as many other individuals in the larger culture.

In his text, Beard combined several theoretical strands and discursive structures to explain what neurasthenia was and how it affected the human body. He defined neurasthenia as a medical condition, arising within the specific cultural context of turn-of-the-century America. He explained that neurasthenia was a disease of the nervous system, which resulted from the individual’s involvement in the processes of cultural modernization (vi). He used an economic metaphor, the notion of “nervous bankruptcy” to make his ideas clear to the majority of Americans, who were, in fact, becoming deeply invested in the capitalist system. As Lutz argues, in weaving together medical, economic and other discursive threads, Beard created a universally understood and accepted rhetoric of neurasthenia that was used by many individuals at the turn of the last century for many different rhetorical purposes.

In *American Nervousness, 1903: An Anecdotal History*, Tom Lutz lays out his argument that neurasthenia was defined discursively and used rhetorically. According to Lutz, neurasthenic rhetoric offered a language and structure by which individuals could understand the conditions of modern social life and cultural producers of the time could negotiate the rapidly changing American society. For example, writers such as Theodore Dreiser and Edith Wharton incorporated neurasthenic themes and characters into their novels and William James and Theodore Roosevelt used neurasthenic rhetoric to make philosophical and political arguments.

---

<sup>1</sup> For the purposes of this dissertation, I will use the term neurasthenia, but I have seen many incarnations of this term during the course of my studies, including nervousness, nervous ailment, nervous depression, etc.

Perhaps most important to my argument is Lutz's point that neurasthenia "was a disease related to changing notions of work" (25). He argues that people's ideas about work were in the process of changing dramatically at the turn of the last century in America, as a result of the many cultural changes taking place at that time. Women, according to Lutz, were particularly susceptible to neurasthenia because of the advent of the "New Woman" and the increasing opportunities for education and public work that New Woman ideology provided. In this chapter and the chapters to follow, I broaden Lutz's analysis of the connections between neurasthenia and work. In particular, I look at how James, Addams and Gilman used the rhetoric of neurasthenia—notions of bodily energy, spending, and waste—not necessarily to negotiate modern social life but to argue for a sense of the "work" involved in living with a diagnosis of neurasthenia. I argue that *The Diary of Alice James* illustrates of the "work" involved in living with a diagnosis of neurasthenia, that *Twenty Years at Hull-House* shows how a good "balance" of different forms of "work" could lead away from neurasthenia, and I show that in each of Gilman's texts that I cite productive and/or public "work" offered a greater sense of "relief" and "balance" than the reproductive work of mothering and/or housekeeping.

I thus revise and extend Lutz's ideas about neurasthenia and neurasthenic rhetoric by looking at the writing of James, Addams and Gilman through a disability studies lens and by rhetorically analyzing their texts for evidence of their use and transformation of neurasthenic rhetoric. My own argument both builds on Lutz's central ideas about neurasthenia and neurasthenic rhetoric—namely that writers used this rhetoric to make social arguments. While I too understand that neurasthenia functioned as a rhetoric and was used by many contemporary writers toward their own very specific rhetorical purposes, I extend Lutz's argument by illustrating how the women writers of my study used the rhetoric of neurasthenia not only to define and describe the disabling conditions of their lives but also to make arguments about the connection between women's disability and women's work. I look not only at writers Lutz focuses on, such as Gilman, but also writers Lutz overlooks, such as James and Addams. In his text, Lutz claims that Gilman's argument that women's public work would be beneficial to women and to larger society lacked cogency because men doing public work also suffered from neurasthenia (230). In my chapter on Gilman, I revise Lutz's ideas by analyzing how Gilman uses the rhetoric of neurasthenia in "The Yellow Wallpaper," *Women and Economics* and *The Home: It's Work and Influence* to build a coherent and cohesive argument for the necessity of

women's public work. I argue that neurasthenia was a rhetoric, with the power to persuade turn-of-the-century Americans of a particular understanding of human health and disease, but I extend his analysis by showing how these women writers used the rhetoric of neurasthenia for their own rhetorical purposes, as a means of defining and describing their ailments and gaining agency over doctors (and others) who mistreated and/or misunderstood their ailments and contributed to misunderstandings about women's disability.

The economic rhetoric of neurasthenia was one of the primary cultural means available and provided particularly accessible ways for defining and describing both personal and political struggles at the turn of the last century in America. As Lutz argues, "neurasthenia was a central figure, a nearly universal trope for the individual's relation to cultural modernization" (20). But neurasthenia was, of course, more than a trope; it was also a painful reality and a common medical diagnosis with a prescribed treatment that relegated many women to their homes or even their beds. As pragmatic philosophy would have it, then, the rhetoric of neurasthenia had "consequences." The diagnosis of neurasthenia dictated the conduct of medical practitioners, responsible for diagnosing and suggesting treatments for patients, who were expected to submit to various regimens and treatments. And, this language offered the possibility of naming and describing experiences that were otherwise unnamable and/or indescribable. In what follows, then, I elaborate on Beard's medical, cultural and metaphorical constructions of neurasthenia and illustrate how neurasthenia functioned as a rhetorical structure for the women writers I analyze.

### **Medical Definitions of Neurasthenia: The Causes, Symptoms and Treatments**

In *American Nervousness*, Beard defined neurasthenia primarily as a "lack of nerve-force" (vi). He thought that the human nervous system could be weakened from various activities, most often from intellectual labor. Some individuals, according to Beard, were more susceptible to neurasthenia ("brain-workers," as he called them, and women) than others (muscle workers) because they were always already lacking in nerve-force. If left unchecked or untreated, individuals experiencing symptoms of nerve-weakness were at risk for developing neurasthenia or nervous exhaustion. Perhaps most importantly, Beard situated neurasthenia as a somatic rather than psychosomatic disease—though he recognized that it could produce psychosomatic symptoms. In particular, Beard was adamant that nervousness not be confused with an "unbalanced mental organization; a predominance of the emotional, with a relative

inferiority of intellectual nature” (1). This distinction was important for a number of reasons, not the least of which was that Beard believed that he himself suffered from this disease. He believed that neurasthenia was a disease found most commonly in the brain-working classes of Americans who came to his clinic, overwhelmed and exhausted from mental rather than physical labor. Like many other medical and scientific theories of the late nineteenth-century, Beard relied on racist, classist and sexist assumptions in constructing his definition of neurasthenia; however, he recognized, unlike many other physicians of his time, that “mental strength may coexist with physical weakness and physical strength may coexist with mental weakness” (2). In her diary, Alice James reveals the assumption amongst many in the male medical establishment that mental and physical weakness went hand-in-hand. Beard further illustrates his point in a metaphorical analogy: “Brainlessness (excess of emotion over intellect) is, indeed, to nervousness, what idiocy is to insanity; and, like insanity and idiocy, the two are very often confounded” (5). It was important to Beard that nervousness not be equated with “brainlessness” because he believed that nervousness was a disease of the nervous system, a somatic rather than psychosomatic disorder, with a specific (though wide-ranging) set of symptoms, that required medical intervention and treatment. In his own words: “nervousness is a physical not a mental state, and its phenomena do not come from emotional excess or excitability or from organic disease but from nervous [system] debility and irritability” (17).

Even though neurasthenia was considered a physical disease, Beard believed that individuals diagnosed with neurasthenia could present with a variety of different mental and physical symptoms. Most commonly, though, patients complained of dyspepsia (stomach/gastrointestinal problems), sick-headache (nausea accompanied by headache and oftentimes fainting), insomnia and generalized anxiety, depression and/or exhaustion. Alice James, for example, talked most often in her diary about dyspepsia and sick-headache. Although Jane Addams rarely referred to her ailments directly, it can be inferred that she experienced mental and physical strain and pain because of the complications that arose from having spinal tuberculosis as a child and back surgery to correct the problem as an adult, while trying to cope with losing her father and getting her education. Charlotte Perkins Gilman describes the depression and overwhelming mental and physical exhaustion she experienced as a result of living with a diagnosis of neurasthenia in “The Yellow Wallpaper” and later in her autobiography. I will describe the experiences of all three women writers in more detail in

chapters to follow. Suffice it to say, for now, that all three women had different experiences of living with a diagnosis of neurasthenia. Not only did their symptoms vary, so did the ways they understood and wrote about disability and used the rhetoric of neurasthenia in their texts.

There were two common, “gender-specific” treatments for neurasthenia. As Lutz points out, many ‘overly active’ women were isolated in bedrooms to be taken care of by nurses, while many men feminized by the disease were sent out west to become men again” (31). Dr. S. Weir Mitchell was the doctor responsible for inventing the infamous “rest cure” treatment, which Gilman became famous for criticizing in “The Yellow Wallpaper.” In his book *Fat and Blood*, Mitchell clearly outlines the methods he used in treating women’s neurasthenia. Although most scholars rightly represent the “rest cure” as Mitchell’s standard treatment for neurasthenia, Mitchell claimed in his book that different patients required different courses of treatment. He explained that, “In milder forms of neurasthenic disease, in cases of slight general depression not properly to be called melancholias, in the lesser grades of pure brain-tire, or where this is combined with some physical debility, I often order a ‘modified’ or ‘partial rest’” (66). This treatment allowed for patients to attend to business both in and outside of the home, to take drives, and even to walk or exercise, while eating a diet high in fat and also resting in between activities and after meals. Though Mitchell implies that this “partial rest cure” was available to both men and women, it is not entirely clear whether he often offered it to his woman patients. In fact, one gets the sense that he treated most, if not all, of his women patients as extreme cases, deserving of the full-on treatment regimen. The full “rest cure” regimen mandated bed rest for six to eight weeks and did not permit patients to “sit up, or to sew or write or read, or to use the hands in any active way except to clean the teeth” (66). They were fed a diet high in fat and given sponge baths by an attending nurse, and, sometimes, they were also treated with massage, electricity, or both (66-68).

As Mitchell explains throughout his work, the whole point of the treatment plan he devised, the “rest cure,” was to fatten and increase the blood volume in thin and thin-blooded women.<sup>2</sup> Mitchell explains that he has treated “chiefly women of a class well known to every

---

<sup>2</sup> Mitchell’s techniques were not new. In fact, his notions about “quiet and rest” and “baths and resistance movements” were derived from similar practices designed to relieve various heart, uterine, and kidney problems (46-48).

physician,—nervous women, who, as a rule, are thin and lack blood” (9). Though, many of these women had been treated before “for gastric, spinal, or uterine troubles,” they “remained at the end [of treatment] as at the beginning, invalids, unable to attend to the duties of life, and sources of discomfort to themselves and anxiety to others” (9). Mitchell’s goal, then, was to provide relief to women for both the “discomfort” they felt and the “anxiety” they supposedly produced in others.

According to Mitchell, women who were thin and lacked blood were more susceptible to developing neurasthenia: “The loss of fat which is not due to change of diet or to exercise, especially its rapid or steady loss, nearly always goes along with conditions which impoverish the blood, and, on the other hand, the gain of fat up to a certain point seems to go hand in hand with a rise in all other essentials of health, and notably with an improvement in the color and amount of red corpuscles” (16-17). Like Beard, Mitchell believed that women were more susceptible to neurasthenia because of their already weakened state.

Later in his work, Mitchell provides a perfect description of how neurasthenia was defined and described by the medical profession and represented by many women authors. He explains that, “no matter how it comes about, whether from illness, anxiety, or prolonged physical effort, the woman grows pale and thin, eats little, or if she eats does not profit by it. Everything wearies her,—to sew, to write, to read, to walk,—and by and by the sofa or the bed is her only comfort” (38-39). Indeed, Gilman reflects this view in her autobiography, explaining that she was too tired to perform domestic duties. In her fictional account of a neurasthenic woman, “The Yellow Wallpaper,” the doctor (based on Mitchell) and the doctor-husband forbids the protagonist from doing these things. Like Beard and other doctors of the time, Mitchell argues here that women’s activity was the cause of women’s disability. James (subtly), Addams (less subtly) and Gilman (overtly) argue that women’s activity—getting outdoors, exercise, writing, etc.—was healthy whereas women’s passivity and enforced “rest” was, in effect, disabling.

In his text, Mitchell argues that neurasthenia, like hysteria, was not only problematic for doctors and patients, but was also troublesome for those responsible for caring for nervous women. For example, James required almost constant care and attention from her parents, while they were alive, and from her close female companion Katherine Peabody Loring, after they

died. Mitchell was interested in “protecting” the friends and family members of the nervous women he treated, who, he thought, were likely to become ill by having to cloister themselves up all day and wear themselves out with the care of another. As has been implied, Mitchell was less sympathetic and more critical of the women he treated than Beard, believing them to be infected partly by a “moral atmosphere” of “evil,” which he felt he had to help them with. (44). He also argued that patients used to constant care developed an “unconquerable taste for invalidism” and became resistant to treatment (44). For this reason—in order to “disentangle them from the meshes of old habits” and to save the friends and family members from a similar fate—Mitchell required that his woman patients undertake his “rest cure” in isolation, away from their homes and oftentimes in his home or clinic (50). In fact, Mitchell was reluctant to allow even a “single friendly visitor” for “the large and troublesome class of thin-blooded emotional women, for whom a state of weak health has become a long and, almost I might say, a cherished habit. For them there is often no success possible until we have broken up the whole daily drama of the sick-room, with its little selfishness and its cravings for sympathy and indulgence” (52). Apparently agreeing with Oliver Wendell Holmes, whom he cites in his book, Mitchell thought that a nervous woman was equivalent to “a vampire who sucks the blood of the healthy people about her” (52). He even goes so far as to recommend that patients not receive letters from home while in seclusion (55). His attitude toward this disability is to partially stigmatize the character of the person who “has” it and argue that they somewhat bring on invalidism themselves. His argument also precludes that this disability is understood in terms of a “burden” to the normal population, the caretakers.

As many scholars point out, Mitchell felt that the care of a particular kind of nurse and doctor was crucial to the effective treatment of neurasthenic disease. He thought it was important for the doctor to be able to distinguish the severity of the disease so as to recommend or enforce the appropriate treatment regimen. This belief assures a paying population for his clinics and treatment regiment. It is also part of the late nineteenth-century move toward medicalizing and pathologizing conditions. But it also allowed him to define and describe the ideal patient. For example, he thought that the treatment required the “cordial and submissive assistance of the patient” (72). In other words, he thought that good patients should behave and obey like children (76). Medical therapies, then as now, treated disabled people like children because disability was associated with dependency, childlikeness and helplessness.

Beard underlined the causes and consequences of neurasthenia in *American Nervousness*. Doctors, such as Mitchell, adopted Beard's theories and designed what they thought were appropriate treatments, based on patient's complaints, and, of course, on the cultural ideology that ruled turn-of-the-century thought. The women writers I analyze used what was essentially a male medical rhetoric to challenge some of the most deeply held beliefs of the male medical establishment and to make social arguments about women's health and disability. In the following section, I probe the cultural components of neurasthenic rhetoric in order to show why the most important category of the several important categories (race, class, gender) in constructing who would develop neurasthenia was gender.

### **The Cultural Components of Neurasthenia: The Who, How and Why**

Beard and Mitchell's theories for the diagnosis and treatment of neurasthenia suggested that there were cultural components to the disease. Neurasthenia was not only defined in a specifically American context, but it was also aligned with many other medical and scientific theories of the time that sought to categorize, classify and rank individuals according to racist, classist, sexist and elitist eugenicist systems. Many male physicians of the turn of the last century in America became convinced, as a result of the work of doctors such as Beard and Mitchell, that not only was neurasthenia a particularly American condition but also that upper-class, educated, white women, were more susceptible to developing neurasthenia than lower-class, uneducated minorities. In what follows, I look closely at the ways in which Beard's rhetoric of neurasthenia works to construct a particular kind of individual, best suited to developing neurasthenia. As Lutz points out, "The class, race, and gender biases encoded in neurasthenic diathesis demonstrate that socially constituted practices and positions determined who, how, and why one became diseased" (20). In fact, I argue that more than any other category gender was the most important in defining who would develop neurasthenia.

Although Beard defined neurasthenia as a disease requiring medical intervention, he also described the disease's connection to the culture in which it was produced. Specifically, he argued that neurasthenia has developed and rapidly increased in America because of the following five characteristics of modern civilization: "steam power, the periodical press, the telegraph, the sciences, and the mental activity of women" (vi). Without civilization, Beard argued, there could be no nervousness. Neurasthenia was a turn-of-the-century American disease

and had not existed in ancient Greece, Rome, Spain or the Netherlands, he believed. America was a peculiarly appropriate venue for nervousness, Beard argued, because of the particularities of the American “climate, institutions—civil, political, and religious, social and business—personal habits, indulgence of appetites and passions” (vi). Americans, living in a country undergoing considerable changes, were ideal candidates for developing neurasthenia.

Neurasthenia, then, was an American disease, related directly to industrial, technological, scientific innovation and, strangely, women’s education. Beard and other doctors theorized that women were more prone to developing neurasthenia because they were both mentally and physically weaker than their male counterparts. Women, like the ones of my study, were especially at risk because of a combination of their social class status and intellectual activity. As I have already suggested, Beard and his colleagues thought American women were more susceptible to neurasthenia because of their assumed weaknesses and their increasing opportunities for education and work outside the home. As Lutz points out, “Women were susceptible to the disease because of their natural fragility and hypersensitivity; and the diagnoses and cures were based on these assumed weaknesses and on an explicit understanding that women’s natural, healthy state differed not in kind, but only in degree, from their diseased state” (31). Doctors argued that any extra exertion outside of their usual lines of work (mothering and housekeeping) put women at risk for becoming nervously exhausted. In *Disorderly Conduct*, Smith-Rosenberg points out that, “With increasing frequency as the nineteenth century progressed, male physicians pictured women as fragile creatures, dominated by their reproductive processes. From puberty to menopause, these processes...made women weaker physically than men, more delicate, domestic, nervous” (23). In *Invalid Women: Figuring Feminine Illness in American Fiction and Culture, 1840-1890*, Diane Price Herndl explains that doctors stressed the dangers of women’s education, especially during the pubescent years. For example, in his book *Sex in Education; or, A Fair Change for the Girls* (1873), Dr. Edward H. Clarke “argued that menstruation necessitated regular rest periods that would make it impossible for girls to receive an equal education with boys” (Herndl 112).<sup>3</sup> Just as American women’s

---

<sup>3</sup> As Herndl points out, this text encouraged many “counterattacks” by feminists such as Julia Ward Howe and Mary Putnam Jacobi, who undertook a scientific study of women’s menstruation and its effects on education. Jacobi’s work resulted in the publication of *The*

opportunities to receive an education or to work in the public sphere increased, male physicians found reasons why women were best suited to work in the private sphere of the home.

In other places in his text, Beard elaborated on the reasons why he thought women were more susceptible to neurasthenia. For example, he thought that those most likely to develop neurasthenia were those “in whom the nervous diathesis temperament predominates” (25). Those most likely to exhibit a nervous diathesis temperament, according to Beard, were those with a “fine organization,” which Beard defines in great detail:

The fine organization is distinguished from the coarse by fine, soft hair, delicate skin, nicely chiselled features, small bones, tapering extremities, and frequently by a muscular system comparably small and feeble. It is frequently associated with a superior intellect, and with a strong and active emotional nature...It is the organization of the civilized, refined, and educated, rather than of the barbarous and low-born and untrained—of women more than of men. It is developed, fostered, and perpetuated with the progress of civilization, with the advance of culture and refinement, and the corresponding preponderance of labor of the brain over that of the muscles. As would logically be expected, it is oftener met with in cities than in the country, is more marked and more frequent at the desk, the pulpit, and in the counting-room than in the shop or on the farm (26).

In the nineteenth century, as now, “medical science” was imbued with social biases of the time. In the late nineteenth century, there was a parallel move to create categories of intellectual competence/incapacity, to measure, and to rank.<sup>4</sup> Here, and throughout his text, Beard relies on a system of categorizing people according to their intellectual competency/incapacity. He not only

---

*Question of Rest for Women During Menstruation* (1877), “which concluded that normal work was more beneficial to menstruating women than was bed rest” (Herndl 112).

<sup>4</sup> In *Inventing the Feeble Mind*, James W. Trent explains the mid-to-late nineteenth century desire to name and rank “abnormality.” He discusses, in particular, the move to pathologize “idiocy,” which required the creation of types of “idiots”: “simulative,” “higher-grade” and “lower-grade” idiots and “incurables” (17). Idiots were not considered to be insane, although idiocy was sometimes related to insanity (18).

suggests a system by which sufferers of neurasthenia could be determined intellectually and economically but biologically as well. In *The Mismeasure of Man*, Stephen Jay Gould draws attention to the ways in which “biological determinism” or, more specifically, scientific “data” measuring the human brain and skeleton, has been used historically to justify the oppression of certain races (nonwhite), classes (poor) and sexes (women) (57). In fact, Beard’s rhetoric of neurasthenia, with all of its explicit ethnocentric or racist, classist, and sexist qualities, was constructed right around the time that many other scientists were debating whether brain size or certain facial or bodily features correlated to intelligence. The fine hair, small stature and small bones, suggest a northern European woman, rather than a southern European or African woman.

Later in his text, Beard refers to what he sees as the connection between nervousness and “the phenomenal beauty of American” women. He explains that American women are more beautiful than women in other countries because of the “peculiarities of climate...and the unusual social position of women in America” (65). Because women were becoming increasingly educated and no longer forced to labor either in the fields or in their homes, they were becoming increasingly more beautiful—developing a “fineness of organization”—and, as a result, becoming more nervous (66). Beard also describes a relationship between women’s “dress” and nervousness. He explains that American women “of the higher order” tend to dress in “colors that are quite subdued, and noticeable only at a short distance” (73). Apparently, “higher culture and sensitive nerves react to slight irritation; while low culture and insensitive nerves require strong irritation. Loudness of dress, is, therefore, justly regarded as proof of coarseness of nerve-fibre” (74). This hierarchy of dress may have also been a jibe against immigrants, with their native and colorful costumes. Whereas the American woman’s beauty and dress were signs of nervousness, her changing relationship to work might be recognized as one of primary underlying causes of nervousness. Women were considered to be “weaker” than men, unfit for taking on the duties of wife and mother as well as getting educated and entering the labor force.

Other signs of American women’s nervousness included childbirth and nursing. Beard explains that the “simple act of giving birth to a child opens the door to unnumbered woes; beginning with lacerations and relaxations, extending to displacements and ovarian imprisonments, and ending by setting the whole system on fire with neuralgias, tremors, etc., and

compelling a life-long slavery to sleeplessness, hysteria, or insanity” (77).<sup>5</sup> Breastfeeding mothers, who were unable to produce enough milk for their hungry infants, were especially at risk for becoming neurasthenic. But, both childbirth and nursing had become more and more difficult, according to Beard, because of the “fineness of organization” of American women. “In a state of perfect or almost perfect health, these processes are physiological; but for the last half century, among the upper classes of this country, they have become pathological; they have become signs of disease” (78). In many ways, Beard’s argument about the “processes” of childbirth and nursing are also arguments about work. That is, because certain classes of women were not required to do as much manual labor (in the fields or the home), they had become unfit for the work of giving birth and the fatigue involved in nursing. Therefore, requiring women to go back to the kitchen and the nursery was essential not only to preserve women’s health but also to secure the future of the “white” race. Women were held responsible not only for their own mental and physical health but also for the health of the nation; therefore it was of primary importance that they avoid activities, such as productive (writing, reading, etc.) and public work, that could lead to neurasthenia.

Because of the belief that women were the caretakers of the nation, there was a lot at stake in keeping them in the home. Perhaps knowingly, unknowingly, or a little of both, doctors participated in the process of denying women’s activity and enforcing women’s passivity, thereby slowing social progress and innovation, an argument Gilman makes in *Women and Economics*. Since cultural ideology dictated who would get sick, how they would get sick and why, the medical and cultural components of neurasthenia were intimately connected and worked together to form a uniform concept of neurasthenia. In what follows, I analyze the primary language, the rhetoric by which neurasthenia was defined and described by medical men and other cultural consumers.

### **The Metaphors of Neurasthenic Rhetoric: The Body as Bank, Battery and Circuit**

There were two main metaphors by which Beard defined and described neurasthenia to other physicians and to the larger culture. Perhaps the most important rhetorical element of Beard’s rhetoric of neurasthenia was the economic metaphor he used to define and describe

---

<sup>5</sup> This argument is exemplified in Charlotte Perkins Gilman’s “The Yellow Wallpaper.”

neurasthenia's affect on the human body. In his text, Beard constructed an economic metaphor to understand neurasthenia. He wrote:

In finance, a man is rich who always lives within his income. A millionaire may draw very heavily on his funds and yet keep a large surplus; but a man with very small resources—a hundred dollars in the bank—can easily overdraw his account; it may be months or years before he will be able to make himself square. There are millionaires of nerve-force who never know what it is to be tired out, or feel that their energies are expended, who can write, preach, or work with their hands many hours, without ever becoming fatigued, who do not know by personal experience what the term exhaustion means; and there are those—and their numbers are increasing daily—who, without being absolutely sick, without being, perhaps for a lifetime, ever confined to the bed a day with acute disorder, are yet very poor in nerve-force; their inheritance is small, and they have been able to increase it but slightly, if at all; and if from overtoil, or sorrow, or injury, they overdraw their little surplus, they may find that it will require months or perhaps years to make up the deficiency, if, indeed, they ever accomplish the task. The man with a small income is really rich, as long as there is no overdraft on the account; so the nervous man may be really well and in fair working order as long as he does not draw on his limited store of nerve-force. But a slight mental disturbance, unwonted toil, or exposure, anything out of and beyond his usual routine, even a sleepless night, may sweep away that narrow margin, and leave him in nervous bankruptcy, from which he finds it as hard to rise as from financial bankruptcy (9-10).

In this passage, he draws a comparison between the human body and the market economy. He argues that all people have a fund of “nerve-force” or nerve energy in the bank, which can be saved, spent or overdrawn. Some people, “millionaires of nerve-force,” unlikely to ever overdraw their accounts, could work for many hours, days or years without becoming fatigued, exhausted or sick. Other people, “poor in nerve-force,” had to be more careful not to overspend or work too hard else they risked “nervous bankruptcy” or nervous exhaustion. If people lived within their means, they could avoid nervousness. Like capital, nerve-funds, once depleted, were difficult to recoup.

Implicit in Beard's economic metaphor is a mechanistic metaphor for understanding the operations of the human body, both familiar tropes at the turn of the last century. Buried in his language lies the notion that men (and women) are like machines, that they might be "really well and in fair working order" or that they might breakdown. Once broken, they are difficult to repair. In the next paragraph, Beard elaborates on his mechanistic meaning:

A man is not well and strong and properly organized and equipped for life, who has not a large amount of reserve force, much more than is needed in his ordinary duties. An electric battery that does not supply very much more electric force than is needful for the use to which the battery is put, is a failure, since, by the wasting away of the elements and the chemical changes that take place in the fluid, the force will tend to diminish, and unless there be originally a great reserve in excess of what is needed for the purpose—either medical or other use—there will be necessary frequent cleaning and overhauling (10).

In this formulation, he compares a man to a battery, human life to the life of a battery. Again, he implies a hierarchy of illness, in which some people are better "organized and equipped" for life, with more "reserve force" or energy, than others. Later in this paragraph, Beard compares a man to an electric circuit:

The greater exhaustion that comes from unusual and unwonted exertion, has this twofold explanation, which is quite clear to those who are familiar with modern physics: First, unusual exertion, along the untravelled pathways of the nerves, meets with greater resistance, just as the electric force meets with greater resistance in a badly conducting circuit" (10-11).

In this example, he equates bodily force or energy with "electric force." Here, and in the example above, he suggests that all people have a certain amount of "reserve force," which can be wasted, and that people expend more energy when there is "unusual and unwonted exertion" or when they are required to perform tasks outside of their usual lines of work. In sum, he ties both his economic and mechanistic metaphors directly to work in the capitalist marketplace.

Ironically, Beard thought that those most likely to experience "nervous bankruptcy," those with the least amount of "nerve-force" or nerve energy, were those with the most money in

the bank. Neurasthenia, as I point out earlier in the chapter, was most frequently diagnosed in leisure class individuals and intellectuals. Perhaps, then, Beard's economic and mechanistic metaphors might be understood as means of suggesting that certain kinds of people were designed for certain kinds of work. Specifically, people with an excess of nerve-energy were better suited for manual labor whereas others were better suited for intellectual tasks.

Even though Beard argued that nervousness was more likely to occur in "brain-workers" than manual laborers, he also suggested that the former lived longer than the latter. As he points out, "To work is to grow; and growth, except it be forced, is always healthful...In all bodily functions the exercise of force develops more force; work evolves strength for work" (201). However, when "brain-work" is accompanied by worry, problems may arise. "Worry is the converse of work; the one develops force, the other checks its development, and wastes what already exists. Work is growth; worry is interference with growth" (202). Beard also thought that "brain-workers" lived longer than manual laborers did because they lived and worked under more sanitary conditions; the "nervous temperament" among "brain-workers" counterbalanced other, more fatal, afflictions; and "brain-workers" had the ability to adapt their work to their moods and hours of greatest productivity (204-207). Again, much of Beard's theorizing on the subject of human health was tied directly to work.

These metaphors, especially the banking metaphor, are used, repeated, challenged, revised and reflected in the women's texts I am studying. In his text, Lutz argues that the economic metaphor provided turn of the century Americans with a language by which to express their thoughts, feelings and anxieties about a culture that was in the process of undergoing widespread social and cultural transformation. I argue that women writers, in particular the women of my study move beyond this, taking up Beard's economic metaphor in rhetorically savvy ways to make arguments about their bodies and their disabilities. For example, James repeats the notion that she is forced to expend her energies, to do a certain amount of work to resist mental and physical pain and maintain muscular and brainular stability. Addams takes up the rhetoric of neurasthenia and notions of waste and expenditure to suggest that women, unbalanced by spending their energies in one way or another, could become rebalanced by engaging in different kinds of work, i.e. intellectual and physical labor. Gilman argues for a renewed sense of women's work and for greater roles for women's public work, in particular,

because she believed that it was idleness and boredom, rather than excessive work and education, were making women sick, restless and, at last, nervous.

### **Rereading Neurasthenia Through Rhetorical and Disability Studies**

One of the important claims of my dissertation is that neurasthenia functions as a rhetoric, a language, with a specific set of topics, claims/arguments and warrants. The concept of a rhetorical “topic” comes from Aristotle’s *Rhetoric*, where he uses the term “topos” to describe roughly places where rhetors can direct attention to see if patterns and/or arguments emerge. Some of the topics Aristotle outlined in the *Rhetoric* include: similarity/difference, cause/effect, possibility/impossibility, past fact/future fact. Some of the topics that surface in Beard’s rhetoric and in James, Addams and Gilman include: balance, sensibility, refinement, investment, expenditure, exhaustion, depletion, resistance, value, waste, energy and conservation. For example, Beard uses ideas about investment and expenditure, energy, exertion, and conservation to construct his economic metaphor, which is really a banking metaphor, in which the body becomes a bank and energy is money. He constructs his mechanistic metaphor, in which the body is a battery that is either fully charged or in need of recharging, using ideas about the depletion and wasting of bodily resources. In comparing the body to an electric circuit, Beard uses concepts about energy, exertion and resistance. Finally, his ideas about the “fine organization” of people most likely to be diagnosed with neurasthenia incorporate the topics of sensibility, refinement, value, strength and weakness. I have directed my attention to the places in James, Addams and Gilman’s writing where these topics are repeated, reoriented and/or rejected.

One of the ways to understand how neurasthenia functions as a rhetoric is to underline the claims that Beard is making. As noted at the beginning of the chapter, Beard argued that neurasthenia was a medical condition, requiring medical intervention. It was a physical condition, with mental symptoms, rather than a mental issue. It was more frequent in America due to a peculiar combination of social, cultural and climactic factors. It was a disease of “brain-workers,” of intellectuals, writers, artists, businessmen, lawyers, doctors, politicians, etc. It was becoming more common in certain classes of Americans due to cultural modernization and women’s education. Finally, Beard claimed that neurasthenia would disappear once people learned to adapt to their new surroundings. Many of these claims were widely accepted among

Americans diagnosed with the disease. While the women writers I analyze accepted some of these claims, they refigured, refit or outright rejected others. All three engage the rhetorical topics I mention above as well as Beard's claims about neurasthenia as their only available means of persuasion at the time. For example, James recasts "energy" as what is needed to be ill, not what is lacking in the ill, and Addams recasts "energy" as functioning collaboratively not individually.

One of the important founding assumptions of Beard's text was that there was a patient base for this new disease. In many ways, he secures a patient base by recognizing almost any major or minor affliction as a symptom of neurasthenia. For example, a woman (or man) could be diagnosed with neurasthenia simply for experiencing a bout of insomnia, dyspepsia or exhaustion. Providing such a wide-ranging list of symptoms allowed virtually anybody with any ailment to seek medical treatment and be diagnosed with neurasthenia. People looking for reasons why they were stressed, anxious, tired, depressed, etc., could look down Beard's list of symptoms and see the truth of their diagnosis. Other important underlying assumptions included that people would be able to relate to Beard's economic or mechanistic metaphors, that they would understand and accept the idea of body as bank, body as battery, body as electric circuit; that they would agree that women's education was a bad thing; that they would be willing to overlook, ignore or accept the racist, classist and sexist implications of Beard's discourse. Addams, for example, was very concerned about the "machinery" of the factory, the effects of industrialization, including the too-long and grueling work hours for immigrant women and children.

The people most likely to read Beard's text were the people most likely to either diagnose or get diagnosed with neurasthenia. In other words, Beard's primary audience included doctors, potential patients and anyone with the means to access his book. It appealed to the male doctors interested in establishing themselves a part of the larger medical community, who recognized that studying, diagnosing and treating neurasthenia was a lucrative business. It appealed to upper-class intellectuals because it was a status symbol, a mark of artistic sensibility and refinement. It appealed to people who could afford the treatment. Treatments for neurasthenia were expensive, for men, who had to leave their jobs and take an extended vacation out West, and, for women, who often submitted to spending six to eight weeks in a private doctor's clinic

or at a resort-style spa in England or France. It appealed to a wide-ranging group of Americans looking to name their illness. It could help people explain why they were feeling stressed, anxious, depressed, tired, etc. It validated brain-work, making it seem more important than muscle-work. Finally, it worked with traditional gender roles and family systems.

In order to appeal to the widest possible audience, Beard constructed his text in a popular rather than scientific style. He does not include case studies and scientific data. Instead, he defines neurasthenia through metaphor, a way in which Americans could easily understand his meaning. His text is readable and interesting and somewhat humorous to the modern day reader. He arranges his text logically by providing an overview of his concepts in the Preface. He defines what neurasthenia is and what it is not, lists the common symptoms and explains the importance of studying neurasthenia in the introduction. In the first chapter, he provides his metaphorical meanings. In the subsequent chapters, he elaborates on the causes and symptoms of neurasthenia and discusses the reasons why “brain-workers” live so long. Finally, he concludes his text by explaining that once Americans have adjusted to changing situations of their lives, neurasthenia would fade into oblivion, a prediction that came true in the sense that the concept of neurasthenia as a disease in America all but disappeared by the 1920s.

Rereading Beard and doing a more in-depth rhetorical analysis of *American Nervousness* allows for a better understanding of exactly how the women writers I analyze use the rhetoric of neurasthenia in their texts. For example, it allows for an understanding of the ways in which neurasthenia was constructed from medical, cultural and metaphorical discourses to create a universal structure of thought, and to see how the claims Beard is making and the founding assumptions of his text are repeated and/or challenged by the women writers I am analyzing. It is also important to understand the metaphors Beard used in conveying his understanding of neurasthenia to the larger American culture in order to locate the places where these metaphors are reused and/or revised by the texts I am looking at.

Looking at the rhetoric of neurasthenia not only from a rhetorical perspective but also through the lens of disability studies allows an even more complex view of how the rhetoric operates in the women’s text I am analyzing. Since the rhetoric of neurasthenia is a rhetoric that relies primarily on metaphors for defining and describing human health and disease, it is important to consider the role of metaphors for defining and describing illness and disability

from a disability studies perspective. In *Claiming Disability: Knowledge and Identity*, Simi Linton points out, “these figures of speech further objectify and alienate people with disabilities and perpetuate inaccurate information about disabled people’s experience” (128). Furthermore, the metaphors of battery and bankruptcy, etc. promote a view of the disabled body as run down, equate a disabling condition with poverty or failure, that is, spin out what the metaphor says about disabled people here to follow up the Linton quote. Reading James, Addams and Gilman’s writing from a disability perspective allows me to examine how they challenge the commonplace assumptions, metaphors and medicalization of their conditions, to gain agency over their lives and disabilities.

In *Claiming Disability*, Linton offers a view of what it means to write from a disability studies perspective. First, she points out that, “A disability studies perspective adds a critical dimension to thinking about issues such as autonomy, competence, wholeness, independence/dependence, health, physical appearance, aesthetics, community, and notions of progress and perfection—issues that pervade every aspect of civic and pedagogic culture” (118). This view is important to my work because all three of the women I have chosen to write about were diagnosed with neurasthenia and experienced their condition, whatever it might be called, as a disability and wrote about living with their conditions. Viewing their writing from a disability studies perspective allows for a complex analysis of the connections between their lives, their bodies, and their work. Furthermore, many of the issues that Linton sees as central to a disability studies perspective inform the women’s texts I analyze. For example, *The Diary of Alice James* is replete with questions about “autonomy,” “competence” and “wholeness.” Furthermore, the scholarship on James is replete with questions about competence, independence/dependence and health. As I point out in Chapter Two, critics have argued that 1) James’s invalidism was her work/career, implying that it was the only “field” in which she was completely competent and 2) she was unable to see herself outside of her invalidism. Viewing James’s work, in particular, from a disability studies perspective allows me to re-read the script of James’s life, to critically examine the belief that her invalidism was her work and to provide some insight into the reasons why James characterized her disability as central to her identity and to see this move in a positive light, as realistic and brave, not as a refuge from the demands of the world.

Linton also points out that disability studies scholars have examined “such fundamental ideas as who is considered a burden and who a resource, who is expendable and who is esteemed, who should engage in the activities that might lead to reproduction and who should not, and, if reproduction is not the aim, who can engage in erotic pleasures and who should not” (118). Many of these ideas surface in the women’s writing and medical literature I analyze as well. In particular, women diagnosed with neurasthenia (and hysteria) were considered a “burden” to those responsible for taking care of them. In addition, the writing I analyze, because it is inextricably tied to the economic rhetoric of neurasthenia, is caught up in questions about resourcefulness and expenditure, production and reproduction, etc. As I point out in Chapter Four, Charlotte Perkins Gilman examines issues of women’s production and reproduction and argues that women have been “disabled” by a society because they have had only limited access to work in the public sphere and have been relegated primarily to the private sphere and that they would be “enabled” by their productive rather than reproductive contributions. Reading her work from a disability studies perspective allows me to further explore the economics of disability, assumptions about women’s resourcefulness and/or expendability and questions about ability and disability, production and reproduction.

The field of disability studies has developed, partly, as Linton points out, as a response to the medical perspective that has sought to pathologize disability and view disability as an individual rather than a cultural problem. As Tobin Siebers points out, “The medical model situates disability exclusively in individual bodies and strives to cure them by particular treatment, isolating the patient as diseased or defective. Social constructionism makes it possible to see disability as the effect of an environment hostile to some bodies and not others, requiring advances in social justice rather than in medicine” (173). The women I am writing about challenge the medical perspective of their disabilities and illnesses in a number of ways, as well, and Gilman, in particular, exposes disability as a function of society rather than as evidence of a dysfunctional individual. In the writing of James, Addams and Gilman, I have detected strands of an early disability rhetoric that seeks not only to challenge medical authority but also to pose questions about who is disabled, how they are disabled and why they are disabled.

Questions about what is considered “normal”/“abnormal” surface in all of the women’s text I analyze. In “Constructing Normalcy: The Bell Curve, the Novel, and the Invention of the

Disabled Body in the Nineteenth Century,” Lennard Davis argues that, “To understand the disabled body, one must return to the concept of the norm, the normal body” (). Furthermore, he points out the term “normal”—meaning ‘constituting, conforming to, not deviating or different from, the common type or standard, regular, usual’ did not enter the English language until 1840 (3). Before the word “normal” and before what David calls the “hegemony of normalcy” existed, the dual concepts of the “ideal” and “grotesque” shaped cultural perceptions of human body (4). While the ideal body was a nod toward the “perfect” body, the grotesque “as a visual form was inversely related to the concept of the ideal and its corollary that all bodies are in some sense disabled” (4). In that sense, the grotesque signified a common humanity. But, with the rise of the sciences and of industry in the nineteenth century came the “necessity” of determining the “norm” or average person/worker. As Davis points out, “We can see in retrospect that one of the most powerful ideas of Marx—the notion of labor value or average wages—in many ways is based on the idea of the worker constructed as an average worker” (5). Of course, we might also add that Marx’s “average worker” was a man. Women, then, were “disabled” not only by scientific (biological and mathematical) theories (i.e. eugenics, phrenology) but also by many other socio-cultural (economic, sociological, psychological, philosophical, medical, etc.) theories as well.

As David points out, “The concept of the norm, unlike that of an ideal, implies that the majority of the population must or should somehow be part of the norm” (6). People with disabilities would obviously fall outside of the bell-shaped curve that delineated normalcy. The notion that some bodies were normal and some bodies were abnormal gave currency in the later 19<sup>th</sup> century to eugenicist theories that sought to eliminate “‘defectives,’ a category which included the ‘feeble-minded,’ the deaf, the blind, the physically defective, and so on” (7). As the theory of eugenics gained ground, in the nineteenth century, so did the idea that anyone who was “undesirable”—including “criminals, the poor, and people with disabilities,” should be eliminated (8-9). This kind of thinking, Davis points out, “plays into the metaphor of the body” (9). The idea, of the “body politic,” which subjected individuals to ideas about civic fitness combined an “industrial mentality that saw workers as interchangeable and therefore sought to create a universal worker whose physical characteristics would be uniform, as would the result of their labors—a uniform product” (9). Again, this worker was obviously, universally a man. Women’s labor, whether in the private or in the public sphere is left unaccounted for—a problem

that both Addams and Gilman address using the economic rhetoric of neurasthenia. As I point out in Chapter Three, Addams was also aware of and concerned about the problem of poverty and equal citizenship, and, in some ways, challenged metaphors of the body that equated criminality, poverty and disability and determined those unfit for citizenship.

Perhaps most important to my analysis of James, Addams and Gilman is the disability perspective on bodily pain. In “Disability in Theory,” Siebers points to a history of seeing the disabled body as representative of the idea that all bodies are socially constructed, but argues that, more importantly, “the disabled body changes the process of representation itself” (173). Pertinent to my analysis is Siebers’s discussion of disability and representations of bodily pain. He explains that, “There are only a few images of pain acceptable on the current scene, and none of them is realistic from the standpoint of people who suffer pain daily.” On the one hand, pain is often defined as “regulatory,” a “tool used by society to maintain its norms.” On the other hand, pain is defined as “resistant,” as producing “unimaginable...suffering that marks out the individual as a site of resistance to social regulation.” Pain is often represented, as Siebers points out, as psychic rather than physical, in a sense denying the difficulties of living with a disability that involves chronic bodily pain. Perhaps most important to my argument, though, is Siebers’s claim that, “The great challenge every day [for people with disabilities] is to manage the body’s pain, to get out of bed in the morning, to overcome the well of pain that rises in the evening, to meet the hundred daily obstacles that are not merely inconveniences but occasions for physical suffering” (177). Even if using the word “overcome” undercuts Siebers’s point about “managing” physical pain, his idea is important to my analysis of Alice James, in which I challenge the dominant views of her disability as her work and her bodily pain as “regulatory” and/or “resistant.” I argue, instead, that the work of living with a disability was in managing her bodily pain.

Beard defines neurasthenia medically, culturally and metaphorically to create a universal means for understanding human health and disease. Lutz points to the ways in which neurasthenic rhetoric evolved during the turn of the last century into a universal means by which individuals could negotiate the changing American culture. By doing a more in-depth rhetorical analysis of Beard’s work and incorporating a disability studies perspective, my study expands Lutz’s literary history of neurasthenic discourse by illustrating how the women writers I analyze

used the rhetoric of neurasthenia to make important arguments about women's disability and women's work. The overarching goal of the following three chapters is to illustrate the rhetoric of neurasthenia at work in the texts I analyze, to show how James, Addams and Gilman used this rhetoric for their own specific rhetorical purposes.

## Chapter Two:

“How well one had to be, to be ill!”: Neurasthenic Economies in *The Diary of Alice James*

In a 2001 letter to the editor of *Psychiatric Services*, Nancy Hedrick expresses frustration over a recent “noncritical review” of Jean Strouse’s *Alice James: A Biography*. Hedrick’s concern is that Strouse defines James’s disability as a “psychosocial” and “personal” problem rather than as a “gynecological disease.” Writing from her knowledge of gynecology and medical research, Hedrick asserts that James’s disability was most likely a result of endometriosis, which she defines as “a condition caused by the presence of endometrial-like tissue outside of the womb,” often causing “abdominal and back pain, gastrointestinal distress, and irregular menses.” James’s “symptoms and her physical complaints,” Hedrick reasons, “fit the model of a menstruation-related disorder.” Furthermore, James’s “psychiatric symptoms” were concurrent with her “physical problems.” And, James’s death from breast cancer also indicates endometriosis, since “women with endometriosis are at excess risk for female cancers” (Hedrick 1106).

On the one hand, Hedrick’s view of James’s disability as primarily a somatic issue with psychosomatic symptoms contrasts and challenges the viewpoint of many of James’s critics that her disability was the result of her inability to cope with the circumstances of her life, in particular Victorian constraints on women. On the other hand, Hedrick participates in the common desire to “fit” James with a diagnosis. From a disability studies standpoint diagnosing James with endometriosis serves only to simplify what was actually a complex set of personal, cultural and medical circumstances that contributed to the disabling conditions of James’s life. Furthermore, in diagnosing James with a “menstruation-related disorder,” Hedrick is participating in turn-of-the-century male-dominated ideology, in which doctors often located women’s illnesses in their sex organs or wombs. In fact, it would be very difficult to determine the nature of James’s disability. The only definitive diagnosis James ever received was breast cancer. Thus, any guesses about what else may have contributed to her disability remain only guesses and only serve to hinder the process of learning about Alice James.

In the following chapter, I do not characterize the nature of James’s illnesses or “breakdowns.” Instead, I analyze how she wrote about them in her diary. I argue that she used

the rhetoric of neurasthenia, a popular framework for defining and describing illnesses and disabilities of various kinds at the turn of the last century, to make meaning of her experience of living as a disabled woman. Specifically, I argue that James uses the rhetoric of neurasthenia to understand her mental and physical pain, which, since her youth, had been vaguely explained as a problem of the “nerves.” And, I argue that the use of this rhetoric allows her to assert herself as a subject in the face of always being seen (by doctors and those in the larger culture) as an object because of her disability. Finally, I argue that James used the rhetoric of neurasthenia to reflect on her worth and represent the work of living with a disability. Although James has been accused of choosing her disability as her career, I argue, instead, that she developed a deep understanding over the course of her life and through writing in her diary that living with a disability and bodily pain in particular was, in fact, a kind of work. Therefore, if James seemed consumed by the “work of being sick,” it was not by choice but by necessity (Strouse 291).

### **Out of the Footnotes: Recovering Alice James**

I include Alice James in this dissertation because women have often (with a few exceptions) been either forgotten or purposely left out of studies of neurasthenia and neurasthenic rhetoric. As Krista Ratcliffe suggests in *Anglo-American Challenges to the Rhetorical Tradition: Virginia Woolf, Mary Daly, and Adrienne Rich*, such a study “may give voice to women’s/woman’s silenced contributions, shedding light on their visible absences that may be perceived as flitting presences only in prefaces, footnotes, dedications, or margins” (3). In fact, Alice James has often been relegated to “marginal status.” For example, both major texts written about neurasthenia and/or neurasthenic rhetoric have included James only as a side-note, neurasthenic character, one among a long list of other elite Americans thought to have suffered from the disease. In his book *Before Freud: Neurasthenia and the Medical Community, 1870-1910*, F.G. Gosling mentions James only once, as part of a “list of neurasthenics who were well known in American intellectual circles” (15).

Projects devoted to women’s illness have also discounted James’s diary as making a substantial contribution to theories shaping women’s illness. The most notable texts on women’s illness, including Elaine Showalter’s *The Female Malady: Women, Madness, and English Culture, 1830-1980* (1985), Carroll Smith-Rosenburg’s *Disorderly Conduct: Visions of Gender in Victorian America* (1985), Anne Hunsaker Hawkins’s *Reconstructing Illness: Studies in*

*Pathography*, and Diane Price Herndl's *Invalid Women: Figuring Feminine Illness in American Fiction and Culture, 1840-1940* (1993), have focused primarily on fictive representations of illness or on male medical discourses rather than on women's nonfiction representations. None provides a substantial discussion of neurasthenia, neurasthenic rhetoric or Alice James. In fact, Alice James is entirely forgotten in two of these texts, even while all four remember William and/or Henry James.<sup>6</sup>

In *American Nervousness, 1903*, Tom Lutz includes James only on a "roster of other cultural workers who either had been diagnosed as neurasthenic, displayed the characteristic symptoms of neurasthenia, and/or relied heavily on neurasthenic themes and images in their writings" (19). Lutz refers Alice James later in his text, but only in connection with her brothers William and Henry James. Interestingly, and oddly, Lutz's index supplies the name of Alice Howe Gibbens James (William's wife) for the places in the text in which both his sister and his wife appear—perhaps a testament to the ways Alice James sometimes is forgotten.

#### **"Dear Inconnu": James's Audience and Purpose**

In 1889, while at Royal Leamington Spa (a place famous for treating nervous conditions) in Warwickshire, England, James decided to start keeping a diary,<sup>7</sup> which was published

---

<sup>6</sup> Alice James is discussed at length in Diane Price Herndl's *Invalid Women*, and she is mentioned briefly in Elaine Showalters's *The Female Malady*.

<sup>7</sup> The first version, called *Her Brothers, Her Journal*, was published in 1934 and edited by Anna Robeson Burr. The second version, called *The Diary of Alice James*, was published in 1964 and edited by Leon Edel. There has been some controversy over these two versions of the diary. Briefly, Burr's version begins with a detailed history of the James brothers and leaves out parts of some entries and some newspaper clippings James included in the original manuscript. Edel's version, while more true to the original manuscript, includes commentary that works to consign James to "marginal status."<sup>7</sup> Since Edel's version of the diary is the more accurate of the two, however, I have used his edition as the basis for this chapter.

posthumously, nearly half a century after her death.<sup>8</sup> Previous to this decision, James had been keeping a “commonplace” book, which served as a place where she could record some of her favorite quotes from the many books she read. Though James continued this mode of recording things in her diary, it also served as a place for voicing many of her private concerns about herself and her disability—her past experiences and present encounters, her mental and physical pain and discomfort, her experience with unsympathetic doctors, and, finally, her death. In her first entry, written in June of 1889, James supplies the reasons why she started keeping a diary in the first place. She writes:

I think that if I get into the habit of writing a bit about what happens, or rather doesn't happen, I may lose a little of the sense of loneliness and desolation which abides with me. My circumstances allowing of nothing but the ejaculation of one-syllabled reflections, a written monologue by that most interesting being, *myself*, may have its yet to be discovered consolations. I shall at least have all my own way and it may bring relief as a an outlet to that geyser of emotions, sensations, speculations and reflections which ferments perpetually within my poor old carcass for its sins; so here goes, my first Journal!

While James understood that she was bound by propriety to remain tight-lipped in public, she planned to use the private space of her diary to release some her emotional tension, which, she hoped, would also have a positive effect on her bodily state. She wanted to develop a “habit” of writing that would provide her with an “outlet to that geyser” of feelings that “ferment perpetually” within her, and she hoped that this habit would allow her to discover things about herself that could only be learned through the act of writing. She cannot keep back her tide of “emotions, sensations, speculations and reflections” anymore and views her diary as a space to let them overflow. What James already knows is that her body feels “old” and already dead, a “carcass” at age forty. Thus, writing about her feelings and experiences is especially important, and even necessary, at this time. The act of writing for James was both a means of self-discovery and means of engaging with her society—albeit a rather limited engagement. It was also her way

---

<sup>8</sup> In her biography of Alice James, Strouse notes that Henry's reluctance to have the dairy published may have had something to do with the length of time it took to publish it (321). In fact, the diary was only published after both William and Henry had died.

to show mental strength in spite of physical weakness. With its attention to her experience of living with a diagnosis of neurasthenia, her diary has the capacity to provide an alternative view of an individual, familial and cultural history.

Writing, then, opens up a private space for James to discuss living with a diagnosis of neurasthenia that she cannot express in her public life. Though her disability (invalidism) was visible, she avoided speaking about her bodily pain and other discomforts publicly or in conversations amongst her peers. Her choice to begin keeping a diary only four years before she died may have been symptomatic of her desire to make her experience of living with a diagnosis of neurasthenia plain for her family, friends, doctors or even larger society. In fact, James suggests a number of audiences for her writing throughout her diary, herself being only the most obvious one. She also addresses two of her entries to “Inconnu,” literally meaning “stranger,” and suggests throughout that she is writing *to* someone.

In an entry written in January of 1891, James writes, “dear Inconnu, (please note the sex! pale shadow of Romance still surviving even in the most rejected and despised by Man)” (166). In this instance, she suggests that she is writing to a male audience and that she is partaking in a kind of romantic exchange with this male audience, even as she calls herself “the most rejected and despised by Man.” In an earlier entry, written in July of 1890 (which I cite later), James addresses “Inconnu,” but does not suggest a male-only audience. Perhaps, then, James is writing to an audience of women and men who she does not yet know and understand because her disability has isolated and separated her from larger society. Read this way, her diary might have been a way for her to persuade these strangers to change their attitudes about her, as a disabled woman, as well as other disabled women. Through diary entries in which James addresses her audience directly (and in other entries), James asserts herself as a subject and, in so doing, recovers a view of herself as something more than a passive object—the way women diagnosed with neurasthenia (and invalid women) were often viewed by the male medical profession and the larger culture.

Perhaps more importantly than any “stranger” audience that James imagined would read her text, James also implies several other audiences for her work, including her longtime friend

and caregiver Katharine Peabody Loring<sup>9</sup> and her brothers, especially Henry and William. Since James wrote in the absence of her caretaker (for the most part) and her brothers, she may have imagined them as being interlocutors for her reflections (Strouse 275). In many instances, she draws upon conversations and experiences from her past as well as present and constructs a kind of dialogue between her and her brothers (who she saw only intermittently) and Katharine, who was busy attending to her own sister's health when James began keeping a diary.

The diary form may have offered James a private arena to express personal experiences and challenge public conceptions of illness and disability. In *The Rejected Body*, Wendell argues that, "Much of the experience of disability and illness goes underground, because there is no socially acceptable way of expressing it and having the physical and psychological experience

---

<sup>9</sup> The pair had met in the mid-1870s when Katharine was the head of the history department for the correspondence school, Society to Encourage Studies at Home, where Alice was teaching. After knowing each other for only a couple of years, the two started spending a significant amount of time together. By 1879, they were nearly inseparable. As Alice's biographer Jean Strouse points out, Katharine was "a devoted companion who could be everything to [Alice]—man and woman, father and mother, nurse and protector, intellectual partner and friend" (197). In fact, many of their acquaintances termed their relationship a "Boston Marriage," which was an "exclusive relationship" between upper-class single women in late nineteenth-century America (Strouse 200). In many ways, the partners always had a working relationship, first as department chair and teacher and later as nurse and patient, but it was always co-dependent. Katharine not only took charge of caring for her friend Alice, but the two also clearly enjoyed each other's company and spent many months and years trekking through New England and Europe together. When they were away from each other or "whenever Alice had to share Katharine's affections," Alice would fall ill, which both her family (especially her brother Henry) and her biographer attributed to Alice's desire to guarantee her "loved one's undivided attention" (Strouse 199). While this may have been the case, it is also possible that Alice simply felt better in Katharine's presence and became depressed when forced to live without her affection. No matter what the reason, it is important to understand that these women shared such a close relationship that Alice, at the end of her life, entrusted Katharine with her life's work, her diary, which is the subject of this chapter.

acknowledged” (40). Again, James’s text, too, went “underground” for almost half a century before it was posthumously published. It is only recently that a social space has opened up to include writing about illness and disability. While the diary form has presumably always been the most socially acceptable way of expressing illness and disability because it is often kept private, even when diaries are published, they are still understood as existing in the realm of the personal, not usually written for public view and/or scrutiny. In *Recovering Bodies: Disability, Illness and Life Writing*, G. Thomas Couser argues that, like other “life-writing genres” (including autobiography, biography, and memoir) are “located on the borders of the literary” and therefore “are particularly accessible to marginalized individuals” (4). Perhaps James’s diary became a way for her to express and rhetorically engage with and/or contest the received meanings of her experience of living with a disability in a socially “sanctioned” way, but also in a way that was “accessible” to her as a marginalized individual.

Paying close attention, then, to the subtleties of James’s text reveals an imagined audience (her brothers, Katharine, her doctors, the public) and a real audience (herself), both of which affected *what* James wrote and *how* she wrote it. It also becomes apparent that James imagines several rhetorical purposes for her writing, including (as I have shown above): to cultivate a “habit” of writing; to gain some relief from her “loneliness,” desolation, mental and physical pain; to reveal a sense of how she sees herself as opposed to how others see her; and, to record and reflect on her experiences.

Most importantly, to use the rhetoric of neurasthenia to suggest that living with a disability was a kind of work. In *The Gold Standard and the Logic of Naturalism: American Literature at the Turn of the Century*, Walter Benn Michaels relates the idea that turn-of-the-century male doctors such as Mitchell believed that women were weaker and more prone to developing (developing what? missing word) than men. Interestingly, however, Michaels points out that this assumed “physiological weakness” on the part of women made “their bodies the site of a certain kind of work.” Because women were “in danger of losing ‘self control,’ they had to make ‘repeated efforts’ to resist [neurasthenia]” (7). In this chapter (and in the chapters to follow), I build on Michaels’s ideas about women’s illness and women’s work. In particular, I illustrate the validity of his idea that women’s bodies were “the site of a certain kind of work,” the work not only of resisting neurasthenia but also of managing pain.

## Using Neurasthenic Rhetoric: Resisting Neurasthenia

Critics of James's diary often mask or even deny the "reality" of James's disability as she expresses it in her diary and read it instead as resistance to cultural change. In the introduction to *The Diary of Alice James*, Leon Edel speculates that "at least some part of her condition was the common one of Victorian restrictions on women" and cites Henry James as saying that her "tragic health was, in manner the only solution for her of the practical problem of life" (qtd. in Edel 8). Born on August 7, 1848, to an affluent family in a comfortable New York City neighborhood, James was the youngest of five children and the only girl in the family. Her two eldest brothers, William and Henry, obviously enjoyed much of the limelight of the James family. When James was a child, the family, like many other upper class families in late nineteenth-century America, spent a significant amount of time traveling abroad. While abroad, James's brothers benefited from an informal yet rigorous education. Alice, on the other hand, was relegated to the home, where she read and studied French and music and worked alongside her mother Mary James taking care of household duties. Given Alice's talent for writing, however, she was not satisfied with this life. So, the argument goes, she became a neurasthenic.

This view of James's "tragic health" as related to the constraints imposed on Victorian women has persisted, as has the view of James's disability as her choice of work. In her introduction to *The Death and Letters of Alice James*, Ruth Bernard Yeazell argues that James viewed invalidism as her career and dying as her life's work. She cites both James's letters to family and friends and her diary as evidence of these unlikely pursuits. As an example, Yeazell cites an entry written in January of 1892 where James celebrates her diagnosis of breast cancer as the "palpable disease" she had long been waiting for (qtd. in Yeazell 2). In her critically acclaimed *Alice James: A Biography*, Jean Strouse follows Yeazell's lead and argues that, "The intelligence and energy Alice might have used in some productive way went into the intricate work of being sick" (291). Reading James in this way is to assume that she chose to be disabled or that she worked at being disabled. I challenge this point of view and argue instead that James did not choose to be disabled as a means of resisting the constraints imposed upon her by the larger culture. The "work of being sick" was not James's career choice but instead represented the difficult work James had to do to resist neurasthenia and manage her mental turmoil and physical pain.

This work began early in James's life. By the time James turned twelve, in 1860, the family was already expressing concerns about her health. Like other Victorian girls and women, James was susceptible to becoming nervous. As Strouse explains:

Medical science at the time viewing the human organism as a precarious balance between body and mind, nature and civilization, confirmed society's assumption that the balance was even more unstable in women than in men. The female body seemed a fine, frail mechanism that could easily fall victim to excessive mental activity (69).

Thus, James was monitored closely by her parents and missed out on any number of opportunities for the sake of her health. Even despite these missed opportunities, she lived a relatively normal life while in Boston; she became involved with the family social network, visiting the homes of her friends for days at a time.

By 1866, however, her nerves seemed to get the better of her and she was taken to the home of Dr. Charles Fayette Taylor, a doctor famous for treating women with nervous conditions (Strouse 98). Like Beard and Mitchell, Taylor adhered to the principles of the neurasthenic economy, which dictated that all humans had a certain amount of nervous energy in the bank that if improperly spent could result in "nervous bankruptcy." Unlike many other doctors, however, Taylor remained unconvinced of the ingeniousness of the "rest cure." Therefore, he developed his own method for treating nervous conditions, which he called the "movement cure." Presumably, James took some form of Taylor's "movement cure" in the seven months she stayed at his home. When she left in May of 1867, she was feeling remarkably well, and even "resumed her Cambridge rounds, visiting with old friends, attending dinner parties, meeting the recent 'acquisitions' to her family's social circle" (Strouse 111).

Her cure did not last long, however, and she had a "breakdown" in early 1868, at age nineteen, which she wrote about many years later in her diary. In this entry, James takes up the rhetoric of neurasthenia to define and describe a complex blend of mental turmoil and physical pain. In this instance, and in others throughout her diary, James relies on this language explain her inner feelings and outer sensations and implies the difficulties involved in living with the further restrictions (in addition to those placed upon Victorian women) that being diagnosed with neurasthenia imposed on her. Referring to one of her brother William's papers, James writes:

As I lay prostrate after the storm, with my mind luminous and active, and susceptible of the clearest strongest impressions, I saw so distinctly that it was a fight simply between my body and my will—a battle in which the former was to be triumphant to the end. Owing to some physical weakness, excess of nervous susceptibility, the moral power *pauses*, as it were, for a moment and refuses to maintain muscular sanity, worn out with the strain of its constabulary functions.

As I used to sit immovable in the library, with waves of violent inclination suddenly invading my muscles, taking some one of their varied forms such as throwing myself out of the window or knocking of the head of the benignant Pater, as he sat, with his silver locks, writing at his table, it used to seem to me that the only difference between me and the insane was that I had only all the horrors and suffering of insanity, but the duties of doctor, nurse, and straight-jacket imposed upon me too (182).

Here, Alice combines George Beard and William James's neurasthenic rhetoric to reveal a kind of tug-of-war taking place between her body and her mind, and she reflects a neurasthenic economy of morality. As Lutz points out, neurasthenia could be a "sign of either moral laxity or extreme moral sensitivity" (4). Reflecting this idea and Beard's economic rhetoric of neurasthenia, James explains that an "excess of nervous susceptibility" could lead to a shortage of "moral power." Thus, she considers killing her father. But, she does not kill her father because she is not "insane." As she points out, she has all the "horrors and suffering of insanity" but, perhaps because she has been so unsuccessfully treated by the medical profession, she has to be her own "doctor, nurse, and straight-jacket." In this instance, James reflects Beard's ideas about the difference between "brainlessness" and "nervelessness." As I illustrate in Chapter One, Beard insisted that nervousness was not a mental but rather a physical disease. It could cause mental irritability but was not caused by mental debility. Mental strength could coincide with physical weakness and vice versa, Beard argued. As the entry continues, James builds on her theory of the connection between illness and morality: "When all one's moral and natural stock-in-trade is a temperament forbidding the abandonment of an inch or the relaxation of a muscle, 'tis a never-ending fight" (182). In other words, James blames her "moral" training or "temperament" for the tug-of-war taking place between her body and her mind and reveals her belief in her "moral sensitivity" as a potential cause of her neurasthenia. Here, James also reveals the ways in which

she was forced to resist neurasthenia and how that resulted in a “fight” or war against her own body.<sup>10</sup> James’s use of the rhetoric of neurasthenia, here as elsewhere in her diary, allows her to

---

<sup>10</sup> After this first “breakdown,” James had learned well how she was expected to behave. She gave up, according to Strouse, any hopes of attaining a career and “filled her days with visits, light reading, and the charitable work that provided middle-class women with a sense of usefulness” (132). She joined a sewing bee and later became its president. She joined the Female Humane Society of Cambridge and served indigent and sick women and children. In the early 1870s, after she had recovered significantly from her “breakdown,” she engaged in a more intellectual course of study, reading more rigorous texts and sitting in on lectures at Harvard. And, she took a trip to Europe in 1872. When she returned, she busied herself once more with her social network of friends and charities. In the late 1870s, she became involved in teaching for the Society to Encourage Studies at Home, which was a “correspondence school for women” (Strouse 170). Even though James abandoned any career ambitions she might have had, the activities she took part in allowed her to remain relatively active in her community.

In the early 1880s, James traveled to Europe again, this time with Katharine Loring. By 1882, however, James was relegated to the home again, not because of her own “illness,” but because her father was ailing. Caring for her father and seeing him through his death, in the winter of 1882, took its toll on James. In 1883, she decided to enroll herself at the Adams Nervine Asylum, a treatment facility for people with “nervous disorders.” As Strouse points out, doctors at the

Adams Nervine held relatively enlightened views about the etiology of nervous disorders: they did not see nervous women as overeducated malingerers shirking their proper feminine functions or as histrionic victims of imaginary ills. Instead, they saw causes of nervous disorders in the strain and fatigue of quintessential feminine functions—domestic overwork and excessive caring for others (223).

After three months of treatment, from May to August, James left the asylum feeling better.

By 1884, however, both of James’s parents had died and she was in relatively poor health. Lonely, she decided to go to Europe with Katharine once again. Katharine had already been living in Bournemouth, England with her ailing father and sister, but returned to America to

express the difficulty of living with a disability that demanded immobility in a culture in which women were always already immobilized.

Like Edel, Yeazell and Strouse, I also read *The Diary of Alice James* within the cultural context in which she was writing. I contend, however, that James developed a deep understanding over the course of her life and illustrates in her diary that living with a disability was work, but it was not her chosen career. By the time she started keeping a diary, James knew that there was a certain amount of work required in living with a disability. Although James appears complicit with an economic understanding of her disability, she is reluctant to accept a diagnosis of neurasthenia and never names neurasthenia as her illness. Rather, she uses the rhetoric of neurasthenia to talk about her experience of living with a disability. In fact, neurasthenic rhetoric was the only “available means”<sup>11</sup> by which she could understand her illness at the time. And, neurasthenic rhetoric, if not the totalizing category of neurasthenia, allowed her to examine her worth.

In what follows, I analyze how James uses the rhetoric of neurasthenia to define and describe her mental and physical pain, to assert herself as a subject rather than as an object, to examine her worth in a culture that demanded either productive (for men) or reproductive (for women) labor. In engaging with the rhetoric of neurasthenia, James could comment on this rhetoric and illustrate that “doing” disability required a certain kind of work—work that James felt should not be discounted. While this discursive engagement was posthumous and occurred many years after the term “neurasthenia” was defunct, reading her diary alongside these male medical texts allows for a new interpretation of the rhetoric of neurasthenia—transforming how we understand the language itself and its influence on American culture, the discursive

---

bring James to London, England where Henry James was living at the time. The long trip had ill effects on James’s already fragile health, and by the time she arrived in England she was worse off than she was in America. Therefore, she stayed in London to be treated for her “ailments” and Katharine returned to Bournemouth to be with her family. By fall of 1885, however, the pair had moved in together in the London area, where they remained until James’s death in 1892.

<sup>11</sup> Here, I am referring to Aristotle’s definition of rhetoric as “The faculty of observing, in any given case, the available means of persuasion.”

relationship between patients and doctors, and, perhaps most importantly, women's experienced realities of illness and disability.

### **James's Recorded Life: Pain and Refinement**

Throughout her diary, James takes up the rhetoric of neurasthenia to define and describe her mental and physical pain. For example, in an entry written in June of 1889, James expresses the mental and physical difficulties with putting pen to paper: "A dozen times a day I find myself saying, 'I'll write to Aunt K.' I suppose I did so before; it only seems oftener now, when I have to pull myself up" (29). As Couser explains, "only a fraction of those who are ill and disabled actually write...[because] many of the sick and disabled are simply too ill—too debilitated or traumatized by their condition—to imagine writing about it" (5). Pulling herself up, in this instance, can be understood to mean summoning both the physical and the emotional energy required to compose. In this way, we might see James's writing as her work. As I argue previously, keeping a diary was a necessity for James at this time of her life, and, in many ways, it became a means toward self-discovery. However, as Strouse points out, James had always intended for her writing to be published (321). Therefore, she worked at constructing the kind of text that would engage her potential audience—something humorous, interesting and insightful.

In another entry, written in July of 1889, James uses the rhetoric of neurasthenia, and, specifically, the notion that getting an education was dangerous for women, and suggests that her physical pain is due at least in part to her mental over-stimulation. As James explains, "I can't read anything suggestive or that survives, or links itself to experience, for it sets my silly stomach fluttering, and my flimsy head skipping so that I have to stop" (50). This connection, and perhaps confusion, of mental and physical symptoms was characteristic of the way neurasthenia was understood by Beard, Mitchell and others. And, of course, the notion that reading was dangerous to women's health was emphasized by the male medical establishment and formed the basis for Mitchell's "rest cure" treatment that Gilman criticizes in the "The Yellow Wallpaper."

In the entry with which I title my chapter, written in July of 1890, James reveals the extent to which she relied on a neurasthenic understanding of her disability and uses the rhetoric of neurasthenia to characterize her mental and physical pain. But, in this instance, she also

presents subtle challenges to the male medical establishment by taking charge of her own “cure.” She writes:

How well one had to be—to be ill! These confidences reveal to you, dear Inconnu, so much mental debility that I don’t want to rehearse herein my physical collapses in detail as well, although I am unable to escape a general tone of lamentation. But this last prostration was rather excessive and comic in its continuation, consisting of one of my usual attacks of rheumatic gout in that dissipated organ known in the family as ‘Alice’s tum,’ in conjunction with an ulcerated tooth, and a very bad crick in my neck. By taking a very small dose of morphine—the first in three years—I was able to steady my nerves, and *experience* pain without distraction; for there is something very exhilarating in shivering whacks of crude pain which seem to lift you out of the present and its sophistications (great men unable to have a tooth out without gas!), and ally you to long-gone generations rent and torn with toothache such as we can’t dream of. I didn’t send for my Primrose Knight, having no faith in anything but the time-honoured nostrum of patience, with its simple ingredients of refraining from muscular contractions and vocal exclamations, lest you find yourself in a worse fix than you are already in (129).

In this entry, along with suggesting a potential audience for her diary, James takes up the rhetoric of neurasthenia to define and describe her ailments, but she also reveals a sense of the work involved in living with a diagnosis of neurasthenia and in managing her bodily pain. To review some of the information I presented in Chapter One, Beard described neurasthenia medically, as producing a wide range of symptoms, related to being “nervous” or becoming “nervously exhausted” and tied to the nervous system, and economically, in terms of a “deficiency or lack of nerve-force” or nervous energy and resulting in “nervous bankruptcy” (5 and 9). This dual definition resulted in what became an influential set of beliefs about the human mind and body in the late nineteenth and early twentieth centuries. It offered a means by which many people could define and describe their bodily experiences in ways the larger culture could understand. And, it was frequently diagnosed in upper and leisure class individuals and intellectuals. From the beginning of the entry, then, James subtly hints at the neurasthenic ideology that dictated that, “one had to be” well “to be ill!” First, one had to be well off. Second, one had to be well educated. Third, one had to be well enough to undergo treatment. Finally, this one line also

reveals that one had to be well enough to write about being ill; one had to be well enough mentally and physically in order to put pen to paper. In fact, as I have pointed out, James expresses the difficulty of putting pen to paper on other occasions in her diary. Of course, she dictates some of her last diary entries to her Katharine. But, she finds, in neurasthenic rhetoric, a way to write about her experience of living is a disabled woman.

In the lengthy entry cited above, James describes her most recent “collapse” in economic terms; it is “excessive...in its continuation” and results in an imbalance of nerve-force. Thus, she has to take morphine in order to “steady my nerves.” Once her nerves are steadied, she is able to “*experience* pain without distraction” unlike, of course, “great men unable to have a tooth out without gas!”—perhaps a gentle rebuttal to the cultural attitude toward pain that suggests women cannot bear pain like men. Although James connects her physical pains to a problem of the “nerves,” the pain she experienced from having a tooth out was probably due to the “nerves” in her mouth. But, she seeks a more spiritual connection to pain here, which she sees as a bridge to other people’s pain. Indeed, being neurasthenic had the benefit of connecting James to other people experiencing similar kinds of pain, and may have made her feel less alone.

From a disability studies perspective, this entry is a critique of the medicalization of and objectification of people with disabilities. James’s desire to experience pain might be read in terms of her struggle to regain a subjective experience of pain. In addition, in the last part of this entry, James references the “rest cure,” with her announcement that she “didn’t send for my Primrose Knight” (who the reader later learns is her doctor) and her suggestion that she must practice “patience” and save her energy by “refraining from” moving or speaking. As Annie Payson Call notes in her 1891 self-help book *Power Through Repose*: “One of the first cares of a nervous invalid, or with anyone who suffers at all from overstrained nerves, should be for a quiet, mellow voice (31). Of course, this remedy was complicit with both the conventional expectations of womanhood in the late nineteenth century and the gendered nature of neurasthenic rhetoric. Although James’s remedy to her own problem was in line with what would have been prescribed by her doctor (bed-rest), it is interesting to note her insistence on taking charge of her own pain and her own recovery. Perhaps the rhetoric of neurasthenia allowed James to gain a sense of agency over her body. In gaining agency over her body enables James to assert her own subjectivity.

In *American Nervousness*, as I point out in Chapter One, Beard argued neurasthenia was a particularly American disease (although he acknowledged it occurred elsewhere as well) and was related to the developments of modern civilization (vi). This understanding of neurasthenia as an American problem is evidenced several times in James's diary. In one instance, a British woman, Miss Blanche Leppington, observes James in her sick bed and remarks that "the scene 'will remain fixed in my thoughts as the most pathetic I ever saw, and in my imagination as the [most] picturesque and American' (140). In another instance, James notes the "simple organization" of British women who marry again after being widowed or divorced. She continues, "As they do it within a year or two, the moral flesh must be as healthy as that pink substance of which they are physically compact, the torn fibres healing themselves by first intention evidently" (148). Here, James insinuates a contrast between the "simple organization" of British women and the apparent "complex organization" of American women, what Beard terms a "fine organization" in his list of characteristic features of the "nervous diathesis" (25-26). In his text, Beard includes a large section in his book to distinguish between the American and English woman, arguing that the former express a "superior fineness and delicacy of organization," and are more susceptible to developing nervous conditions (70-71).

Reflecting neurasthenic rhetoric and ideology James positions herself, in her diary, as a stereotypical, American neurasthenic—both delicate and sensitive. James takes up the rhetoric of neurasthenia, in several diary entries, in order to reflect her sensitivity and intelligence, perhaps as a means to explain her "overly" emotional behavior. In an entry written in June of 1889, she claims to appreciate nature in ways her neighbors cannot. She writes:

I went out again today, and behaved like a lunatic, 'sobbed,' *à la* Kingsley, over a farmhouse, a meadow, some trees and cawing rooks. Nurse says there are some people downstairs who drive everywhere and admire nothing. How grateful I am that I actually do *see*, to my own consciousness, the quarter of an inch that my eyes fall upon; truly, the subject is all that counts! (31; emphasis original)

In this entry, James calls herself a "lunatic" for "sobbing" over something that would be considered ordinary by most. However, she explains her overly emotional reactions by comparing herself to the "people downstairs who drive everywhere," and presumably see extraordinary things, but "admire nothing." She explains that, unlike these other people, she can

“actually see” the beauty of the landscape because “the subject”—the person looking, rather than what is being looked at—“is all that counts.” In this instance, James distinguishes between having the kind of refined sensibilities to be able to appreciate nature and simple gushing. She is struggling to regain a sense of her own subjectivity, here by challenging cultural assumptions about what might be considered as lunacy and what might instead be read as insight.

In the passage above, and in others throughout her diary, James explains that she understands and experiences the world emotionally rather than physically, perhaps a necessity for a disabled woman. In March of 1890, James writes:

I have an exquisite 30 seconds every day: after luncheon I come in from my rest and before the window is closed I put my head out and drink in a long draught of the spring—made of the yellow glory of the daffodils on the balcony, the swelling twiggery of the old trees in front, the breathless house-cleaning of the rooks, the gradation of the light in transition, and the mystery of the birth in the air. What hours of roaming would give me a more intense absorption of the ever-recurring Miracle than those few moments which sink into my substance? (105-6).

Although the tone of this entry is serious, there is some comedy in the idea that James is able to comprehend the “Miracle” of spring by sticking her head out the window for thirty seconds. As in the previous passage, James represents her ability to see the extraordinary in the ordinary here. This time, however, James hints at something more intimate than the beauty of the landscape. More specifically, as an invalid, she only has access to a small part of the world, which she argues she is able to fully appreciate. As a virgin, however, she can only speculate on or try to sniff out “the mystery of birth in the air.” Indeed, sex and birth were mysteries to James, as she shows in other diary entries.<sup>12</sup> Here, though, she provides an argument against “hours of roaming,” which might be read as a justification for both her virginity as well as her invalidism.

---

<sup>12</sup> In one entry, James writes: “I wonder if it is indelicate in a flaccid virgin to be so preoccupied with the multiplication of the species; but it fairly haunts me,—something irresistible and overwhelming, like the tides of the sea or the Connemaugh flood—a mighty horde to sweep over the face of the earth” (A James 36).

Instead of participating in this cycle of life, she can intensely absorb into her “substance” what she imagines it might be like.

James’s argument against going outdoors in this passage might also be read in terms of her complicity with notions of the “rest cure” as well as with Victorian expectations of women. However, in the same way that she sometimes seems to accept her prescribed roles, she rejects them in the next moment. For example, in a diary entry written in December of 1889, she writes:

How sick one gets of being ‘good’; how much I should respect myself if I could burst out and make everyone wretched for 24 hours; embody selfishness, as they say [two words erased] does. If it were only voluntary and one made a conscious choice, it might enrich the soul a bit; but when it has become simply automatic, thro’ a sense of the expedient—of the grotesque futility of the perverse—it’s degrading! And then the dolts praise one for being ‘amiable!’ just as if one didn’t avoid ruffling one’s feathers as one avoids plum pudding or any other indigestible compound (64).

James cannot embody “selfishness” because she is forced to embody unselfishness as an invalid woman. More specifically, even though societal expectations of women dictate that she not “burst out,” James does not make a fuss for fear of becoming nervous. Here, too, James implies the expectation on the part of the “perverse,” perhaps the male medical establishment, that a person with a disability, especially a woman diagnosed with neurasthenia (with history of hysterical behavior), remains emotionally stable. Thus, she relates the “ruffling [of] one’s feathers” to an “indigestible” compound. If being unselfish was a “choice,” James argues, it “might enrich the soul a bit.” However, she is only amiable out of a necessity of balancing her fund of nerve-force, which “the dolts” do not understand.

James’s sense that she should keep her emotions in check fit not only Victorian expectations about women’s silence but also a particularly neurasthenic understanding of the cost-benefit relationship of repressing some emotions and indulging in others and medical expectations of women diagnosed with neurasthenia. In his text, Beard devotes a small section to “Repression of Emotion,” in which he explains that “Constant inhibition, restraining normal feelings, keeping back, covering, holding in check atomic forces of the mind and body, is an exhausting process, and to this process all civilization is constantly subjected” (120). Perhaps

“all civilization” is subjected to the process of restraining their emotions if we consider the process of civilization as dictating restraint. In the Victorian era, and as was required by neurasthenic rhetoric, women were viewed as always already emotionally imbalanced, diagnosed as such and expected to keep their emotions in check even more so than the rest of civilization.

James certainly understood the expectations of her gender role. But, she also rewrites the neurasthenic script to a certain degree when she comments on the importance of humor and laughter in her diary. For example, in an entry written in July of 1889, she explains,

How fatally the entire want of humor cripples the mind. What an awful loss it is that we can't see our own follies, they must be so much more exquisite than any one's else; but as vanity is what keeps the world agoing, after one or two convulsive laughs the game would certainly up! (45).

In these lines, James aptly explains the value in being able to laugh at herself, but recognizes that laughing hard might be considered ugly or improper. She laments, in the next paragraph, that she may “never have any convulsive laughs again!” In this entry and in others throughout her diary, she sees laughter as a coping mechanism and uses humor as a rhetorical strategy to make herself and her audience laugh.

James comments further on the necessity of repressing her emotions in a diary entry written in January of 1890: “Harry came yesterday and I had as always a happy day with him. I should cry hard for two hours, after he goes, if I could allow myself such luxuries, but tears are undiluted poison!” (74). Here, James explains that it might be more beneficial to refrain from crying because crying simply breeds more crying and, therefore, more sadness. In an entry written in March of 1890, she explains: “I could cry, if it were not so much better an investment to laugh, over my poverty in receptacles for my overflow—such a contrast to the vast and responsive reservoirs of the past” (105). Allowing for an economic understanding of how tears and laughter affect the body, James rewrites Beard's formula to fit her individual circumstances, in which crying is draining and laughing is sustaining. In other words, crying is more “exhausting” than repressing tears and laughing is an “investment.” Even if James was never aware of the neurasthenic understanding of how the “repression of emotion” could lead to

nervousness, her representation can be transformative because it poses a counter-argument and creates a counter-discourse.

James was not modest about her intelligence, and she proudly announced in her journal that her brother Henry “embodied in his pages many jewels fallen from my lips, which he steals in the most unblushing way, saying, simply, that he knew they had been said by the family, so it did not matter” (212). In fact, the proudest moments James recalls in her diary are often connected to the thinking and writing of her brothers William and Henry. For example, James credits the “flowering” of her “intellect” with being able to “perceive” and “appreciate” with something Henry said (“This might certainly be called pleasure under difficulties!”) one afternoon when they were both still children. On hearing Henry’s words, which resonated within her as the perfect way to describe the experience of that particular afternoon, James apparently realizes that,

the higher nature of this appeal to the mind, as compared to the rudimentary solicitations which usually produced my childish explosions of laughter, and I can also feel distinctly the sense of self-satisfaction in that I could not only perceive but appreciate this subtlety, as if I had acquired a new sense, a sense whereby to measure intellectual things, wit as distinguished from giggling, for example” (129).

Clearly, James felt that being intellectual was a serious matter, not involving “childish explosions of laughter” and “giggling.” The repression of her emotions, then, was not only related to Victorian standards of propriety but was also a means for cultivating an appropriate sense of sensitivity and refinement.

In many ways, James saw refinement as a double-edged sword. On the one hand, it meant that she was part of an “inspired circle” of neurasthenics, while, on the other hand, it meant maintaining her place on the couch. Some critics of James’s diary have argued that she relished in her invalidism. Although it is possible to read her in this way, I am suggesting another interpretation. Admittedly, there are moments when James finds solace in being confined to her Davenport. She writes, “It is pleasant enough to get out sometimes in the summer, but then one has to bother about the weather and one’s health every day, contemplate the cloud, and reflect upon one’s pains; whereas now it rains and blows without, and grinds away in the bones, and I

need never give ‘em a thought. Gadders will never believe me, but the days I go out are twice as long in the passing as the shut-up ones” (70). However, in other moments, James describes the high price of invalidism and refinement. Only a few days before she wrote the lines above, James described a scene in which “my shawls were falling off to the left, my cushions falling out to the right, and the duvet off my knees,—one of those crises of misery, in short, which are all in the day’s work for an invalid, K. exclaimed ‘What an awful pity it is that you can’t say damn.’ I agreed with her from my heart; it is an immense loss to have all robust and sustaining expletives refined away from one; at such moments of trial refinement is a feeble reed to lean upon” (66). What is interesting in these lines is the contrast between the “robust” and “sustaining” and the “feeble.” Not only did James’s invalidism leave her feeling “feeble,” so did her necessary refinement. In some ways, James’s invalidism and her sense of herself as intelligent, sensitive and refined are inseparable, which is not only a Victorian gesture. This way of thinking is also necessitated by the rhetoric of neurasthenia.

### **“Form given to what was vague”: James Writing the Subject**

In the remainder of the chapter, I look at how James uses the rhetoric of neurasthenia, in some ways, to assert a particular subjectivity. As Couser indicates, “In the case of illness and disability often the foremost motive of life writing is to recover variously dysfunctional bodies from domination by others’ authority and discourse, to convert the passive object into an active subject” (291). James’s engagement with and subtle challenges to the rhetoric of neurasthenia can be interpreted as a method for recovering her body from “domination” and asserting herself as an “active subject” rather than a “passive object.” Perhaps more importantly to my analysis of her text, however, is the particular kind of subject James wanted to construct. In what follows, then, I trace out James’s critique of medicalization and objectification of people with disabilities, and I examine her understanding of disability as central to her identity. In addition, I look at how James uses the rhetoric of neurasthenia to understand and validate and to quantify her invalidism, to make her life worth something. Finally, I argue that James develops a deep understanding that her real work was the work of living with nervous horrors and bodily pain. Although James did not have access to disability rhetoric, we might read her text as pushing toward an early rhetoric of disability. That is, even though James did not have “access” to disability studies discourse,

there are concepts from disability studies that are being played out in her text as she feels her way toward an understanding of her disability.

For James, the rhetoric of neurasthenia may have offered a concrete way of understanding her disability that was only vaguely defined by the medical establishment as a problem of the “nerves.” It certainly gave her the means to explain her overly emotional behavior as well as her periodic bouts of complete debility, as this combination of mental and physical breakdown was common among neurasthenic women. In addition, neurasthenic rhetoric would have been both recognizable and culturally acceptable to her contemporary audience. Here, I look at how James fashions an identity around the neurasthenic values of sensitivity and refinement to account for her overly active emotional nature and to assert her intellectual capacity despite her physical incapacity.

Because of the historical inclination to medicalize disability, people with disabilities are often viewed as objects. In the first few pages of her diary, James cites several instances in which others view her as an object. For example, in an entry written in June of 1889, James recalls a conversation that had taken place between her nurse and someone interested in her residence: “Some one who wants these rooms asked Miss Clarke if she had ‘got rid of the fidgetty old lady in the drawing-room.’” At age forty-one, because she is disabled, James is looked at as a ‘fidgetty old lady,’ which she finds laughable: “It is so comic to hear one’s self called old; even at ninety, I suppose!” As the entry continues, James suggests another method of coping with her disability, aside from laughing at her self. She explains: “What one reads, or rather all that comes to us is surely only [of] interest and value in proportion as we find ourselves therein, form given to what was vague, what slumbered stirred to life” (27). Here, and elsewhere in her diary,<sup>13</sup> James places a “value” on her ability to “find” her self through her experiences. In so doing, James suggests an economy of self in which disability might be read as central to identity. The ‘fidgetty old lady’ ceases to exist as the object to be removed from the “drawing-room” and takes shape (“form given to what was vague”), even if in her own mind, and thereby she recovers some sense of her own subjectivity.

---

<sup>13</sup> In an entry written in January of 1891, James explains: As self-revelations are the supreme interest, the following anecdote in its rounded completeness is valuable, apart from its comicality” (162).

A few days later, James relates another conversation, this time one she actually participated in with a neighbor. She recalls, “Miss Percy from next door, came in to see me; she is the most good-natured being, and evidently looks upon me, funny as it seems, as a pitiable object. She asked me with the greatest conviction, if I didn’t get ‘awfully tired of reading!’” As the entry continues, James remarks on Miss Percy’s strumming “for five minutes at a time on her rattletrap of a piano” and her frivolous flitting “in and out, all over the place, twenty times a day” (35). She ends the entry with a question (perhaps a quote taken from a one of the books she was reading) written entirely in French,<sup>14</sup> a language Miss Percy presumably does not speak or write in. This implication, here, is that James does not view herself as a “pitiable object.” She views herself, instead, as a subject, having had a more fulfilling life on the couch with her books than Miss Percy could even begin to imagine.

In *Invalid Women*, Herndl condemns James for “merely [writing] her self into her text as invalid,” rather than writing illness into her text as author. While Herndl values James’s writing for supplying useful or interesting means for thinking about women’s illness, she devalues it on the basis that James is reluctant to claim “author” of her text. In this way, Herndl criticizes James’s inability to distance herself from her text and from the illnesses she was diagnosed with. Like Lutz, Herndl values the work of Charlotte Perkins Gilman and Edith Wharton, “who wrote the *illness* into their texts, leaving themselves apart from it, as *authors*, not invalid women” (Herndl 128). Although James characterizes herself in her first diary entry as capable of “nothing but the ejaculation of one-syllabled reflections, a written monologue,” she suggests writing about herself may be consoling. Three years later, in January of 1891, James reiterates this belief when she remarks that, “self-revelations are the supreme interest” (162). Writing, then, could provide the means for James to reveal a self, not necessarily a self that was already there but hidden, but a self that could be discovered in her own words as they were written. James could construct her subjectivity in private language that was denied in her public life and interactions.

---

<sup>14</sup> “...has she ever dreamed ‘un songe merveilleusement délicat, comme la solitude et le malheur en formet seuls dans les âmes qu’elles arrachent aux rudesses de la vie commune; l’idée d’une belle vie pleine d’ombre vouée toute entière, sans salaire ni retour, à la bonté et la résignation?’” (35)

Even before James began keeping a diary, she wrote copious letters to family and friends. In one of these letters that her biographer cites, James suggests that “Feminine art as long as it remains a resource is very good but when it is an end its rather a broken reed. Matrimony seems the only successful occupation that a woman can undertake” (quoted in Strouse 88). James never married and never had any serious relationships with the opposite sex in the forty-four years she was alive. In fact, she had decided not to marry by her mid-twenties, which was about the time she made the above remarks. However, her statements were appropriate for the cultural moment in which she was writing. Very few women made careers for themselves as artists or writers and even fewer remained single their entire lives. Perhaps more interestingly, though, is her notion that women’s artistic productions were useful if they were a “resource” but not if they were an “end.”

On a first reading, one might interpret these lines to mean that women’s art (and perhaps writing) is “good” when it is a financial resource, otherwise it is “rather a broken reed.” However, James supplies another way to read this letter in her diary. In an entry written in June of 1889, after reading George Elliot’s letters, she writes:

What an abject coward [George Elliot] seems to have been about physical pain, as if it weren’t degrading eno[ugh] to have head-aches, without jotting them down in a row to stare at one for all time, thereby defeating the beneficent law which provides that pain is forgotten. If she related her diseases and her ‘depressions’ and told for the good of others what armour she had forged against them, it would be conceivable, but they seem simply cherished as the vehicle for a moan...What a contrast to George Sand who, whatever her failings, never committed that unpardonable sin; it even makes her greasy men of the moment less repulsive” (41-42).

There is a lot at stake for James in these remarks. For one thing, her own diary might be interpreted in terms of “a vehicle for a moan,” something she considered an “unpardonable sin” and one that she presumably did not want to commit. For another thing, James expresses a kind of pride in the ability to tolerate physical pain, and she criticizes Elliot for her apparent inability. She sees headaches as “degrading” because they often put her out of commission and relegated her to a hyper-feminine role. Writing about pain, however, is “good” when it is accompanied by some sense of how to combat it. Inscribing illness and bodily pain within the history of one’s life

without a mechanism for coping presumably is not useful and also defeats the “beneficent law which provides that pain is forgotten.” Thus, James explains, in both the letter written in 1876 and the diary entry written in 1889, that women’s art and writing is resourceful when it serves to help others (probably women) to develop coping strategies—which may have been important given her negative experiences with the male medical establishment and their treatment of her own illness and bodily pains.

In her letter and in this diary entry, James also implies her disdain of matrimony as the only option for women. In the diary entry, in particular, James decries George Sand’s “greasy men of the moment.” In some ways, her illness and invalidism disqualified James from participation in the cultural conventions of getting married and having children, and she expresses both frustration and gratitude for this in her diary. But, her comment on George Sand’s male companions suggests an ethnocentric view that gets repeated in other diary entries. Incidentally, Beard also presents an ethnocentric view in *American Nervousness*, only including Anglophone countries such as England (69). An explicit nationalism (and perhaps patriotism) is built into James’s and Beard’s rhetoric, which suggests that illness, especially nervous illness, may have been one means to assert a specifically American identity, rooted in American soil and bred in American blood. Since her identity was already in question because she could not claim to be the wife of someone or the mother of someone, did not have a career, and wanted to avoid being known only as the younger sister of William and Henry James, it may have been particularly important for James to distinguish herself as being American. Outside of “invalid,” this was one identity she could claim.

While writing was about self-discovery and claiming an identity, James represents writing as a great source of pleasure and enjoyment in a diary entry written in December of 1889. She writes, “How funny it is to remember these trifling things but it is a joy to bring back the past in any way, and I shall put down everything I can think of in this precious reservoir” (62). James not only views writing as a pleasure, but she sees her diary as a place to collect and recollect memories from a distant and sometimes not-so-distant past. Thus, another implied purpose for writing is to create and recreate a “reservoir” of experiences from her unique perspective—a view of her own interpretations of her life experiences especially regarding her disability.

## **“Poor Mrs. Ogle”: The Economic Rhetoric of Worth**

In this section, I look at the diary entries in which James uses Beard’s economic metaphor for understanding how neurasthenia affected the human body. I argue that she uses this economic formulation in order to quantify her experiences of living with a disability, to make her life worth something. In the introduction to her biography of Alice James, Jean Strouse speculates that James may have felt, at the end of her life, that she was a “failure” (Strouse viiii). If so, she may have wanted to make meaning out of her life by writing about it in her diary. Just as her chronic illness dominated her life, it also dominated the life of her diary. In fact, one would be hard pressed to open to a page in the diary where James has not written about being ill. Even so, James used Beard’s economic metaphor to put a value on her life as an “invalid” woman. In some ways, this worked to validate her in-valid life.

James uses Beard’s economic metaphor to estimate her worth in several instances throughout her diary. For example, in an entry written in July of 1889, James recounts the summer of 1873 when she visited an art galley and saw a “Botticelli.” James felt blissful on this day because, unlike “*poor* Mrs. Ogle,” who did “not know what to do with pictures,” she discovered that she “was a ‘sensitive,’ and that I was not only ‘mute before a Botticelli,’ but that a Botticelli said an infinity of things to me” (47; emphasis added). As this entry continues, James relates another story about a “portrait painter” named “Porter” who, upon seeing the work of “an old master” for the time, simply “sauntered about, glancing casually here and there, with no more ripple of emotion than if he were at Doll and Richard’s. How *cheap* the quality of his personality shone out” (47; emphasis added). Taken together, these separate narratives, appearing as part of the same story, reveal the extent to which James had internalized an economic understanding of herself in relationship to the world around her. More specifically, in this entry, James estimates her own worth and wealth of “emotion” and “personality” against Mrs. Ogle and Porter’s poverty. It is certainly no coincidence that she makes this distinction in relation to her ability to appreciate art. Indeed, she reiterates here her deep conviction that art should be of some use, rather than merely for passive absorption. Perhaps, then, she saw her own art, her writing, as a means to achieve productive value.

In other instances, James defers to Beard’s economic metaphor more directly. In an entry written in March of 1891, roughly one year before her death, James employs neurasthenic

rhetoric to describe her bodily state. She writes, “Through complete physical bankruptcy I have attained my ‘*ideel*,’ as Nurse calls it, and we are happily established since March 12th in a little house on Campden Hill (41 Argyll road)” (181). This clear reference to neurasthenic rhetoric reveals not only the popularity of Beard’s rhetoric but also the extent to which James ascribed to Beard’s economic view of disability. James’s connects “physical bankruptcy,” in this passage, to an achievement of an ideal and suggests that there is an inverse relationship between bodily value and aesthetic/mental value.

In the remainder of the entry, James describes the reasons—“I could not go out of town, or become prey to a landlady”—that made getting a house a “necessity” (181). In this instance, James’s “physical bankruptcy” necessitates getting a house because she is presumably no longer physically able to “go out of town” and she (and perhaps Katherine also) fears that her weakness would allow her to “become prey to a landlady.” James’s view of what being physically bankrupt could mean, in this instance, include the ways the weak were at risk of becoming “prey” to the strong. To be physically bankrupt, then, made it necessary for James to retreat to the safety of the home. She is able, in other words, to balance her fund of nerve-force by staying in the house, a necessity that exposes the gendered nature of the discourses of nervousness. As Lutz points out, “The discourse of neurasthenia, in both its assumptions about health and its analysis of the disease, provided legitimation for a traditional definition of femininity based on dependency and passivity” (31). As I have already shown, treatments were gender specific as well. Clearly, James internalized an understanding of her illness as necessitating both her dependency on the care of others—her parents, Katharine, and Henry at different times in her life—as well as her confinement to the couch. While James was unable to be physically active because of her invalidism, doctors thought inactivity was the only chance she had of recovering. However, this prolonged “rest cure” never provides her with any sense of relief.

### **“Physical Pain” and “Nervous Horrors”: The Work of Living with Pain**

In “‘Trying to Idle’: Work and Disability in *The Diary of Alice James*,” Natalie A. Dykstra views James’s illness, rightly, as a disability. However, like Edel, Yeazell and Strouse, Dykstra also views James’s “disabling illness” as her work. She writes, “Alice reconfigured illness as a kind of women’s work in the context of her family and larger cultural preoccupations with domesticity, work, and the requirements of an industrializing economy” (108). Like her

scholarly predecessors, Dykstra reads James within the cultural context in which she was writing and recognizes the value of James's work but insists on viewing her disability as her career.

In this section, I reevaluate the claim made by James scholars that her illness was her career. After all, neurasthenic rhetoric was essentially a rhetoric about work. Those diagnosed and treated for neurasthenia were often considered either under or over-worked. Many women diagnosed with neurasthenia were considered too idle, a position afforded by their leisure-class status, too busy, a position required by their duties as wives and mothers, or overworked by their schooling. In any case, neurasthenic dogma dictated that anyone, female or male, diagnosed with neurasthenia was part of the professional and/or intellectual rather than working-class community. In fact, the rigors of leading an intellectual and/or professional life were often blamed for the increased nervousness and mental and physical fatigue some people experienced. While James was considered as a part of the leisure class, if only as a result of her disability, she could not lay claim to the 'overly' demanding lifestyles of either a housewife or an academic. Although James has been accused of choosing her disability as her "career," I argue, instead, that she developed a deep understanding of the work involved in living in pain.

Much like the argument to see James's disability as social rebellion,<sup>15</sup> her invalidism is often characterized as her work. For example, her biographer Jean Strouse manages to undercut her own desire to give meaning to James's life and work by arguing that her invalidism was her "career" (Strouse 291). Rather than becoming "a historian, or a writer of politics, a pioneer in women's education, or the leader of a radical movement," Strouse writes, "she became an invalid...registering social change and personal conflict in the dramatic wars that raged through her body and mind" (ix and xv). As I state earlier in the chapter, Strouse's argument that illness was her career is a stance that many other critics either passively accept or adopt for their own particular uses—usually to claim that invalidism allowed James to assert a feminine identity.

---

<sup>15</sup> For example, several critics have argued that James developed a nervous condition as "one way of responding to her intolerable plight as a woman, the conflicts and tensions of her social role" (Bronfren 385); "a rebellion against her assigned family role and its constraints" (Anderson 25); and "her resistance to the lethal boredom of enforced uselessness, the stifling of her active nature, the frustration of her youthful hopes that went along with being a young women in mid-nineteenth-century New England" (Lanigan 76).

Although the case for reading James in this way is somewhat compelling, I find it limiting in the way it erases the reality of disability that she expresses in her diary.

In *The Body in Pain: The Making and Unmaking of the World*, Elaine Scarry argues that physical pain is almost impossible to represent because it happens within the confines of individual bodies and cannot be felt by other bodies in the same way. Furthermore, pain has no “object” unlike senses such as hearing or touch. “This objectlessness, the complete absence of referential content,” Scarry argues “almost prevents it from being rendered in language: objectless, it cannot easily be objectified in any form, material or verbal (162). Although it is not my intention to deny that James may have seen her invalidism as work, I want to suggest another reason why this may have been the case. As Scarry argues, pain is often unrepresentable in language but that “a near synonym for pain...is the word ‘work’” (Scarry 169). She explains:

Far more than any other intentional state, work approximates the framing events of pain and the imagination, for it consists of both an extremely embodied physical act (an act which, even in nonphysical labor, engages the whole psyche) and of an object that was not previously in the world...It does, however, under all circumstance, and regardless of whether it is primarily physical or mental labor, entail the much more moderate (and now willed, directed, and controlled) embodied aversiveness of exertion, prolonged effort, and exhaustion. It hurts to work. Thus, the wholly passive and acute suffering of physical pain becomes the self-regulated and modest suffering of work. Work is, then, a diminution of pain: the *aversive intensity* of pain becomes in work *controlled discomfort* (170-1).

James expresses the work of living with pain in her diary, and the work of writing the diary channels that pain and disability into a value, in which James is able to control her pain.

One of the ways James talks about both her mental and physical pain is through the trope of “resistance.” In some ways, she develops a kind of philosophy of resistance as a means for working through the pain of her disability. For example, in an entry written in July of 1889, she laments,

The headache had gone off in the night, and I had clean forgotten it—when little wretch confronted me with it, at this sublime moment when I was feeling within me the potency

of a Bismark, and left me powerless...before the fact that *my* glorious rôle was to stand for *Sick headache* to mankind! What a glorious being I am, to be sure! Lying in this room, with the resistance of a thistle-down, having illusory moments of throbbing with the pulse of the Race, the Mystery to be solved at the next breath, and the fountain of all Happiness within me—the sense of vitality, in short, simply proportionate to the excess of weakness! (104).

After a five-day bout with sick-headache, a term used at the turn of the last century to describe a severe headache accompanied by nausea and exhaustion, James was feeling better before being reminded by her nurse of the last several days of debility. In this slightly erotic formulation, in which her “illusory moments of throbbing” might be read as code for sex or masturbation, James reiterates her frustration about her inability to more actively participate in life and her annoyance about being disabled by a “mystery” illness that has evaded her doctors for years. James also represents an economy of illness here, in which not having enough “resistance” (or perhaps “nerve-force”) results in an “excess of weakness.”<sup>16</sup>

In “‘Only a question of time, etc.’ (*The Diary of Alice James*),” Deborah Esch examines a claim made in Leon Edel’s preface to *The Diary of Alice James*, in which he presents James’s

---

<sup>16</sup> In his thoughtful consideration of the history of consumer culture in America, “From Salvation to Self-Realization: Advertising and the Therapeutic Roots of Consumer Culture, 1880-1930,” T. J. Jackson Lears explains that “Never before [in American cultural history] had so many people felt that reality was throbbing with vitality, pulsating with unspeakable excitement, and always just out of reach. And...the feeling of unreality helped to generate longings for bodily vigor, emotional intensity, and a revitalized sense of selfhood” (Lears). Fascinating for the way it repeats James’s message, even down to the sexual metaphor, Lears clearly feels the pulse of the Victorian culture he describes. Put in the context of Lears’s essay, in which he argues that a shift occurred during the late nineteenth century—from a “Protestant ethos of self-denial toward a therapeutic ethos stressing self-realization”—James’s passage might be read not only as a rejection of the confines of the Victorian society in which she lived but also an expression of a common longing, on the part of many Victorians, to become more actively engaged with the society in which they lived.

diary as a “modest claim on posterity beside the works of her famous brothers” (qtd. in Esch 99). She argues that this “critical” apology “reflects the marginal status” that the diary has often been assigned (99). Perhaps more importantly, Esch argues that James uses the trope of “resistance,” especially in her remark that “the only thing which survives is the resistance we bring to life and not the strain life brings to us,” that James’s use of the term resistance initially suggests that we understand “resistance as a resource, as the force we marshal *in* life” but it might “also be read as resistance to life, *opposed to* life, in the name of death,” or ‘the resistance we bring to life’ might be thought of as the resistance we animate or reanimate, as we might the dead” (105). Although it makes sense to read James’s use of the trope of “resistance” as Esch suggests, I argue that James’s use of this term directly correlates to the rhetoric of neurasthenia and functions as another kind of rhetorical strategy. In what follows, I will suggest another, potentially more fruitful, alternative to understanding *how* James means “resistance.”

The sentence from which Esch examines only the last few lines reads:

How profoundly grateful I am for the temperament which saves me from the wretched fate of those poor creatures who never find their bearings, but are tossed like dried leaves hither, thither and yon, at the mercy of every event which o’ertakes them; who feel no shame at being vanquished, or at crying out at the common lot of pain and sorrow; who never dimly suspect that the only thing which survives is the resistance we bring to life and not the strain life brings to us” (96).

In this case, James presents the hierarchical class structure that neurasthenic rhetoric allowed and enforced. It has already been established that the repression of emotions was required of women of James’s economic status and represented by Beard as a cause of neurasthenia. The “temperament” which saves” James from the over-expression of emotions “at the mercy of every event which o’ertakes” is also the temperament which causes neurasthenia.

The final lines of James’s sentence in which she speaks of “resistance” can be related to Beard’s electricity metaphor for describing neurasthenia. In describing the pathology of neurasthenia, Beard explains that “greater exhaustion” “comes from unusual and unwonted exertion” (11). He continues by arguing that, “unusual exertion, along the untravelled pathways of the nerves, meets with greater resistance, just as the electric force meets with greater

resistance in a badly conducting circuit. Routine labor requires the evolution and transfer of force along well worn pathways, where the resistance is brought down to a minimum; hence a very slight evolution of force is sufficient to produce the result, just as a very slight amount of electricity will pass through a good conductor, like a large copper wire. To overcome this resistance of these unworn pathways, more nerve-force is required; the reserve is drawn upon; the man becomes tired” (12). In my estimation, it is more likely that James was referring to something nearer to Beard’s formulation of the resistance of nerve force in both instances cited above.

In some ways, Esch’s perspective on James work renders James to an apparitional status. At the same time that she claims that Edel’s “modest” dismissal of her diary works to “invalidate” it, Esch’s reading makes impossible the possibility of presence and agency for James. That is, she reads the diary as “rhetoric of memory,” its primary goal as memorializing the past. However, I am claiming that her diary functions as a rhetoric with the capacity to challenge an individual, familial and cultural history.

In many ways, James recognizes that her disability, in particular, her physical pain, separates her from others who are not in pain and cannot know the nature her pain. In a diary entry written in January 1890, James describes the emotional distance between the disabled and the non-disabled:

This is the sort of thing that well people are always saying to the weak and they have no conception of their cruelty—A poor old maid here was at some parish meeting, and the Vicar’s wife said to her, “you know we don’t ask you to help us in this work, because *you faint*” branding the poor thing with incompetency because last year, after a hard day’s work, she had grown faint on one occasion. But it is impossible the two should ever understand one another, for when most sympathetic, the well let fly their wildest shots.

As Susan Wendell points out, “There is a cultural gulf between the disabled and the non-disabled; to become disabled is to enter a different world” (Wendell 65). In this entry, James recognizes the large “gulf” that exists between the “ill” and the “well,” and her diary might be read as her attempt to bridge this gap. As this same entry continues:

A while back I was greatly enjoying a friend from home, who went far back and in whose presence the past revived for a bit, when suddenly she removed herself to the planet Mars by asking me whether I was in pain anywhere at that moment. She stood at the foot of the sofa, but she had no gift to divine that pain was as the essence of the Universe to my consciousness and that ghastly fatigue was a palpable substance between us. How could she?—We were emotionally blended, but what common ground had we physically and especially as I had bluffed off all her investigations!” (77).

This story substantiates James’s claim that “it is impossible” that the “well” and the “weak” “should ever understand one another.” Her physical pain, at the time of this meeting with her friend, was such that James could not describe it in words—except in her diary as “a palpable substance” that only she could perceive. James could not blame her friend for her inability to perceive the physical pain that “was the essence of the Universe to [her] consciousness,” but she was unwilling or, more likely, unable to express it. Since James cannot represent her pain to her friend in a meaningful way, she “[bluffs] off her investigations,” widening the gap between them.

In some ways, the lack of a single diagnosis (until a few months before her death) prompted James to find a way to talk about her disability. The rhetoric of neurasthenia provided a means for James to both understand, experience, and write about her disability. To be sure, one of the things this rhetoric allowed James to illustrate was that her disability was painful. In her final diary entry, written in March of 1892, James writes:

I am being ground slowly on the grim grindstone of physical pain, and on two nights I had almost asked for K.’s lethal dose, but one steps hesitantly along such unaccustomed ways and endures from second to second...however, this may be, physical pain however great ends in itself and falls away like dry husks from the mind, whilst moral discords and nervous horrors sear the soul (232).

On dying, then, James describes physical pain as temporary and as confined to her body. While physical pain was forgettable, the “nervous horrors” she experienced were not. Instead, they are somehow emblazoned on her “soul.” While James realized that readers of her text would not

experience her physical pain, they would understand her “nervous horrors.” Her soul, then, in this last entry, becomes a metaphor for her text.

Viewing James’s work, as an invalid, in this way does not deny her actual experience of bodily pain. In fact, it validates it. It does not see James’s disability in terms of a choice that she makes to resist certain social conventions. It understands that part of the “work of living with bodily pain involves controlling discomfort. It begs the following questions: Given the reality of her disability, what is it that James seeks to accomplish? What is she able to accomplish given these constraints? In what way does writing become James’s productive work?

Alice James’s work was not invalidism. This was just a circumstance of her life. Her work and the goal of her diary was to build up resistance to bodily pain and to show other women how this was possible. In her diary, James succeeds in showing how it is possible to exist in the world with a body that others cannot seem to understand and want to classify and categorize with received cultural meanings, empty of any understanding of the reality of women’s lives. Indeed, James’s diary has the potential to reenergize discussions about the rhetoric of neurasthenia. In James’s diary, she uses the rhetoric of neurasthenia to define and describe her ailments in order to provide a deeper understanding of her experience of living with a disability, to construct a sense of self as a productive subject rather than as a consumptive object, and to provide a view of the managing pain.

While James was criticized for not being a productive member of society, it is important to remember that that is exactly what was expected of her as a woman and especially as a disabled woman. Her biographer Jean Strouse criticizes her for never producing any “significant body of work,” meaning she did not produce a large amount of writing; however, I argue, that what she did produce was “significant.” It allows us to understand the ways in which the public rhetoric of neurasthenia traveled through the culture and found its way into private diaries and letters. In the chapters following, I look at the way this rhetoric traverses women’s private and public discourses and how it is transformed by these uses.

### Chapter Three:

“[R]estore a balance”: Economies of Work in *Twenty Years at Hull-House*

On March 5, 1911, *The New York Times* published an article announcing Jane Addams's autobiography *Twenty Years at Hull-House*. In this article, the author provides an interesting way of looking at the role Addams's disability played in her decision to open Hull-House:

From childhood she suffered from a curvature of the spine; she was always delicate; and at about the age of twenty years she was confined to her bed for months with spinal trouble, which left her in a state of nervous exhaustion. Her 'lehrjahre' were long and difficult; she traveled much, thought much, suffered much; and then in her thirtieth year she came out of England after the turmoil of thought and feeling with the idea of Hull House clear in her mind, and in her heart the devotions and self-giving of a transfigured spirit. She does not say these things. One feels them through the text. There is in her book an undercurrent of power and experience, even more in what she leaves out than in what she says. No wonder that hers is the philosophy of overcoming much, that she pleads for sheltered youth the right to obstacles, the right to suffer, to conquer and to serve.

Interestingly, the author makes a connection here between Addams's disabling illnesses and her ideas about social and economic reform. Specifically, the author argues that Addams's suffering, from a "curvature in the spine" in childhood and from "nervous exhaustion" in adulthood, led to a quest which resulted in a kind of spiritual enlightenment. While the author admits that Addams does not say these things in her text, he/she implies that Addams's "philosophy of overcoming" and belief in the idea that "sheltered youth" should "suffer," "conquer" and "serve" was the obvious result of having suffered and having been spiritually transformed by that suffering.

Addams was born with Pott's disease or spinal tuberculosis, which resulted in a curved spine and a crooked gait. When the pain of this childhood disability reappeared later in her life, she was diagnosed with neurasthenia. That is, what was considered spinal tuberculosis in childhood becomes neurasthenia in adulthood. Thus, Addams was considered disabled, for one reason or another, from the time she was born until her early thirties. In the above quotation, and in other texts written about her, Addams is considered as a woman who was able to overcome her disability. For example, in *A Useful Woman, The Early Life of Jane Addams*, Gioia Diliberto

remarks that Addams “triumphed over the invalidism that ruined the lives of vast numbers of Victorian women and transformed herself into an international celebrity” (16). Here, Diliberto is referring to the nineteenth-century phenomenon of the invalid woman.<sup>17</sup> Her argument is that although Addams was diagnosed with neurasthenia, and might have become another invalid woman (like Alice James), she was somehow able to overcome her illness and become a widely successful writer and reformer. This perspective, unfortunately, contributes to the belief that women could choose (or not choose) invalidism<sup>18</sup> and that Addams was successful only because she was able to overcome the disabling conditions of her life. It also contributes to the idea of “overcoming,” that it is possible to do so, and that doing so ‘subtracts’ the disability experience from the person (to restore the person) rather than understanding that the disability experience defines and makes the person.

The author of *The New York Times* article and Addams’s biographer either intentionally or unknowingly suggests that Addams is only successful because she is able to overcome the circumstances of her life. While the author of the 1911 article was writing before the advent of disability studies and Diliberto may not have been aware of the consequences of her remarks, I draw attention to these two similar points of view because it is interesting that this understanding of Addams’s life has persisted through the years, through many readings of her autobiography and other texts. In fact, both the author of the 1911 article and Diliberto emphasize the individual and ignore the social (and/or cultural) components that may have come to bear on Addams’s life philosophies and decisions.

In this chapter, I elaborate on the previous chapters analyzing how Addams uses the rhetoric of neurasthenia to negotiate her disability and her settlement work in *Twenty Years at Hull-House*. I argue that she employs neurasthenic rhetoric to write about the material conditions of her life and the lives of the immigrants of Chicago. Furthermore, I challenge the idea that Addams had to overcome her disability in order to become successful. I argue, instead, that her

---

<sup>17</sup> See Diane Price Herndl’s *Invalid Women* for a full account of the meanings around women’s invalidism in the nineteenth century.

<sup>18</sup> See the previous chapter on Alice James for a discussion of the idea that one could choose (or not choose) to become an invalid woman.

experience of living with a disability allowed her to “affectionately interpret”<sup>19</sup> the immigrants of Chicago and to explain the need for interconnected social responsibility.

### **A Shifting Cultural Dynamic and the Settlement House Movement**

The subject of my last chapter (Alice James) and the subject for this chapter (Jane Addams) were both born and raised amidst large-scale cultural changes and changing roles for women. Both entered an America in which industrial, scientific, and technological advancements laid the foundations for a shifting cultural dynamic. Both were raised in affluent households by parents who were well respected in the community.<sup>20</sup> Both Henry James Sr. and John H. Addams played a large role in the lives of their daughters, even becoming Alice and Jane’s primary role models; Henry James, because he shared a love of learning with Alice; John Addams, because of the untimely death of Jane’s mother.<sup>21</sup> As children, both girls were doted on: Alice, because she was the youngest of five children, the only girl in the family and often sick; Jane, because she was born with spinal tuberculosis, which left her with a disabling curvature in her back. Both were diagnosed with neurasthenia in their late teens/early twenties and took the “rest cure.”

Despite their similarities, the differences between James and Addams were vast. While James is not considered a success by conventional standards, Addams is considered an example of great success, having been a productive member of society in a number of ways. While

---

<sup>19</sup> Addams used the term “affectionate interpretation” in “A Modern King Lear,” her essay on the Pullman Strike, to signify how humans empathize. In that essay, she writes, “It sometimes seems as if only hardship and sorrow could arouse our tenderness, whether in our personal or social relations; that the king, the prosperous man, was the last to receive the justice which can come only through affectionate interpretation. We feel less pity for Lear on his throne than in the storm, although he is the same man, bound up in the same self-righteousness, and exhibiting the same lack of self-control.”

<sup>20</sup> Henry James Sr. was a theologian and writer, who had amassed a great fortune selling real estate and lending money. John Addams was a politician (an Illinois State Senator) and a successful businessman as well as an acquaintance of Abraham Lincoln.

<sup>21</sup> Jane’s mother Sarah Weber Addams died in 1862, when Jane was two-years-old, shortly after giving birth to a stillborn child.

Addams never married or had any children, she was the founder and co-owner and operator of Hull-House, the first settlement house in Chicago. She produced a significant body of written work and was awarded the Nobel Peace Prize in 1931 for her lifetime commitment to social and economic reform. Addams also lived during the Progressive Era—a period between the years of 1890 to 1920 in which many individuals, including the subject of my forth chapter (Charlotte Perkins Gilman), and organizations worked toward social reforms of various kinds. Indeed, Addams achieved great fame and personal as well as professional renown as part of an elite group of women that stood at the helm of the Progressive Era reform movement. In many ways, Addams's supposed ability to “overcome” her disability allows her to be viewed as successful and become “the most famous woman in America,” one on a “roster of great Americans” (Diliberto 16). Because James is unable to “triumph” over her condition, as I mentioned in the previous chapter, she is etched permanently only on a roster of neurasthenics.

In 1889, the year Alice James began keeping a diary, Jane Addams and Ellen Gates Starr<sup>22</sup> opened the first Chicago settlement house, later named Hull-House for the original owner, Charles J. Hull.<sup>23</sup> In 1888, a decade after Addams and Starr became friends, the pair traveled to Europe together. Around this time, they started discussing the idea of starting a settlement house in Chicago. To prepare for their endeavor, they visited England's famous settlement house,

---

<sup>22</sup> Addams and Starr had met at Rockford Female Seminary in 1877 and had remained friends despite Starr leaving school due to financial troubles. Even though Starr moved to Chicago to begin a career in teaching, the pair kept in close contact as Addams finished school. Like James and Loring, Addams and Starr established a longstanding relationship. As with James and Loring, it is unclear whether this relationship was sexual, only that it lasted for much of their lives.

<sup>23</sup> Hull had left the mansion to his niece Helen Culver when he died, and Culver rented part of it to Addams and Starr for sixty dollars a month for several years. However, after recognizing and appreciating the success of the Settlement, Culver gave Addams and Starr use of the entire mansion, rent free, which removed a substantial financial burden. For this kindness, the co-founders named the Settlement for Culver's late uncle.

Toynbee Hall.<sup>24</sup> Toynbee Hall was opened in 1884 with the goal of creating experiences that people of all socio-economic classes could mutually benefit from to break down class barriers. The idea was that working class people would be nurtured and enriched by spending time with those of the leisure class and vice versa.

Impressed and inspired by what they saw as well as with Samuel and Henrietta Barnett, the owners and operators of the East London settlement, Addams and Starr went back to Chicago with plans to find a place for a settlement of their own. Though the philosophy for Hull-House was modeled on that of Toynbee Hall,<sup>25</sup> it was different in some important ways, especially with regard to women residents<sup>26</sup> and its aim to serve women and children. One of the most important functions of Hull-House was as a home base for a wide variety of social, political, and economic reforms. Among the many reform efforts that began at Hull-House, Addams and other residents worked to improve sanitary conditions in the neighborhood and labor conditions in Chicago factories.

In time, Hull-House grew to massive proportions, finally including thirteen buildings, and, as Henry Steele Commager explains in the “Foreward” to *Twenty Years at Hull House*, it

---

<sup>24</sup> Toynbee Hall, owned and operated by Reverend Samuel Barnett and his wife Henrietta Barnett, was named for the couple’s friend Arnold Toynbee, who died at age thirty-one from nervous exhaustion.

<sup>25</sup> In *Citizen: Jane Addams and the Struggle for Democracy*, the most recent and most critically acclaimed biography of Jane Addams to date, Louise W. Knight explains that Toynbee Hall “looked like and, to a degree, functioned like, a college at a British university. It had a large drawing room, a lecture hall, a library, a dining room, classrooms, and bedrooms for twenty men. There were no women residents, nor would there be for many decades” (167).

<sup>26</sup> Whereas Toynbee Hall had only male residents (“for many decades”), Hull-House had both male and female residents. Aside from Jane Addams and Ellen Gates Starr, some of the other more notable and tireless residents of Hull-House included Mary Keyser (housekeeper), Edward Burchard (first male resident), Julia Lathrop (lawyer and charity reformer), Florence Kelley (author and activist), Alice Hamilton (doctor), and Eleanor Smith (music educator). As an example of the how dedicated these residents were, Dr. Hamilton stayed at Hull-House for over twenty years and Smith for over thirty.

became “a kind of community center” for many Chicagoans who attended lectures and social and political gatherings, who either performed in or attended theatrical performances, who belonged to one of the many clubs being offered, and who used the kitchen, coffee house, and art museum (xiii). “Over the years,” Commager explains, “Jane Addams built a bridge between the immigrants and the old-stock Americans, between the working classes and the immigrants, between the amateur reformers and the professional politicians, even between private philanthropy and government” (xiv). All of these connections and cultural changes situated Hull-House as an exemplary of the settlement house movement in America.

In what follows, I analyze the ways Addams’s experience of living with a diagnosis of neurasthenia was crucial in shaping her ideas about social and economic reform that she enacted at Hull-House and wrote about in *Twenty Years at Hull-House*. As with James, Addams was never cured of her condition and had to find a way to live with the mental and physical affects of her childhood illness and later disability. Whereas James learned to live with her disability through managing pain, Addams learned to live with her disability through social interconnection at Hull-House. While Knight (Addams’s biographer) names John Addams, Abraham Lincoln (a friend and political associate of John’s), being born female, and her American heritage as the “factors shaping the kind of person she would become,” I would also add illness and disability (10). In *The Rejected Body*, Susan Wendell points to the many complexities in defining an illness as a disability because “illness need not always be disabling...[and] many people with disabilities are healthy.” Most importantly, Wendell explains, “we must recognize that, like healthy people with disabilities, most people who have disabilities due to chronic or even life-threatening illnesses are not ‘globally incapacitated’” (20). In fact, neither James nor Addams was “globally incapacitated,” though they both experienced some amount of incapacitation. As in my chapter on James, I am not interested, here, in diagnosing Addams; I am interested in analyzing the ways in which living with a disability becomes integral to both her life story and in opening a settlement house.<sup>27</sup>

---

<sup>27</sup> In *Citizen: Jane Addams and the Struggle for Democracy*, the most recent and most critically acclaimed biography of Jane Addams to date, Louise W. Knight names John Addams, Abraham Lincoln (a friend and political associate of John’s), being born female, and her American

## Addams's Childhood Illness and Diagnosis of Neurasthenia

In the first chapters of her autobiography, Addams constructs a narrative of her life and the evolution of her ideas through several experiences that made her keenly aware of the problems of social class difference. In some ways, her decision to open a settlement house becomes the inevitable result sense of her childhood sensitivity to poverty and renewed sense of responsibility toward the poor of East London in her young adulthood. As Katherine Joslin argues in *Jane Addams, A Writer's Life*, the “narrative of her life has a predictable and forceful plot, one she did much to construct and preserve” (7). Looked at more closely, however, her text reveals a more complex narrative trajectory, in which her experience of living with a disability becomes integral to both her life story and her interest in settlement houses. In light of her own reflections, there can be no doubt that Addams's illness/disability had an impact on her life. In the following section, I discuss the early parts of Addams's autobiography and seek out the connections between her childhood experiences and disability and her later decision to open a social settlement.

In the “Preface,” Addams explains that she purposefully weaves her own life story with the story of Hull-House: “No effort has been made in the recital to separate my own history from that of Hull-House during the years when I was ‘launched deep into the stormy intercourse of human life’ for, so far as the mind is pliant under the pressures of events and experiences, it becomes hard to detach it.” Joslin argues that the early sections of the autobiography could be titled ‘Twenty-Nine Years before Hull-House’ because “the heroine disappears,” about a third of the way into the book, “leaving Hull-House itself as the hero of the tale” (107). In *The Education of Jane Addams*, Victoria Bissell Brown argues, similarly, that Addams wrote the autobiography so as “to advance her reform philosophy with the aid of an attractive, accessible life story; her purpose was not to engage in a public act of self-revelation” (8). It is interesting that Addams refuses to detach her own life story from the Hull-House story, implying that one's life cannot be separated from one's work. One way to read Addams's insistence on the simultaneity of these two stories is in terms of her views about the reciprocity of all human interaction. That is, her life story has as much to do with the creation of Hull-House as the creation of Hull-House has to do

---

heritage as the “factors shaping the kind of person she would become” (Knight 10). To this list, I would also add illness and disability.

with her life story. But, why does Addams find it impossible to separate herself from her work? In what ways is the story of Hull-House emblematic of the story of Addams's life? In what ways does Addams's embody her life story in the physical space of her text?

In the first chapter of the autobiography, "Earliest Impressions," Addams explains the importance of "childish experiences" on "future development." (1). One of the earliest experiences she recalls, before she was seven-years-old, involved a visit to the town where her father did business. There, she "had [her] first sight of the poverty which implies squalor, and felt the curious distinction between the ruddy poverty of the country and that which even a small city presents in its shabbiest streets" (2). After asking her father why people live in "such horrid little houses" and hearing his answer, Addams tells her father that she intends to live amongst the poor someday. This experience, and others that I will relate later in the chapter, gives the impression that Addams became keenly aware of the social and economic inequalities and injustices in childhood that she spent her adulthood trying to work out.

Also in the first chapter, Addams relates a dream she had "night after night that everyone in the world was dead excepting myself, and that upon me rested the responsibility of making a wagon wheel" (3). "The next morning," Addams explains, "would often find me, a delicate little girl of six, with the further disability of a curved spine, standing in the doorway of the village blacksmith shop, anxiously watching the burly, red-shirted figure at work" (4). Here, again, Addams feels the weight of the world on her shoulders, but this time she is doubly burdened because of her delicacy and disability. She can only look on as the male figure does the work she dreams she is destined to do. Later in her life, she will undertake the responsibility not to make a wagon wheel but to take matters into her own hands at the Settlement.

Elaborating on her disability, in this same chapter, Addams relates her feelings about the Sundays when "strangers" would patronize their family's church, where her father taught Bible class. "I imagined," explains Addams, "that the strangers were filled with admiration for this dignified person, and I prayed with all my heart that the ugly, pigeon-toed little girl, whose crooked back obliged her to walk with her head held very much upon one side, would never be pointed out to these visitors as the daughter of this fine man" (5). On these Sundays, Addams did not walk next to her father on the way to church, for fear that such a "handsome" man would be embarrassed to be seen with a "homely" little girl (6). Later, in the same small town where

Addams had her first experience with poverty, her father quells her fears about her appearance and disability. One day, as he is leaving his bank, they meet by accident on the street. Instead of ignoring her, as she assumes he will, her father makes a big show of meeting her unexpectedly. Although Addams describes being somewhat traumatized her disability, she also quickly moves away from the topic of disability in her text.

In *Embodied Care: Jane Addams, Maurice Merleau-Ponty, and Feminist Ethics*, Maurice Hamington argues that Addams developed habits and practices of caring at Hull-House that can be described as “embodied care.” Hamington defines Addams’s ethic of embodied care in terms of her “active listening, participation, connected leadership, and activism” at Hull-House (93). According to Hamington, Addams’s physical presence at Hull-House, where she actively listened to the immigrants of Chicago to understand their needs, is what makes her ethic of “embodied care” possible. “Hull-House,” Hamington argues, “was the vehicle for Addams and her cohort to physically confront the outcast ‘other’ of her day (e.g., the immigrant other, the working-class other, the poverty-stricken other, the prostitute other) (99). To this list, I would also add the ill and/or disabled “other.”

While Addams’s physical presence at Hull-House might be read as evidence of her embodied care ethic and was undoubtedly one of the primary reasons for the Settlement’s great success, it seems important to acknowledge that Addams’s own bodily experience of living with a disability may have also played a role in her ability to empathize with the “outcast ‘other’ of her day.” As Hamington points out, an ethic of “embodied care...takes as its starting point the context of one’s own body” (102). Aside from relating the importance of her physical presence at Hull-House, however, Hamington leaves Addams’s “own body” largely unaccounted for. Like the immigrants of Chicago that Addams’s served at Hull-House, the disabled have been historically oppressed by an American society built for people without disabilities. Surely, Addams’s own experience of living with an illness (spinal tuberculosis) and with a diagnosis of neurasthenia must have provided her with some amount of insight into the lives of the working poor, many of whom were ill, either because of unsanitary conditions in their neighborhoods or because of unregulated working conditions in Chicago factories.

In “The Body of Work: Illness as Narrative Strategy in Jane Addams’s *Twenty Years at Hull-House*,” Debra Hotaling points out that, “Although Addams in her autobiography never

deals directly with her illnesses, they still shape her narrative” (33). Although Addams does not have a vocabulary or a way of talking directly about her disability in her text, the rhetoric of neurasthenia gave her a vocabulary and a way of negotiating it. While her experience of disability is not discussed, Addams accepts neurasthenic rhetoric as a means by which to define and describe it. In some ways, Addams’s use of neurasthenic rhetoric testifies to the extent that she was complicit with her diagnosis of neurasthenia or at least that she accepted this way of viewing her disability. Of course, it is important to remember that this was the only “available means” at the time she was writing to describe it.

### **Addams’s Neurasthenic Rhetoric**

In the summer of 1881, the same year Beard published *American Nervousness* and described neurasthenia for the first time, Addams’s father died and Addams herself fell ill. In the fall of that same year, Addams started taking classes at the Woman’s Medical College of Philadelphia, but, after only a few months, she was exhausted and a doctor advised a rest” (Knight 119). However, she continued on with medical school and finished her exams in March. By then, she was completely exhausted and decided to enter a hospital for treatment (Knight 120). Addams recalls this time of her life in her autobiography in a chapter titled “The Snare of Preparation”:

The winter after I left school was spent in the Woman’s Medical College of Philadelphia, but the development of the spinal difficulty which had shadowed me from childhood forced me into Dr. Weir Mitchell’s hospital for the late spring, and the next winter I was literally bound to my sister’s house for six months (42).

As Addams indicates, here, what was once “spinal difficulty” in childhood becomes neurasthenia in adulthood. While turn-of-the-century physicians, including Mitchell and Beard, often blamed women’s education for their nervous exhaustion, Addams was suffering from a combination of issues that were both psychological and physiological in nature. As Knight points out, “Given her back troubles, fatigue and depression, inability to concentrate, and student status, Jane Addams fit perfectly [Mitchell’s] profile of a typical female neurasthenic patient” (120). Like James, Addams was also a member of an upper-middle class family with a history of neurasthenia, which no doubt contributed to her diagnosis at this time in her life. Although no

record survives of Addams's time at the hospital, it can be inferred that she took an abbreviated (three weeks) "rest cure" (Knight 120).<sup>28</sup> Afterward, she went home (to Cedarville) to take care of her stepmother Anna and to attend Rockford Female Seminary. In 1883, after graduating with a B.A. from the Seminary, she had surgery on her back and spent several months recovering at her sister's house (Knight 122).

After the six month stay at her sister's house, Mitchell had prescribed a therapeutic vacation, another common treatment for neurasthenic conditions, for which she was grateful: "I was very glad to have a physicians [sic] sanction for giving up clinics and dissecting rooms to follow his prescription of spending the next two years in Europe." As she explains, it was during these two years that "I had discovered that there were other genuine reasons for living among the poor than that of practicing medicine upon them, and my brief foray into the profession was never resumed" (42). Instead of becoming a doctor, Addams decides to open a settlement house.

Addams only briefly reflects on this tumultuous time in her life in her autobiography. In fact, she only mentions having an "illness" twice (both times on the same page) in the entire text. Thinking back on the previous twenty years, Addams recalls,

The long illness left me in a state of nervous exhaustion with which I struggled for years, traces of it remaining long after Hull-House was opened in 1889. At best it allowed me but a limited amount of energy so that doubtless there was much nervous depression at the foundation of the spiritual struggles which this chapter is forced to record (42).

In this passage, Addams defines her "illness" in terms of neurasthenic rhetoric, as producing "a state of nervous exhaustion" and resulting in "a limited amount of energy."

Interestingly, Addams describes her "nervous exhaustion" and/or "nervous depression" as "at the foundation of the spiritual struggles this chapter is forced to record." These lines, it seems, must have been the very lines that suggested to the author of the 1911 article I cite at the beginning of

---

<sup>28</sup> Scholars actually disagree on the extent to which Addams received care from Mitchell. For example, Diliberto claims: "Jane spent six weeks under Mitchell's care" (93), and Brown argues that it was Addams's stepmother Anna Haldeman Addams who entered Mitchell's hospital (117).

the chapter that Addams had undergone some sort of spiritual transfiguration as a result of her experience of living with a diagnosis of neurasthenia. As with entries in James's diary, in which James suggests a connection between her disability and morality, Addams implies a connection between her disability and spirituality. In fact, in arguing that neurasthenia primarily occurred in sensitive and refined individuals and things like masturbation were considered a barbarous, dangerous and unhealthy "waste," Beard implied that there was a certain kind of spirituality, both a religious spirituality and one involving a deeper connection to nature and the world in those whom were most likely to develop neurasthenia. More than suggesting a spiritual enlightenment, however, these lines and the title of the chapter ("The Snare of Preparation") imply that Addams's experience of living with a disability has helped to prepare her to open a settlement house. At the very least, this experience has figured prominently in her decision to minister to the poor.

### **Women's Education**

In the following section, Addams takes up the rhetoric of neurasthenia to make an argument about the importance of women's education or of not "wasting" one's education. The general disposition of the time was that women's education was making them sick. This idea was prominent among the male medical establishment; doctors argued that women were becoming increasingly nervous because they were overtaxing their brains with learning. This is an issue that Charlotte Perkins Gilman famously takes up in "The Yellow Wallpaper," which I discuss at length in the following chapter. Both Addams and Gilman argue that women's education has no economic value yet because they were expected to fulfill the role of housewife. In *Twenty Years at Hull-House*, Addams uses the rhetoric of neurasthenia to illustrate the necessity of putting knowledge to work, to exercising the brain in order to resist or reduce neurasthenia.

One Saturday night in 1883, as Addams recalls in her autobiography, she, and a group of other tourists, was taken to East London to watch the poor people bidding on vegetables that would rot before they could be sold on Monday. Far from entertaining, this scenario was deeply troubling to Addams, as was the sight of the "overcrowded [living] quarters" in this poor section of the city. According to Addams, even worse than the this view (from the top of an omnibus) of the poor clamoring for old and decaying vegetables was the realization that the situation

reminded her of something she had read about in a story, “The Vision of Sudden Death.” Remembering the plot of the story, Addams recalls,

Two absorbed lovers suddenly appear between the narrow, blossoming hedgerows in the direct path of the huge vehicle which is sure to crush them to their death. De Quincey tries to send them a warning shout, but finds himself unable to make a sound because his mind is hopelessly entangled in an endeavor to recall the exact lines from the Iliad which describe the great cry with which Achilles alarmed all Asia militant.

This remembrance led to Addams to realize that, “This is what we were all doing, lumbering our minds with literature that only served to cloud the really vital situation spread before our eyes” (45). In some ways, this realization denigrates the education she had worked so hard for but it also foreshadows her later understanding that knowledge is wasted unless it is useful.

Given Beard’s economic framework for defining and treating neurasthenia, it is interesting that Addams becomes particularly interested in economic divisions at the height of her nervous exhaustion. As she explains in her text, “For two years in the midst of my distress over the poverty...there was a mingled sense of futility, of misdirected energy, the belief that the pursuit of cultivation would not in the end bring solace or relief” (46). Viewing the world through a neurasthenic economy, when much energy seems already wasted or lost, Addams begins to seriously consider where to invest. In this passage, Addams expresses her overwhelming feelings of worthlessness in the face of a desperate societal situation and her own nervous exhaustion, which she realizes no amount of rest or “cultivation” can cure. This statement is also an indictment of the “rest cure” treatment for offering no real “relief” and enforcing uselessness when there is much important work to be done.

The next lines of Addams’s text continue this line of thinking and reveal the conclusions she reached as a result of feeling ineffectual for two years:

I gradually reached the conviction that the first generation of college women had taken their learning too quickly, had departed too suddenly from the active, emotional life led by their grandmothers and great-grandmothers, that the contemporary education of young women had developed too exclusively the power of acquiring knowledge and of merely receiving impressions; that somewhere in the process of ‘being educated’ they had lost

that simple and almost automatic response to the human appeal, that old healthful reaction resulting in activity from the mere presence of suffering or of helplessness; that they are so sheltered and pampered they have no chance even to make ‘the great refusal’ (46).

As in passage before, Addams’s words reflect the rhetoric of neurasthenia and its “rest cure” treatment, which worked to return women to more traditional gender roles, at least in part, because education was thought to be destroying women’s health. However, she also suggests that the “process of ‘being educated’” that makes women the passive receptacles of knowledge, encumbered with mere “impressions,” and therefore this passage might also be read as a call to action. In fact, Addams rails strongly against a passive stance, even suggesting that it is enforced inactivity that is making women sick and that activity is actually a more “healthful reaction.” Her notion of “the great refusal,” then, might be read both in terms of resistance against traditional gender roles and the expectation to lead a heteronormative life. It might also be read as resistance to neurasthenia. As is shown by this chapter, Addams was not interested in leading a “traditional” life; she got an education when it was considered unhealthy for a woman to do so, and she resisted neurasthenia and the life of a housewife in favor of an active life at Hull-House and a female partnership.<sup>29</sup>

Addams had started to work out her ideas about women’s education and gender roles in *Democracy and Social Ethics* (1902). In this text, she reiterates the ideas Gilman expresses in *Women and Economics* (1900) about women’s unpaid household labor. She argues that women’s household labor has economic value because she provides services to her husband, such as mending and washing his clothes that he would have otherwise had to pay for. In her words, “The wife of a workingman still has a distinct economic value to her husband. She cooks, cleans, washes, and mends—services for which, before his marriage, he paid ready money” (107). This argument, as I will show in my next chapter, is slightly different from Gilman’s, but the basic point about the value of women’s household work is the same. Both Addams and Gilman

---

<sup>29</sup> Like James and Loring, Addams and Starr established a longstanding relationship. As with James and Loring, it is unclear whether this relationship was sexual, only that it lasted for much of their lives.

concerned themselves, then, with cultural assumptions about the connections between women's work and women's health. This, I will explore in the following sections of this chapter.

### **Modern Unease and 'Maladjustment'**

In the following section, I illustrate the ways in which Addams uses the rhetoric of neurasthenia to assert an argument about the problems of "maladjustment" and "imbalance" and how these problems were related to and, in some cases, led to neurasthenia. I argue that Addams uses the language of the "nerves" to challenge the common conceptions of who, how and why people, especially women, got sick. One of the main problems, according to Addams, facing Americans at all economic levels, was an overwhelming sense of "maladjustment." Indeed, the notion of "social maladjustment" was a particularly turn-of-the-century concept. In "Character's Conduct: The Democratic Habits of Jane Addams's 'Charitable Effort,'" James Salazar points out: "The notion of 'maladjustment' had emerged by the Gilded Age [1870-1900] as a kind of metonymic shorthand for the systematic and radically dislocating transformations of urban industrialization, mass migration, and commodity culture" (262). Addams uses this terminology in *The Spirit of Youth and the City Streets* (1909) to suggest exactly the kind of "dislocating transformations" that Salazar points to. In this text, Addams locates the problem of maladjustment in the lack of coherence between the American educational system and "industrial development" (119). Children, forced to labor in factories, have not been adequately prepared for this work by the American educational system. Furthermore, forcing children to work in factories at young ages Addams relates, stifles creativity among the young and impressionable. Addams expands on the idea of maladjustment in *Twenty Years at Hull-House* and argues that the lack of productive ways for the educated and uneducated youth of American to expend their energies was making them sick.

After her first two-years-long visit to Europe, Addams found herself back in America and wondering what to do next. She had already determined that medical school was not for her, and the idea of Hull-House had not yet solidified in her mind. In relating a story about a young girl whose mother forced her to take music lessons for four hours a day, Addams remarks on the societal "assumption that the sheltered, educated girl has nothing to do with the bitter poverty and social maladjustment which is all about her, and which, after all, cannot be concealed for it breaks through poetry and literature in a burning tide which overwhelms her; it peers at her in the

form of heavy-laden market women and underpaid street laborers, gibing her with a sense of her uselessness” (47). Surely, Addams reflects her feelings, in this scenario, about her own “uselessness” in the face of social turmoil all around her. Indeed, “bitter poverty” was no doubt a bigger issue in turn-of-the-century America as it is today. In his writing and thinking, Beard perpetuated the idea that Americans were becoming increasingly susceptible to nervous exhaustion because of their difficulty in adjusting to the rapid and widespread changes taking place at that time, including modernization, industrialization, urbanization and women’s education. In Addams’s above statement, she challenges the notion of learning for the sake of learning and responds to ideas about women’s education to value it, to emphasize the importance active rather than passive roles for women. Whereas Beard talked about maladjustment in the upper classes of Americans, Addams recognized maladjustment occurring in all classes. Therefore, she sought out collective solutions at Hull-House, where people of all social classes could learn from each other.

Addams remained in America for about two years after her first trip to Europe. As she relates in her autobiography, it was during this time that she reached the depths of her own feelings of maladjustment:

Family arrangements had so come about that I had spent three or four months of each of the intervening winters in Baltimore, where I seemed to have reached the nadir of my nervous depression and sense of maladjustment, in spite of my interest in the fascinating lectures given there by Lanciani of Rome, and a definite course of reading under the guidance of a Johns Hopkins lecturer upon the United Italy movement (50).

In this passage, Addams relies on neurasthenic rhetoric to define and describe her illness. Once again, she makes the connection between her illness and her education. She stresses, here, as previously, the trouble with knowledge for knowledge’s sake. The implication is that putting her knowledge to work might make her (and other women in her position) feel better. This thinking was, of course, in critical dialogue with the rhetoric of neurasthenia and the contention with the idea that women’s education was making them sick. What was making women sick, Addams implies, was not education in and of itself but being educated and being confined to the life of a housewife.

During her second trip to Europe, after a two-year stint in America, Addams found herself in a similar situation to when she was laid-up at her sister's house. While in Rome studying the Catacombs, Addams experiences a "severe attack of sciatic rheumatism, which kept me in Rome with a trained nurse during many weeks, and later sent me to the Riviera to lead an invalid's life once more" (54). Addams had once again submitted to taking a "rest cure" in order to restore her energy. In her *The Education of Jane Addams*, Brown argues that "[Addams's] journey from that youth to Hull-House involved less invalidism...than the standard story allows, and as much softening as toughening" (10). But, as I show in this chapter, we cannot deny the ways in which her disability may have shaped her life and life choices. In neurasthenic rhetoric, Addams finds a way not only to define and describe her disability but also to explore the connections between the problem of "maladjustment," women's education and women's disability. She arrives at the conclusion that women could not adjust to the idea of returning to the home after being educated to do more than that.

### **Interdependency and Sociality**

In what follows, Addams uses the rhetoric of neurasthenia to challenge the medical reality of women's illness and the economic reality of women's inequality and contested citizenship. While Addams becomes, during her worst period of "nervous depression," interested in the economic situation of the poor of East London, she changes the reality of her diagnosis by creating a settlement house for the poor of Chicago. As she recalls in her autobiography, in her search for "economic peace," she becomes

gradually convinced that it would be a good thing to rent a house in part of the city where many primitive and actual needs are found, in which young women who had been given over too exclusively to study might restore a balance of activity along traditional lines and learn of life from life itself; where they might try out some of the things they had been taught and put truth to the 'ultimate test of the conduct it dictates or inspires' (55).

Here, James reflects the neurasthenic idea that women who "study" too much might become imbalanced. However, it is not education that is the problem, but the inability to put knowledge to use. Whereas doctors like Mitchell recommended passivity and rest, Addams argued that balance might be restored through "activity" and experience. In her essay "The Authority of

Experience: Jane Addams and Hull-House” Francesca Sawaya notes that this passage is an “implicitly feminist critique of domesticity” in which the private space of the home is reimagined as a public space (51). In fact, the women who devoted themselves to the Settlement cause worked both in the house and outside to change various unjust public policies, including, but not limited to, sanitation, the labor issue and women’s suffrage. Thus, at the same time that Addams employs the neurasthenic idea that too much study might result in some sort of imbalance, perhaps of “nerve-force,” she also rejects the whole notion of the “rest cure” and suggests a much more active and proactive alternative.

The idea of having young women put their theoretical ideas to practical use is, of course, also thoroughly pragmatic, and Addams concludes her thoughts with a pragmatic maxim. Of course, Addams is considered a pragmatist, often discussed alongside William James and John Dewey.<sup>30</sup> Although Addams’s quote is not exact, she is most undoubtedly citing William James, who wrote: “The ultimate test for us of what a truth mean is indeed the conduct it dictates or inspires.”<sup>31</sup> Indeed, Addams understood this quotation, as James intended, to signify the importance of experiential knowledge.

Addams had a keen sense that young women (and men) were feeling useless and nervous, and were becoming nervously exhausted because of their inactivity. Her idea was that the Settlement would provide opportunities for the educated young women and men and the less privileged, immigrant youth population to actively participate in the betterment of society. While Beard and his colleagues argued that these latter youth were less prone to becoming nervously exhausted, Addams recognized the effects of maladjustment on all social classes and, therefore, she also recognized the importance of creating relationships among the educated and the uneducated, the fortunate and the less fortunate. As she explains in her text, “Hull-House was soberly opened on the theory that the dependence of classes on each other is reciprocal; and that as the social relation is essentially a reciprocal relationship, it gives a form of expression that has peculiar value” (59). In Addams’s view, the residents, who were mostly educated, upper class women, and the poor Chicago immigrants could mutually benefit from each other. Specifically,

---

<sup>30</sup> See Louis Menand’s *The Metaphysical Club* for a full account of Addams’s pragmatism and connection to James and Dewey.

<sup>31</sup> See William James’s “Pragmatic Theory of Truth.”

the residents could benefit from some amount of work whereas the working class could benefit from some amount of education. In many ways, Addams opened Hull-House as a means of working toward collective solutions to various social, political, and economic problems. Thus, the “peculiar value” of constructing a “reciprocal relationship” between these different social classes was that both could get healthier by becoming actively involved in each other’s lives and in the life of larger society.

In a chapter titled, “The Subjective Necessity for Social Settlements,” Addams elaborates on the idea that the young are feeling useless and nervous from their inactivity:

We have in America a fast-growing number of cultivated young people who have no recognized outlet for their active faculties. They hear constantly of the great social maladjustment, but no way is provided for them to change it, and their uselessness hangs about them heavily... These young people have had the advantages of college, of European travel, and of economic study, but they are sustaining this shock of inactivity... Many of them dissipate their energies in so-called enjoyment. Other not content with that, go on studying and go back to college for their second degrees; not that they are especially fond of study but because they want something definite to do and their powers have been trained in the direction of mental accumulation... Our young people feel nervously the need of putting theory into action, and respond quickly to the Settlement form of activity” (79-80).

Life at the Settlement would presumably allow this educated group to put their knowledge to use and work. Although a pragmatic notion, this passage also reflects a neurasthenic understanding of appropriately investing bodily energy. Specifically, while “so-called enjoyment” could “dissipate” of nerve funds, “putting theory into action” could benefit the individual and the larger society.

Part of the work of Hull-House, as Addams describes it, was to “heal neighborhood ills” (129). Addams was concerned not only with the metaphorical wasting of bodily energy but also with the literal problem of waste (garbage) accumulating in city streets. As Addams explains: “One of the striking features of our neighborhood twenty years ago, and one to which we never became reconciled, was the presence of huge wooden garbage boxes fastened to the street

pavement in which the undisturbed refuse accumulated day by day” (185). This accumulation was an enormous problem in her Hull-House neighborhood “where the normal amount of waste was much increased by the decayed fruit and vegetables discarded by the Italian and Greek fruit peddlers” (185). Aside from being reminiscent of the earlier scene in her book where she watches decayed produce being auctioned off to the poor of East London, the problem here appears to be what Addams perceives as an “[ab]normal amount of waste,” which results in a detestable social atmosphere, an unbearable stench and, literally, sickening conditions. In fact, the accumulating garbage allowed for the spread of bacteria and therefore disease, particularly among immigrant children who were prone to playing in and around garbage boxes and oftentimes eating their contents.

These circumstances led Addams to take action by putting in a bid for the garbage removal in the nineteenth ward. While her bid “was thrown out on a technicality,” she was appointed “garbage inspector of the ward” and was able to effect some change (188). The neighborhood was more clean and comfortable and the “death rate of our ward was found to have dropped from third to seventh in the list of city wards and was so reported to our Woman’s Club, the applause which followed recorded the genuine sense of participation in the result, and a public spirit which had ‘made good’” (190). In fact, Addams’s work at Hull-House allowed her to “heal” herself and “neighborhood ills.”

When read in juxtaposition to Addams’s concern over the wasting of bodily energy, her concern with this other kind of waste takes on new meaning. In particular, we might read Addams’s interest in garbage in terms of her larger concern with individual and societal ills. The reduction in the amount of waste allowed to accumulate in the streets was crucial to the health of immigrants because so many of their children got sick and sometimes died from the unsanitary conditions in their neighborhood. Likewise, it was important to manage the “mental accumulation” via cultivation in favor of “putting theory into action” for the leisure class. Again, individual sickness can be treated or cured through reciprocal social practices that lead to social healing.

In a later chapter titled “The Value of Social Clubs,” Addams takes up the rhetoric of neurasthenia in order to reiterate her worry that the immigrant youth population is expending their energies in “meaningless excitements” (239). The social clubs at Hull-House provided

opportunities for “these restless young people” to use their energy more productively (228). For example, the Hull-House Woman’s Club provided opportunities for both “social pleasure” (234) and “city betterment” (237) through organized parties, award’s ceremonies for schoolgirls/boys with good grades, communal gardening, and a host of other activities as well as through their connection with committees such as the Juvenile Protective Association. Perhaps most importantly, the Hull-House social clubs allowed individuals to “form a basis of acquaintanceship for many people living in other parts of the city” (239). Through these relationships, Addams theorizes, these people, “are thus brought into contact, many of them for the first time, with the industrial and social problems challenging the moral resources of our contemporary life” (239).

In the earlier chapters of her autobiography, Addams later describes her personal experience of maladjustment and extends those ideas to the leisure-class youth in America. In the later chapters, Addams describes the causes and effects of maladjustment on the working-class society. Lamenting the working-class’s lack of time for the arts Addams explains, “We constantly see young people doing overhurried work. Wrapping bars of soap in pieces of paper might at least give the pleasure of accuracy and repetition if it could be done at a normal pace, but when paid for by the piece, speed becomes the sole requirement and the last suggesting of human interest is taken away” (245). Here, it is not only the way society is rapidly changing but also the economic necessity of having to quicken the pace that Addams sees as destructive. In her chapter entitled “Arts at Hull-House,” Addams explains that Hull-House offered an art gallery, an art studio, a music room and a communal theater. The classes and lessons were designed to expose the working class to the arts, to encourage their creativity, to train budding artists, musicians or actors, and to help them cope with “this period of industrial maladjustment when the worker is over mastered by his tools.” (247). The arts and the Labor Museum allowed workers to gain knowledge about the history of their current work and how goods were produced individually before they were mass-produced in factories. In another passage, Addams expresses distress over the loss of potential musicians and explains that, “we constantly see the most promising musical abilities extinguished when the young people enter industries which so sap their vitality that they cannot carry on serious study in the scanty hours outside of factory work” (248). In this instance, as in the passage above, Addams calls on the rhetoric of neurasthenia to describe how the long factory hours “sap [the] vitality” of working-class youth. In both passages,

Addams uses the rhetoric of neurasthenia to assert her view of factory conditions, which she saw as creating a sense of “industrial maladjustment” or exhaustion in workers, who worked too long and were “overhurried.”

### **Addams’s Embodied Rhetoric**

In many ways, Addams’s solutions for the leisure and immigrant class’s troubles are the same. The answer for both groups is to come to Hull-House and actively participate. The hope is that this engagement, the activity and the interconnection between the social classes would benefit both individuals and larger society. If her text is didactic, it is with the aim that her leisure and working class audiences would learn the value of working together toward individual and societal progress. Perhaps this is less an ideal value than a lesson learned from having a disability. That is, it is because of her experience of being disabled that she recognizes the importance of communitarian thought and action. Her philosophy of social settlements depends on a model of interdependency toward mutual goals. As such, her text is also a lesson on how to get and stay well.

Rather than submitting to the cultural trend of viewing women’s education negatively, Addams asks a pragmatic question: What is the use of an education without putting that knowledge to work? She suggests that activity, especially productive social activity, rather than inactivity, is the means to personal and societal health. In other words, the activities at Hull-House created a real reason for feeling fatigued, and the various clubs and recreational facilities provided productive means for expending energy for both the nervous educated class and the immigrant youth. In *Twenty Years at Hull-House*, Addams constructs a purpose for her own disability, which provide her with the experience and the language with which to speak about human suffering and the need for social and economic reform.

## Chapter Four

### “[S]o many women break down”: Charlotte Perkins Gilman’s Transformations of Neurasthenic Rhetoric

Like James and Addams, and many other turn-of-the-century writers, Charlotte Perkins Gilman was steeped in Beard’s rhetoric of neurasthenia. Born in 1860 (the same year Addams was born), Gilman was in her mid-twenties when the rhetoric of neurasthenia was becoming a popular mode of communication. This rhetoric, as I explain in previous chapters, was employed by the medical community to define and describe neurasthenia and by other professionals to negotiate the changing landscape of American culture. In this chapter, I look at how Gilman uses Beard’s neurasthenic rhetoric to create a critical rhetoric of her own that was in dialogue with Beard but extended his ideas.

In this chapter, I analyze Gilman’s use of Beard’s neurasthenic rhetoric to make sense of her experience of living with a diagnosis of neurasthenia and to argue for a renewed understanding of women’s work. I contend that Beard’s economic rhetoric of neurasthenia, which stated that people were becoming increasingly nervous because of their direct involvement with the processes of modernization, provided Gilman with a language and structure to make an argument about the importance of rethinking women’s roles. In fact, I argue, Gilman derives her economic theories about the importance of women’s productive labor from these popular medical/economic theories about the wasting of nervous energy.

I focus primarily on Gilman’s most popular and most highly regarded texts on the subject of women’s nervous illness and domesticity: “The Yellow Wallpaper” (1892), *Women and Economics: The Economic Factor Between Men and Women as a Factor in Social Evolution* (1898) and *The Home: Its Work and Influence* (1903), but I also include some discussion of her autobiography, *The Living of Charlotte Perkins Gilman* (1935) and nonfiction essays. I begin with a brief sketch of Gilman’s early thought and work. Then, I analyze how Gilman uses neurasthenic rhetoric “The Yellow Wallpaper” to understand her experience of living with a diagnosis of neurasthenia and to help her create an alternative to the “rest cure.” Following that discussion, I examine how Gilman employs neurasthenic rhetoric in *Women and Economics* and *The Home: Its Work and Influence* to construct her own rhetoric in order to argue for women’s

public work and economic independence. I conclude with an exploration of how Gilman's uses neurasthenic rhetoric to characterize neurasthenia as a disability in her autobiography. In this section, I suggest the ways in which the rhetoric of neurasthenia connects to contemporary attitudes toward disability.

### **Gilman's Early Thought and Work and Diagnosis of Neurasthenia**

In May of 1884, which was the same year James set sail for England, Gilman married Walter Stetson. Within weeks after the marriage, Gilman became pregnant with her first and only child, Katherine Beecher Stetson. Just after the birth, Gilman began to experience symptoms described by her doctors as neurasthenia. As she recalls in her autobiography, "This disorder involved a growing melancholia, and that, as those who know who have tasted it, consists of every painful mental sensation, shame, fear, remorse, a blind oppressive confusion, utter weakness, a steady brain-ache that fills the conscious mind with crowding images of distress" (90). While the couple hoped Gilman's distress would fade over time, her symptoms were actually exacerbated once she began to care for her infant daughter.

In 1887, unable to cope with her feelings of "growing melancholia" and "crowding images of distress," Gilman went to Philadelphia to visit Dr. S. Weir Mitchell, who diagnosed her with neurasthenia and prescribed the "rest cure." Mitchell already had some preconceived notions about Gilman, after having treated the Beecher sisters, for the same condition: 'I've had two women of your blood here already,' he told me scornfully. Nonetheless, as she recalls,

I was put to bed and kept there. I was fed, bathed, and rubbed, and responded with the vigorous body of twenty-six. As far as he could see there was nothing the matter with me so after a month of this agreeable treatment he sent me home with this prescription: "Live as domestic a life as possible. Have your child with you all the time...Lie down for an hour after each meal. Have but two hours' intellectual life a day. And never touch pen, brush or pencil as long as you live" (96)

But, as Gilman recounts, "I went home, followed those directions rigidly for months, and came perilously near to losing my mind...I made a rag baby, hung it on a doorknob and played with it. I would crawl into remote closets and under beds—to hide from the grinding pressure of that

profound distress” (96). Of course, Gilman had expressed the same point of view many years before in “The Yellow Wallpaper,” which I will discuss at length in this chapter.

In 1887, at the height of her nervousness, Gilman began to seriously reconsider her decision to live a domestic life. Though she tried to make her marriage work, through a trial separation, she decided to leave Walter Stetson in 1888. By 1889, as Alice James was penning her first diary entry and Jane Addams was opening the doors to Hull-House, Gilman’s marriage was over. After the couple had been separated for one year, Stetson got engaged to Grace Ellery Channing, who was also Gilman’s best friend and co-writer. Though Channing and Gilman were friends, Gilman was delighted when Stetson chose Channing for his wife; for one thing, she could not imagine a better stepmother for her young daughter.

In 1891, about eight years after Addams opened Hull-House, Gilman began to nurture a kind of collective community of her own, as the operator of a boarding house. While trying to support her young daughter Katherine in California, Gilman took over a large house and kept boarders in order to earn her living. As she explains in her autobiography, she took in six invalid women, who would come to her in the middle of the night and tell her their problems. (139). As she explains, “My own various distresses gave me carte blanche in other people’s troubles, it appeared. I found the closest thing one can say to another is, ‘I’ve been there!’” (178). Thus, Gilman established not only a business but also an emotional relationship with those who boarded in her house, and, in this way, her comparably small endeavor anticipated the kind of reciprocal relationship Addams achieved at Hull-House.

In 1894, Gilman’s divorce from Stetson was finalized, and she was living in San Francisco with her daughter Katherine and working as an editor and writer at the *Impress*. When this magazine failed, Gilman was left in debt and decided to relocate. She sent Katherine to live with Stetson and Channing, who married shortly thereafter, and went on the road. As she points out in her autobiography, “Back and forth and up and down, from California to Maine, from Michigan to Texas, from Georgia to Oregon, twice to England, I wandered” (181). One of her first stops along the way, at the request of Addams herself, was Chicago. Gilman arrived in Chicago in 1895 and remained there for three months, attending and giving lectures and working with Helen Campbell in a settlement, a branch of Hull-House in Chicago’s North Side called

“Little Hell.” Though she was asked to remain in Chicago as the head mistress of “Little Hell,” Gilman declined, citing the “unreliability of my health” as the reason she could not stay (185).

Addams and Gilman had different views on the importance of the home and women’s domestic labor. While Addams believed that the home was central to woman’s experience, Gilman believed that the home served to limit woman’s sphere of influence. In *Twenty Years at Hull-House*, Addams positions the home as the center of woman’s activity and characterizes Hull-House as a kind of home base for many of the social reform efforts she and the other woman residents initiated. In many respects, this view of the settlement house as home both reinforces and challenges women’s typical roles at this time. As a space for women’s activism and collective living, it represents a challenge to traditional gender roles. But, Addams’s emphasis on domestic labor serves to reinforce the ideology of women’s domesticity. Unlike Addams, Gilman viewed the home as a representation of women’s limited sphere of social, political, and economic influence. In fact, at the same time that Addams settled into her settlement house, Gilman began to lead the life of a vagabond and did not have a permanent home for another five years. And, of course, Gilman makes it quite clear in much of her writing, that she saw the home not as an appropriate venue for women’s work but as a confining and limiting space in which creativity was necessarily stifled by the routine of domestic labor. That is, Gilman did not see home as a home base for reform; she sought to transplant women’s work to public places for social purposes.

Gilman, like Addams, believed that work rather than rest could help to cure nervousness. However, whereas Addams believed that women, overeducated, bored and nervous, should undertake domestic labor in order to put their knowledge to work, Gilman found this kind of traditional work to be a cause of rather than a cure for women's nervousness. While Addams, influenced by William James, looked to American pragmatism as an answer to her questions about women's nervousness, Gilman, influenced by the women's club movement, constructed an argument grounded in early feminist thought (the woman question) about women's economic independence as the means to women's health. Both women, however, sought societal change through writing and public speaking and various reform movements. Both were concerned not only with women's health but societal health.

In recent years, scholars have diagnosed Gilman with postpartum depression. At the turn of the last century, however, the feelings Gilman describes were understood as symptoms of neurasthenia. It was, as I point out in previous chapters, the available means for describing women's illness at the time. As in my other chapters, I will not characterize the nature of Gilman's illness here; instead, I will examine the ways she uses Beard's neurasthenic rhetoric to construct a counter-rhetoric of her own to argue against the "rest cure" and for women's public work.

### **Gilman's Fictional and Nonfictional Deployment of Neurasthenic Rhetoric**

Understanding how Gilman uses neurasthenic rhetoric sheds light on how women living with a diagnosis of neurasthenia understood themselves and their relationship to larger society, both to other women and, as woman patients, to the male medical establishment. Gilman was diagnosed with and treated for neurasthenia and, therefore, became a woman patient who developed a particular relationship to the male medical establishment. In this fictional piece and in much of her other fictional and non-fictional work, Gilman implements components of Beard's neurasthenic rhetoric both to make sense of her illness and to argue for the importance of women's intellectual work.

#### **"The Yellow Wallpaper"**

In her critical sourcebook, Dale M. Bauer points out that "The Yellow Wallpaper" was radical for its time and "elicited strong reactions" from its would-be publishers, William Dean Howells at the *Atlantic Monthly* and Horace E. Scudder at the *Atlantic* (14). Neither of these publishers would print the piece because both were apparently "troubled" by the story's "horrificing rendition of the heroine's mental illness" (14). Eventually, though, the story was printed and gained Gilman some status as a writer. Perhaps these publishers also wanted to protect the integrity of the male medical establishment, which Gilman calls into question in her piece.

Though "The Yellow Wallpaper" did not receive much scholarly attention when it was published, or in the many decades to follow, since its republication by the Feminist Press in

1973, there has been an explosion of interest in the text and author.<sup>32</sup> As Bauer points out, the story has been read as an autobiographical representation of the depression Gilman experienced during her first marriage to Walter Stetson; as a cultural critique of patriarchy and the male medical community's treatment of women's nervous illnesses; as a reflection of the widespread "invalidism, neurasthenia, and disease" among white, middle-class American women at the turn of the last century; and as an example of how one woman attempted to "free herself from social constraints" (26).<sup>33</sup>

All of these scholarly interpretations have contributed to a richer understanding of Gilman's life and work. Certainly, Gilman's short story and the many analyses of it have shed light on women's nervousness, both on how they were diagnosed and treated by male doctors as well as how women responded to their diagnoses and treatment regimens. But, what gave this abbreviated story the power to intimidate potential publishers in the late nineteenth century and

---

<sup>32</sup> Within the few decades, there have been numerous biographies and critical essay collections devoted to understanding the life and works of Charlotte Perkins Gilman. A few of the most recent biographies of Charlotte Perkins Gilman include: Mary A. Hill's *Charlotte Perkins Gilman: The Making of a Radical Feminist* (1980); Sheryl C. Meyering's *Charlotte Perkins Gilman: The Woman and Her Work* (1988); and Ann J. Lane's *To Herland and Beyond: The Life and Works of Charlotte Perkins Gilman* (1990). Some of the most recent critical essay collections include: Joanne B. Karpinski's *Critical Essays on Charlotte Perkins Gilman* (1992), Jill Rudd and Val Gough's *Charlotte Perkins Gilman: Optimist Reformer* (1999); Catherine J. Golden and Joanna Schneider Zangrando's *The Mixed Legacy of Charlotte Perkins Gilman* (2000); and Cynthia J. Davis and Denise D. Knight's *Charlotte Perkins Gilman and Her Contemporaries* (2004).

<sup>33</sup> The "yellow" in "The Yellow Wallpaper" has also produced a variety of interpretations in recent scholarship. It has been read "as a reference to urine;" "to the arsenic often used in the nineteenth century to create yellow wallpaper;" and "to Asian ('yellow') women" (Bauer 27). In a recent article entitled "Charlotte Perkins Gilman and the Yellow Newspaper," Sari Edelstein provides a compelling argument that the "yellow" in "The Yellow Wallpaper" is a reference to the "yellow journalism" that was so popular at the turn of the last century in America and which Gilman despised.

invigorate feminist critics in the late twentieth century? Perhaps it is Gilman's extraordinary ability to dramatize not only her own experience but what literary and cultural critics and historians assume was the experience of many women who were diagnosed with and treated for neurasthenia. In fact, the experience of the story's narrator is autobiographical and deeply personal and, at the same time, generalizable. Though the story details an individual struggle, it is generalizable because so many women in the upper echelons of society were deemed neurasthenic. Women considered especially at risk, as I have discussed in previous chapters, were middle to upper class, intellectuals—those most likely to have access to Gilman's short story.

Published in 1892 in the *New England Magazine*, "The Yellow Wallpaper" drew attention to the ways in which women were being mis-treated by the male medical establishment involved in diagnosing and treating women's nervousness. In fact, Gilman is now best remembered for this short story, in which she famously criticizes Dr. S. Weir Mitchell's "rest cure" treatment for neurasthenia. In her text, Gilman constructs a narrator who is forced to follow her doctor's regimen of isolation and bed rest, which results in disastrous consequences. The narrator, mirroring Gilman's own experience of having been diagnosed with and treated for neurasthenia, has just given birth and is experiencing many unwanted sensations and feelings that her doctor and her doctor-husband explain must be a result of "temporary nervous depression" ("The Yellow..." 42). Thus, without much of a choice in the matter, the narrator is required to remain in an isolated, attic-like space until she is "well again" (42). However, this imprisonment, along with the added restriction of not writing/working, serves to intensify rather than diminish her symptoms. Soon, the narrator finds herself clawing at the yellow wallpaper on the wall, seeking to extract the many female bodies she imagines are hidden there, until she finally gives in to creeping in a repetitive circle along the floorboards. As many critics have pointed out, Gilman depicts the "rest cure" as worse than the disease.

Reflecting the cultural milieu and Gilman's personal experience, the narrator in "The Yellow Wallpaper," a writer, is "absolutely forbidden to 'work' until I am well again" ("The Yellow..." 42). Engaging in any educational or intellectual activity was considered dangerous for women, especially those already suffering from nervous exhaustion. The narrator of Gilman's short story, however, held a different idea about women's work, and expressed her belief "that

congenial work, with excitement and change, would do me good” (42). Because of her feelings on the matter, the narrator decides to “write for a while in spite of them, but it *does* exhaust me a good deal—having to be so sly about it, or else meet with heavy opposition” (42). Interestingly, though, it is not the writing that serves to “exhaust” the narrator, but having to hide it or “meet with heavy opposition.” Indeed, the narrator meets with resistance on any proposal to deviate from her doctors or doctor-husband’s orders.

Working to further tire her out is the expectation that she keep her emotions in check. In “The Yellow Wallpaper,” the narrator explains, “I get unreasonably angry with John sometimes. I’m sure I never used to be so sensitive. I think it is due to this nervous condition...but John says if I feel so, I shall neglect proper self-control; so I take pains to control myself—before him, at least, and that makes me very tired” (43). Here, it is not “anger” itself that “makes her very tired,” but rather having to practice “self-control” in front of her husband. The notion that the narrator has to restrain her emotions comes up countless times in *The Diary of Alice James*. While women of the Victorian Era were expected to restrain themselves in both private and public settings, those diagnosed with neurasthenia, were subject to even stricter codes of feminine conduct.

The narrator in “The Yellow Wallpaper” is never cured of her nervousness because she is not allowed to work/write. She hides her writing from John because “He says that with my imaginative power and habit of story-making, a nervous weakness like mine is sure to lead to all manner of excited fancies, and that I ought to use my will and good sense to check the tendency. So I try” (46). Nevertheless, as is exemplified in several key moments in the text, she explains, “I think sometimes that if I were only well enough to write a little it would relieve the press of ideas and rest me” (46). Again, she is not able to fully resist her doctors’ orders. Her doctors’ prescription of enforced rest and living a purely domestic life exacerbated rather than cured her nervousness.

In this story, Gilman begins to develop a theory about women’s work, in which she privileges productive labor and work outside the home over reproductive labor and domestic chores. The narrator critiques traditional notions of feminine domesticity: “[John’s sister] is a perfect and enthusiastic housekeeper, and hopes for no better profession. I verily believe she thinks it is the writing which made me sick!” (47). In contrast to the prevailing views of the time,

however, it is the lack of writing that is making the narrator sick. Intellectual work, then, according to the narrator, could be a kind of remedy for women's nervousness. Again, Gilman clearly distinguishes between what she sees as domestic work leading to exhaustion and the productive work of writing.

Later in the story, the narrator brings up the subject of her work/writing again. She writes:

I don't know why I should write this.

I don't want to.

I don't feel able.

And I know John would think it absurd. But I *must* say what I feel and think in some way—it is such a relief! (49).

In many ways, the women trapped in the pattern of "The Yellow Wallpaper" represent women's domestic confinement, and the narrator's circuitous creeping at the end of the story suggests the endless, routine nature of domestic labor that Gilman wants to avoid. Although it has a dramatic and, in some ways, tragic end, the story serves not only to warn Mitchell and other doctors of the dangers of the "rest cure" and to suggest a counter-cure for neurasthenia, grounded in activity and work as opposed to passivity and rest. The idea that writing/work is a "relief" is traceable in James, Addams, and Gilman's texts. All three authors suggest that work, written work in particular, but other kinds of work as well, rather than harmful, can be healthful.

## **Women and Economics**

As in "The Yellow Wallpaper," Gilman uses Beard's rhetoric of neurasthenia in *Women and Economics* in order comment on the problematic nature of women's work. However, in this latter text, she argues more vehemently for a broader view of women's roles in society as well as a renewed understanding of women's work and women's economic independence. In this text, Gilman directly connects women's nervousness to what she characterizes as the dysfunctional economic relationship between American men and women. In many ways, Beard's rhetoric of neurasthenia serves a dual purpose throughout Gilman's work; she uses this language not only to

characterize her own experience with being diagnosed and treated for neurasthenia but also to think through a treatment for what ails a sick society.

In her autobiography, Gilman explains that what finally drove her to write *Women and Economics* was “years of thinking, with the progressively illuminating effort of teaching others as far as I could develop the theme” of women’s work and economic independence (235). Feeling invigorated by her decision to write, Gilman explains, in her autobiography, that she wrote 1700 words the first day, 2400 the second day, 3600 the third day, and 4000 the fourth day. (235). While this seems like a large amount of work, Gilman explains that, “The amounts were not great, three thousand words in three hours is my usual output when well” (235). And, Gilman was “well” when she was composing this first book. In fact, she wrote the first draft “in seventeen days, in five different houses,” in the midst of visiting family and friends (237). The total time it took to write and revise her text was “fifty-eight days—just inside of two months” (240).

When it was published, *Women and Economics* was considered one of the most important feminist texts of its day because of its thoughtful exploration of the Woman Question.<sup>34</sup> As Cynthia J. Davis points out, “Her thoughts on women’s rights and wrongs were seen as visionary, providing the necessary answers to the day’s burning questions, chief among them questions of gender” (243). Unlike other feminist reformers, interested in “questions of gender,” Gilman did not view women’s suffrage as her primary cause; she thought the answer to the woman question was in women’s economic independence. As she points out in her autobiography, “Women whose industrial position is that of a house-servant, or who do not work at all, who are fed, clothed, and given pocket-money by men, do not reach freedom and equality by the use of the ballot” (235).

Recent criticism of *Women and Economics* has focused primarily on Gilman’s engagement with the rhetoric of social Darwinism. For example, scholars Minna Doskow, Lois N. Manger, and, most recently, Jennifer Hudak all argue that Gilman embraced evolutionary

---

<sup>34</sup> The Woman Question was a term used to refer to the cultural debates about women’s rights, including suffrage, reproductive rights, property rights, and, of course, marriage, that were taking place in the late nineteenth century.

rhetoric, as it was handed down by Herbert Spencer, Charles Darwin, and manipulated by Lester Ward, as means of “providing the scientific rationale for women’s emancipation” (Doskow 2). Another strand of criticism on *Women and Economics*, that of Joanne B. Karpinski and Cynthia J. Davis, has sought to expose the contradictions inherent in Gilman’s theory and praxis, specifically with regards to her own economic (in)dependence. For example, Karpinski argues that Gilman’s theory of women’s economic independence was at odds with her own economic dependence on others for the majority of her life. Davis argues that Gilman’s theory of women’s economic independence, which she thought depended on women’s freedom from domestic constraints, was at odds with her own personal life, in which she was falling in love and contemplating her second marriage.<sup>35</sup>

In her text, Gilman explores the problem inherent in labor relations in American society. She initiates this theme in the beginning of her text by drawing attention to women’s lack of economic progress when she explains: “The labor now performed by the women could be performed by the men, requiring only the setting back of many advanced workers into earlier forms of industry; but the labor now performed by the men could not be performed by the women, without generations of effort and adaptation” (5). In other words, because women have been constrained and/or restrained to the private sphere of the home and “earlier forms of industry,” they are now unable to engage in the more “advanced” occupations of the public sphere. This bifurcation of gender roles has created a situation in which women consume and men produce.

Beard’s neurasthenic rhetoric stressed a bodily economy that served to place restrictions on the roles women could play in the market economy. This idea was that women were best suited for tasks associated with domesticity. Certainly, Beard and other doctors discouraged women’s higher education. For example, the guidelines for the “rest cure” mandated that women stick to domestic duties—as is evidenced by Mitchell’s recommendation that Gilman spend as much time as possible with her daughter and never write, draw or paint again. Throughout *Women and Economics*, however, Gilman challenges this male medical model of womanhood. Specifically, she uses Beard’s neurasthenic rhetoric to point to what she views as a major

---

<sup>35</sup> Gilman did marry for a second time, and eventually had to come to terms with how to be both “woman” and “worker” (Davis 248).

misconception about the causes of and treatments for women's nervousness. She theorizes that activity and work in the public sphere is not only acceptable but also imperative for women, who were bored, frustrated, and becoming increasingly nervous because of the paradox of a traditional hierarchy of gender roles in a Progressive Era of rapid growth and development.

In her text, Gilman reflects Beard's metaphor of economic balance in its attention to the "economic value" of domestic labor (7). For example, in the same way that James attempts to estimate her "worth" in her diary, Gilman seeks to estimate the value of women's domestic work in *Women and Economics*. As Gilman argues, "The labor of women in the house, certainly, enables men to produce more wealth than they otherwise could; and in this way women are economic factors in society" (7). Though the notion that women's domestic work contributes to the economy may seem obvious to twenty-first century readers of her text, it was revolutionary at the time it was written. In many ways, Gilman's 1898 statements regarding the essential role of women's domestic labor in the capitalist marketplace anticipate late twentieth-century feminist theorizing on the subject of women and the economy.<sup>36</sup>

One of the major problems Gilman sees with women serving in primarily domestic roles is that this work is unpaid, undervalued, supports and reinforces a system in which it is nearly impossible for women to gain economic independence. As she points out, while women's "labor in the household has a genuine economic value" because it enables men to produce more wealth, "the labor which the wife performs in the household is given as part of her functional duty, not as employment" (7). However, Gilman does not suggest that wives and/or mothers ought to be paid for their work in the home, as that "would be unspeakably degrading" (9). Even if payment were an option, the capitalist system would remain intact, and she is convinced that there is a great need for change, for the benefit of individual women and for the sake of the larger society.

In both "The Yellow Wallpaper" and *Women and Economics*, Gilman constructs women's domestic confinement as the primary cause of women's nervousness. In both texts, she conveys an image of women imprisoned in their homes and the negative effects this has on their minds and bodies. While in "The Yellow Wallpaper," she dramatizes the dangers of being confined to a domestic role, in *Women and Economics*, she directly discusses the idea that

women's domestic confinement as a result of limiting women's intellectual growth and restricting women's movement. In her words:

Her restricted impression, her confinement to the four walls of the home, have done great execution, of course, in limiting her ideas, her information, her thought-processes, and power of judgment; and in giving a disproportionate prominence and intensity to the few things she knows about; but this is innocent in action compared with her restricted expression, the denial of freedom to act (34).

Instead of being able to use their bodily energy for their own particular purposes—for example, to learn or to create—women have been forced to “work with her own hands, in direct body-service to her own family,—this has been permitted, yes compelled. But to be and do anything further from this she has been forbidden. Her labor has not only been limited in kind, but in degree” (34). Here, Gilman emphasizes the extent to which women have been held captive by their domestic roles. In the next paragraph, she elaborates further on this problem and explains what she means when she says that women have given “a disproportionate prominence and intensity to the few things she knows.” She says that one effect of confinement “has been to intensify the sensations and emotions of women, and to develop great activity in the lines allowed. The nervous energy that up to present memory has impelled women to labor incessantly at something, be it the veriest folly of fancy work, is one mark of this effect” (35). According to Beard's rhetoric of neurasthenia, women were more sensitive and emotional than men, which made them more susceptible to developing symptoms of nervousness. Since they already had less stores of “nervous energy” than men, any wasteful expenditure could easily result in “nervous bankruptcy.”

As I point out in Chapter One, Beard borrowed not only from the language of economics to undergird his theories about American nervousness but also from language of modern technology, i.e. the battery:

Men, like batteries, need a reserve force, and men, like batteries, need to be measured by the amount of this reserve, and not by what they are compelled to expend in ordinary life...Hence we see that neurasthenics who can pursue without any special difficulty the callings of their lives, even though these callings require great and prolonged

activity...are prostrated at once when they are called upon to do something outside of their line, where their force must travel by paths that have never been opened and in which the obstructions are numerous and can only be overcome by the energy they can supply (11-12).

This kind of thinking was used to discourage women's intellectual/non-domestic work. Gilman challenges this understanding of bodily energy in her text. She does not seek to fundamentally change but to rearrange medical conceptions of women's "nervous energy." And, she incorporates this battery metaphor into her work. She writes, "Human development thus far has proceeded in the male line, under the force of male energy...and by the vast storage battery of female energy suppressed" (67). Her use of the battery metaphor challenges the Beardian formulation because his assumption is that women have less "reserve force" than men, and her argument is that "the vast storage battery of female energy" remains an essentially untapped resource. And, she also argues that women's storage of repressed energy is being used by men and that his development has proceeded on it. Like Alice James, who refers to herself as "bottled lightning" in her diary, Gilman uses a metaphor of trapped energy and recognizes women's need to unleash it; she feels this can be accomplished through opportunities for intellectual/non-domestic work such as writing, painting, drawing, creating, making, and/or doing.

Gilman continues to develop these ideas in her discussion of marriage. In her text, she understands marriage as an economic relationship: "He is the demand, the market. She is the supply" (43). Furthermore, Gilman argues that the marriage market, which has created a "society full of desperate and eager husband hunters," is just as cutthroat as any other business (44). Though this was the case, traditional codes of femininity dictated that, "She must not even look as if she wanted it! She must sit passive as the seasons go by, and her chances lessen with each year. Think of the strain on a highly sensitive nervous organism to have so much to hand on one thing, to see the possibility of attaining it grow less and less yearly, and to be forbidden to take any step toward securing it!" (44). In this instance, Gilman uses neurasthenic rhetoric to construct a view of a woman as a "highly sensitive nervous organism" in order to argue against her reliance on marriage as a means of attaining economic security. Her use of this economic rhetoric allows her to create sympathy for a woman's plight in the highly competitive marriage market. At first glance, it appears as though she undermines her own argument by implying that

a woman would be unable to withstand the “strain” of the (marriage) market because she is too “sensitive” and/or “nervous.” However, Gilman also suggests that if a woman could play a more active (rather than passive) role in human and therefore economic relationships, she would have a better chance of “securing” economic independence and she would be less likely to become neurasthenic.

Gilman directly references neurasthenia only one time, in *Women and Economics*, when she writes: “It may be suggested, in passing, that one of the causes of ‘Americanitis’ is this increasing nervous strain in family relation, acting especially upon woman. As she becomes more individualized, she suffers more from the primitive and undifferentiated conditions of the family life of earlier times” (77). Here, Gilman relies on the discourse of neurasthenia, in particular, the term “Americanitis,” which was used primarily by doctors in European countries to describe the phenomenon of nervous illness in America. Annie Payson Call, author of the self-help book *Power Through Repose* (1900), explains that “a German physician coming to this country to practise became puzzled by the variety of nervous disorders he was called upon to help, and finally announced his discovery of a new disease which he chose to call ‘Americanitis’” (13).

As in her discussion of the marriage market, Gilman emphasizes the “strain” on women, who are re-strained or con-strained by traditional ideologies of feminine domesticity in an age of modernism and progressivism. That “Americanitis” was especially prominent in women was, according to Gilman, due to the “increasing specialization” of women’s work. Whereas women were once responsible for the duties of “cook-nurse-laundress-chambermaid-housekeeper-waitress-governess,” they were now “able to be one of these things perfectly.” Thus, Gilman concludes, “To the delicately differentiated modern brain the jar and shock of changing from trade to trade a dozen times a day is a distinct injury, a waste of nervous force” (77). Therefore, she calls for “more organized methods of work” that would reduce the “pain and strain” of these unnecessary labors (77-8). Since women are able to specialize and perfect one trade, they were no longer suited to domestic work, which required them to switch tasks and roles throughout the day. Thus, it is a “strain” on women to have to play these various roles when their duties could be elevated and organized, like the other necessary labors of modern life” (78). Here Gilman does not provide a critique of the increasingly specialized labor market, so much as an argument

for elevating and organizing women's work along the lines of men's work. Gilman is not interested, in this text, in critiquing capitalism but instead in suggesting that women ought to be allowed to play greater roles in the marketplace, which she felt would help them overcome their nervousness. Gilman's position was close to that of liberal feminism, which seeks not to change the system but to seek equality for women in it.

Again, Gilman differentiates between the domestic duties of wife and mother that made the narrator of "The Yellow Wallpaper" nervous and more productive forms of work and argues that domestic (unpaid) work is a waste of nervous energy while productive (paid) work is a useful reinvestment. In fact, Gilman theorized a new way of viewing work not only as a means to earn money but also "for the sake of personal expression" (78). She explains:

Those who object to women's working on the ground that they should not compete with men or be forced to struggle for existence look only at work as a means of earning money. They should remember that human labor is an exercise of faculty, without which we should cease to be human; that to do and to make not only gives deep pleasure, but is indispensable to healthy growth. Few girls to-day fail to manifest some signs of this desire for individual expression...To carve wood, to hammer brass, to do 'art dressmaking,' to raise mushrooms in the cellar—our girls are all wanting to do something individually (78).

Work, then, becomes a means for gaining economic independence, for expressing oneself, and for maintaining a healthy life.

## **The Home**

Published about a decade after "The Yellow Wallpaper," and five years after *Women and Economics*, in 1903, *The Home: Its Work and Influence* takes on the subject of women's illness and work once again. In this text, Gilman uses the discourse of neurasthenia to argue that women's domestic work is a wasteful expenditure of "nerve-force" and a cause of neurasthenia. For example, she explains that, "In most cases the business of running a home is a source of constant friction and nervous as well as financial waste" (73). Thus, she sees women's domestic work not only as a drain on individual women but also on the larger American economy. It is a drain on the larger American economy because a woman's ability to earn an income—to reinvest

her nervous energy and create capital—was oftentimes wasted in the kitchen. Gilman’s argument, then, is that women’s work in the public sphere might serve to reverse this backward looking trend and return both individual women and the larger American society to a more progressive and healthy state.

In her text, Gilman presents an interesting challenge to Beard’s notion that neurasthenia was the result of cultural change. Specifically, she recognizes that while people have come to understand and accept the many cultural changes that have taken place, ideas about the home have remained the same. In her words: “In all this long period of progress the moving world has carried with it the unmoving home; the man free, the woman confined; the man specialising in a thousand industries, the woman still limited to her domestic functions. We have constantly believed that this was the true way to live, the natural way, the only way. Whatever else might change—and all things did—the home must not. So sure were we, and we are yet, of this, that we have utterly refused to admit that the home has changed, has grown, has improved, in spite of our unshaken convictions and unbending opposition” (6). In Gilman’s formulation, then, the problem is not that the culture has changed and continues to undergo change, it is that there is so much pressure for women to remain the same despite new opportunities and evidence that it is time for them to change as well. Of course, Gilman locates what she considers a rather problematic contradiction in the space of the home. In fact, she explains that this space has been given a status so much above social consideration that those studying the “social factors affecting disease” have continued to believe, in spite of mounting evidence, that the home “was perfect and quite above suspicion” (8). For Gilman, the status of the home and of women relegated to the business of the home is cause for concern. She is suspicious of the home as a potential site of “disease” and convinced that there is a desperate need for domestic reform.

Furthermore, Gilman expresses her belief that “two main errors in the right adjustment of the home to our present life” have occurred, including “the maintenance of primitive industries in a modern industrial community, and the confinement of women to those industries and their limited area of expression” (10). She believes, then, that the lack of progression in the home has served to limit and constrain both individual women as well as the larger American society. But, she is not interested in a complete ideological overhaul. Instead, she is interested in instituting

some small adjustments that would restore the home to its original purpose, which is to aid in the love and growth of the family:

Home and its beauty, home and its comfort, home and its refreshment to tired nerves, its inspiration to worn hearts, this is in no danger of loss or change; but the home which is so far from beautiful, so wearing to the nerves and dulling to the heart, the home life that means care and labour and disappointment, the quiet, unnoticed whirlpool that sucks down youth and beauty and enthusiasm, man's long labour and woman's longer love—this we may gladly change and safely lose (12).

I quote Gilman at length here to draw attention to her insistence on always connecting what she suggests are the problems of the home with the notion of neurasthenia. In this case, whereas the home might have served as the place for the restoration of “tired nerves,” or the rebuilding of nerve-force, it has instead become “wearing to the nerves and dulling to the heart.”

### **“The ‘Nervous Breakdown’ of Women”**

In “The ‘Nervous Breakdown’ of Women” (1916), Gilman reiterates the argument she makes in *Women and Economics*, only this time she challenges the rhetoric of neurasthenia and dominant ideology much more directly. She begins her essay by pressuring ideas about why women experience “nervous breakdown.” She explains that if a woman is in business, business is to blame for her nervousness. If she works in the home, ‘outside interests’ are the cause. If she is in school, ‘overstudy’ is the culprit. But, as she points out, many women who were not in business or in school were diagnosed with neurasthenia. These women, Gilman argues, cannot be accounted for by the rhetoric of neurasthenia. Like Addams, then, Gilman challenged the dominant medical perspective that only women (and men) of the upper classes and “brain-workers” were susceptible to neurasthenia. She thought people developed neurasthenia because American thought could not keep up with American life. In her words,

With our moral advance, with our educational advance, with our economic advance, we are quite capable of living and functioning contentedly in a world of peace, plenty, beauty and happiness... Yet because our dominant ideas have not kept up with the facts of life... we are twentieth century people living in an artificially preserved environment

many centuries out of date. Our life does not fit us—that is the main cause of our “nervous diseases” (70).

Like Addams, Gilman believed that people developed neurasthenia because of social maladjustment. While she echoes Beard’s idea that Americans were becoming increasingly nervous because of the rapid changes taking place in American society, she also extends his idea by implying that the changing American society was only problematic because of the stagnant American ideology, especially with regard to women’s roles. She reiterates and extends her ideas later in her essay:

All this strain of rapidly improving life against slowly improving conditions, wears heavily upon the nerve force of the race. We need a different environment, and we shall never come into smooth, peaceful, richly productive life until we have it...In this vexing period of ours, while the great wheel of social change rolls on, the special changes in the woman’s dual position roll even faster, and the wonder is not that so many women break down, but so few (70-71).

As Gilman points out, this period in American history “vexing” to those unused to so many changes taking place in such a short period of time. Indeed, it was particularly vexing to women like Gilman who were interested in extending their social roles, but who were relegated to “feminine functions and domestic industry” (71). In this article, as in her other work, Gilman pressures the dominant ideology of the time with regards to women’s roles and women’s work. She suggests that the problem lies not with individual women, diagnosed and treated for neurasthenia, but with society, unwilling to imagine new roles for women in what was essentially a new America. Here, as elsewhere, Gilman suggests that women’s wellbeing depends on an ideological shift rather than women’s abilities to withstand cultural forces.

Perhaps most interestingly, Gilman makes the distinction, in *The Home* between domestic and intellectual work. She writes: “No normal human mind can find full exercise in dusting the parlour and arranging flowers’ nor in twelve hours of nerve-exhaustion in the kitchen. Exhaustion is not exercise” (26). Like Jane Addams, Gilman is concerned with putting knowledge to work. She explains: “Minds are not vats to be filled eternally with more and more supplies. It is use, large, free, sufficient use that the mind requires, not mere information” (261).

In “The Yellow Wallpaper, *Women and Economics*, *The Home: Its Work and Influence*, and “The ‘Nervous Breakdown’ of Women” Gilman agitates for domestic reform in order to relieve the epidemic of neurasthenia among women. In her essay “Kitchenless Houses and Homes: Charlotte Perkins Gilman and the Reform of Architectural Space,” Yvonne Gaudelious argues that Gilman was one of many feminists who “raised fundamental questions about what was called the private, or woman’s, sphere and the relationship of the private sphere to the constructed architectural spaces that supported and helped create private and public spheres” (111). Like other feminists at this historical time, Gilman understood the necessity of freeing women from the private sphere, from domestic constraints, in order to provide them with opportunities to enter into the public sphere. This was important to Gilman, in particular, because she was always trying to negotiate the work required to both maintain a home and to support herself and her young daughter. Perhaps more importantly, Gilman was also trying to negotiate being diagnosed with an illness that she thought might be a result of the burden of her domestic responsibilities. Thus, she had a vested interest in aiding in the feminist cause of fighting for women’s rights to pursue careers outside of the home.

### **Neurasthenia as a Rhetoric of Disability**

In her autobiography, Gilman characterizes her nervous illness as a disability. In so doing, she acknowledges, if not embraces, her status as a disabled woman. However, she also subscribes to popular anti-disability arguments of the time, which sought to equate disability with non-productivity, and she views her own disability as an obstruction to her productivity as a writer. In the following section, I analyze how Gilman uses the rhetoric of neurasthenia to characterize her disability. I suggest the historical reasons why claiming a disabled identity posed a problem for Gilman. Finally, I connect the rhetoric of neurasthenia to turn-of-the-century attitudes toward disability.

In the opening paragraph to her chapter entitled “The Breakdown,” Gilman explains that,

In those days a new disease had dawned on the horizon. It was called ‘nervous prostration.’ No one knew much about it, and there were many who openly scoffed, saying it was only a new name for laziness. To be recognizably ill one must be confined to one’s bed, and preferably in pain... This disorder involved a growing melancholia, and

that, as those know who have tasted it, consists of every painful mental sensation...a steady brain-ache that fills the conscious mind with crowding images of distress (90).

Though her doctors confirmed that her illness was not physical and could find “nothing the matter,” Gilman explains that the mental pain she experienced caused much physical weakness. She writes, “I, the ceaselessly industrious, could do no work of any kind. I was so weak that the knife and fork sank from my hands—too tired to eat. I could not read nor write nor paint nor sew nor talk nor listen to talking, nor anything. I lay on the lounge and wept all day” (91). Gilman was not used to feeling weak and had not experienced much physical pain in her life “besides dentistry and one sore finger,” and “having the baby,” but, she explains, she “would rather have had a baby every week than suffer as it suffer in my mind. A constant dragging weariness miles below zero. Absolute incapacity. Absolute misery. To the spirit it was as if one were an armless, legless, voiceless cripple” (91). Her metaphors of disability stand for utter abjection.

In her autobiography, Gilman explains that the mental and physical weakness that she experienced during the time of her “nervous breakdown” stayed with her throughout her life, and, in this way, she characterizes her neurasthenia in terms of a chronic illness. Even though she feels as though she has recovered somewhat from her “condition” over the course of the forty years in between her “breakdown” and writing her autobiography, she admits that “the effects of nerve bankruptcy remain to this day,” and she attributes her “failures, of misplay and misunderstanding and ‘queerness’...to this lasting weakness” (97). The “feeble-mindedness” that she describes, she asserts, often made reading difficult, if not impossible. As she points out, “After the debacle I could read nothing—instant exhaustion preventing” (99). She calls attention to this particular symptom throughout her autobiography, perhaps as means to situate it as a significant, if not the most significant, aspect of her “living.” In a moment reminiscent of a line in Alice James’s diary, in which she recalls having “towed my stomach and heart back into harbor, they having broken loose, under the impression they were to have a day to themselves,” Gilman remarks that on “the incessant effort to drag that shaky mind back to its task, to cheer it, stimulate it, comfort it, through self-suggestion to make it go” (166).

The difficulty in all of this, Gilman explains, was that she descended so quickly from strength to weakness:

To step so suddenly from proud strength to contemptible feebleness, from cheerful stoicism to a whimpering avoidance of any strain or irritation for fear of the collapse ensuing, is not pleasant, at twenty-four. To spend forty years and more in the patient effort of learning how to carry such infirmity so as to accomplish something in spite of it is a wearing process, full of mortification and deprivation (100).

Though Gilman was deeply concerned with how to make a “living,” given the fact that she was often in financial dire straights, she also uses the word “living” to refer to her lifelong, chronic illness. She explains, “I try to describe this long limitation, hoping that with such power as is now mine, and such use of language as is within that power, this will convince any one who cares about it that this “Living” of mine had been done under a heavy handicap...” (104). In another instance, later in her text, Gilman provides another way to understand the term “living,” also connected to her chronic illness. She writes:

The difference is great between one’s outside ‘life,’ the things which happen to one, incidents, pains and pleasures, and one’s ‘living.’ Outside, here was a woman undergoing many hardships and losses, and particularly handicapped by the mental weakness which shut down on her again, utter prostration and misery. But inside her was a conscious humanity, immensely beyond self; a realization of the practical immortality of that ceaseless human life of ours, of its prodigious power, its endless growth (181).

In this instance, Gilman characterizes her “living” as her internal experience of the world, so that her “handicap,” while a disabling aspect of her life, does not define or dictate her inner-life. In fact, in this case, Gilman consciously separates her experiences from her beliefs, in some ways, her body from her soul.

Another major difficulty that Gilman’s chronic illness presented was that it served to limit her work. In “The Yellow Wallpaper,” and “Why I Wrote *The Yellow Wallpaper?*”, Gilman casts her diagnosis of neurasthenia as both an impediment to and a reason for her writing/work. In “The Yellow Wallpaper,” she focuses specifically on her writing and articulates, in a number of ways, her belief that writing is a means to recovery. In “Why I Wrote *The Yellow Wallpaper?*” Gilman explains that “using the remnants of intelligence that remained, and helped by a wise friend, I cast the noted specialist’s advice to the winds and went to work again—work, the

normal life of every human being; work, in which is joy and growth and service, without which one is a pauper and a parasite; ultimately recovering some measure of power” (349). And, she calls attention to this problem throughout her autobiography. Of course, during her breakdown, she is unable to read or write. And, the “rest cure” dictated that she live a domestic rather than intellectual life. However, even after her acute “breakdown,” she feels as though her output of work has been limited by her chronic nervous illness. Quoting from her diary, she explains that, “I can do more work if I suffer less” (144).

In many ways, her autobiography reads as a kind of apology for not being more productive because Gilman was clearly convinced that she could have been even more productive than she was had she not been ill. Her emphasis on industrial “productivity” of the individual could also be read against the rise at this point of time in business’s view of disability as a drag on productivity; a certain kind of disability as produced by capitalism (not only worker injury but also in being seen as the excluded other of productive labor). In his discussion of Charlotte Perkins Gilman and Edith Wharton, Tom Lutz argues that both women end up championing capitalism and the idea that when women could belong to the capitalist marketplace, neurasthenia would disappear. Referring to Gilman’s *Women and Economics*, Lutz explains: “In outlining the relationship between women, work, and ill health, Gilman validated her own decision to write, validated women’s intellectual labor in general, and helped, finally, to invalidate neurasthenia as role option” (231). In other words, Gilman argued that women’s work in the home and the exhaustion that ensued as a result was a waste of one’s energy and resources while women’s work outside the home was a more useful spending of one’s energy and resources. Referring to Wharton’s *The House of Mirth*, Lutz argues that Wharton outlines the problem of neurasthenia as individual (sexual and economic) wastefulness, not a result of “oppressive socioeconomic structures” (237). Lily, Wharton’s protagonist, is more susceptible to neurasthenia because she is upper class, but because she is upper class she has no skills. Both Wharton and Gilman argue, then, that social class status relegates women to the home, leaves them with little training and forces them into underproduction. And, both argued that women would be better off if they could contribute productively in the capitalist marketplace. While they didn’t challenge the central tenants of capitalism, they did challenge the central tenants of neurasthenic rhetoric, which viewed all women’s work as dangerous to their health.

Viewing disability as an impediment to productivity was a common trope of the turn of the last century in America. For example, women on both sides of the suffrage issue used anti-disability rhetoric to support their opposing claims. In her essay “Some Scientific Aspects of the Woman Suffrage Question,” (1901) Mary K. Sedgwick uses anti-disability rhetoric to present an anti-suffragist argument. Sedgwick explains that, “woman suffrage would retard human progress...that it would bring new burdens upon woman just as she is outgrowing her former disabilities and enjoying new opportunities congenial to her nature (333). In combining evolutionary and anti-disability rhetoric, Sedgwick is able to make an argument for women’s domesticity on “scientific” grounds. Later in her essay, Sedgwick argues that women are not being unfairly discriminated against in the workplace but that they “are constantly handicapped by their peculiar physical limitations, a point which most suffragists ignore” (333). Here, Sedgwick deploys anti-disability rhetoric in order to perpetuate the myth of women as the “weaker sex.” She capitalizes on this dominant cultural assumption in order to make the case that woman’s suffrage would endanger both individual women and the “body politic.” Throughout her essay, she warns of the possibility of women becoming nervously exhausted by attempting to do work not suited to their “sex fitness.” Again, she combines evolutionary and anti-disability rhetoric to make a case for not allowing women to become involved in public matters.

In her essay, “‘It Is For The Mother’: Feminists’ Rhetorics of Disability During the American Eugenics Period,” Sharon Lamp provides a highly critical reading of Gilman’s use of eugenic rhetoric to support her argument for women’s economic independence. Lamp’s concern is that influential feminist writers of the late nineteenth and early twentieth centuries such as Charlotte Perkins Gilman and Margaret Sanger “placed their feminist agenda in the eugenic mainstream, exploiting people with disabilities” (Lamp 2). This has had the effect, Lamp argues, of bifurcating the feminist and disability movements of the late twentieth century because feminists wanted to distance themselves from cultural assumptions about their inherent feebleness of body and of mind. While Lamp is not the first, nor probably the last, of feminist critics to point to the problematic nature of Gilman’s reliance on eugenicist beliefs, it is important to remember the cultural context in which Gilman and her work is situated and produced. In her article “Charlotte Perkins Gilman and the Rights of Women: Her Legacy for the 1990’s,” Ann J. Lane points out that “Gilman’s major flaws are easy to identify and even easy to explain and to understand, if not to justify” (6). And, Lane argues that although Gilman’s flaws

are easy to acknowledge, so, I believe are her strengths, and there are more of them” (7). Although Lamp is right when she points out that Gilman failed to “find disability pride and emerge as a strong, proud, disabled woman,” she lived during a time when doing so was nearly impossible (6).

In her essay, Lamp provides the cultural/historical context, which would have made claiming disability extremely difficult. Activists on both sides of the women’s suffrage debate relied on evolutionary and eugenic theories and used this pseudo-scientific rhetoric to argue either “that women who exerted mental energy, stepped outside of the domestic sphere, or protested women’s oppression were, by those activities, manifesting deviance; a sign of defect” or “that there was a category of hopelessly, inherently dependent defectives that should be subjected by social control, but they [suffragists] argued against women being included in this defective class by virtue of their sex” (2). In her 1872 essay “Biology and Woman’s Rights” anti-suffragist Ruth Bleier exemplifies Lamp’s argument about the anti-suffrage view of suffragists as defective when she writes: “The *savante*—the woman of science—like the female athlete, is simply an anomaly, an exceptional being, holding a position more or less intermediate between the two sexes. In one case the brain, as in the other the muscular system, has undergone an abnormal development” (205).

Lamp argues rightly that Gilman uses eugenic rhetoric in *Women and Economics* and *Herland* to argue for women’s equal rights and economic independence and emancipation from men. However, Lamp fails to account for Gilman’s autobiographical acknowledgement and analysis of the personal and political implications of her disabling condition in both “The Yellow Wallpaper” and *The Living of Charlotte Perkins Gilman*. While “The Yellow Wallpaper” provides a fictionalized account of her nervous debility, *The Living of Charlotte Perkins Gilman* provides a testimony to the Gilman’s lived reality of being diagnosed with and treated for neurasthenia. In “Why I Wrote ‘The Yellow Wallpaper,’” Gilman directly connects her personal experience with the more public experience of other women who may have received similar diagnoses and treatments. She engages with the male medical community and warns of the dangers of blindly submitting to a “cure” that, in her experience, is worse than the “disease.” In *The Living of Charlotte Perkins Gilman*, she extends her analysis of the role that being disabled

has played in both her life and work. Perhaps part of the goal of writing the autobiography was to cultivate an identity that would validate her as a disabled woman.

Gilman, like Jane Addams, believed that work rather than rest could help to cure nervousness once and for all. However, whereas Addams believes that women, overeducated, bored and nervous, should undertake hands-on/manual/domestic labor in order to put their knowledge to work, Gilman finds this kind of traditional work to be a cause of rather than a cure for women's nervousness. While Addams, perhaps influenced by William James, looked to American pragmatism as an answer to her questions about women's nervousness, Gilman, influenced by the women's club movement, constructed an argument grounded in early feminist thought about women's economic independence as the means to women's health. Both women, however, sought societal change through writing and public speaking and various reform movements. Both were concerned not only with women's health but societal health.

Addams and Gilman had different views on the importance of the home and women's domestic labor. While Addams believed that the home was central to woman's experience, Gilman believed that the home served to limit woman's sphere of influence. In *Twenty Years at Hull-House*, Addams positions the home as the center of woman's activity and characterizes Hull-House as a kind of "home base" for many of the social reform efforts she and the other woman residents initiated. As Francesca Sawaya points out, "The house is a 'settlement,' an oasis of civilization in the middle of a territory not yet reached by civilization, but it is also a nostalgic escape from modern civilization, a return to the labor of one's mother, grandmother, and great-grandmother" (Sawaya 24). In many respects, this view of the settlement house as home both reinforces and challenges women's typical roles at this time. As a space for women's activism and collective living, it represents a challenge to traditional gender roles. But, Addams's emphasis on "the labor of one's mother, grandmother, and great-mother" serves to reinforce the ideology of women's domesticity. Unlike Addams, Gilman viewed the home as a representation of women's limited sphere of social, political, and economic influence. In fact, at the same time that Addams settled into her settlement house, Gilman began to lead the life of a vagabond and did not have a permanent home for another five years. And, of course, Gilman makes it quite clear in much of her writing, that she saw the home not as an appropriate venue for women's work but as a confining and limiting space in which creativity was necessarily stifled by the

routine of domestic labor. In some ways, Gilman's views on domestic labor and the home present a challenge to the capitalist system that sought to ensure that women would remain in the home. Gilman did not see home as a "home base." Instead, she sought to transplant women's work to public places for social purposes.

Gilman is like Addams and James in the sense that she accepted many of the basic tenets of neurasthenia, characterized her illness as neurasthenia and used neurasthenic themes and tropes in her work. However, Gilman differs from them in some important respects, namely that she writes directly about her illness, calls it neurasthenia on many occasions, is openly critical of the "rest cure" and makes an explicit connection between "having" neurasthenia "being" disabled. She also adapts neurasthenic rhetoric to her own uses in order to argue for a renewed sense of women's work in the public sphere. However, Gilman is not opposed to capitalism (not anti-modern) but instead sees it as contributing to the changing of older socio-economic relations so it can free women, open up opportunities for their paid labor outside the home, etc. She rejects the older idea of women as physically disabled, weaker, unfit for work. This stance means that she doesn't question the dominant, capitalist view of the disabled as non-productive—in other words that she accepts capitalism's construction of the disabled as abnormal, other, unfit—but argues that women are not disabled. This puts her in a conflicted relation to her own disability. By accepting that she "has" neurasthenia, she can use the rhetoric of neurasthenia to argue against its message—instead of rest, that work is indeed good for a woman. But by believing in the capitalist view of productive labor, she has no sympathy with disability itself.

## Bibliography

- Addams, Jane. *Democracy and Social Ethics*. New York: The MacMillan Company, 1902. Print.
- . *The Spirit of Youth and the City Streets*. New York: The MacMillan Company, 1909. Print.
- . *Twenty Years at Hull-House, with Autobiographical Notes*. 1910. New York: Penguin Putnam Inc., 1961. Print.
- Anderson, Linda. "Alice James: 'The subject is all that counts'" *Women and Autobiography in the 20<sup>th</sup> Century: Remembered Futures*. London and New York: Prentice Hall and Harvester Wheatsheaf, 1997. Print.
- Bauer, Dale M. *The Yellow Wallpaper: Charlotte Perkins Gilman*. Boston: Bedford/St. Martin's, 1998. Print.
- Beard, George Miller. *American Nervousness: It's Causes and It's Consequences*. 1881. New York: Arno Press, 1972. Print.
- Bleier, Ruth. *Science and Gender: A Critique of Biology and Its Theories on Women*. New York: Pergamon Press, 1984. Print.
- Bronfren, Elisabeth. "Case Study. Henry's Sister—Alice James (1848-92)." *Over Her Dead Body: Death, Femininity, and the Aesthetic*. New York: Routledge, 1992. Print.
- Brown, Victoria Bissell. *The Education of Jane Addams*. Pennsylvania: University of Pennsylvania Press, 2004.
- Burr, Anna Robeson. *Alice James, Her Brothers--Her Journal*. New York: Dodd, Mead, 1934. Print.
- Call, Annie Payson. *Power Through Respose*. Boston: Little, Brown, and Company, 1900. Print.

- Couser, G. Thomas. *Recovering Bodies: Illness, Disability, and Life Writing*. Madison: University of Wisconsin Press, 1997. Print.
- Davis, Cynthia J. "Love and Economics: Charlotte Perkins Gilman on 'The Woman Question.'" *American Transcendental Quarterly*. 19. 4 (2005): 243-58. Print.
- Davis, Cynthia J. and Denise D. Knight. *Charlotte Perkins Gilman and Her Contemporaries*. Tuscaloosa: University of Alabama Press, 2004. Print.
- Davis, Lennard J. "Constructing Normalcy: The Bell Curve, the Novel, and the Invention of the Disabled Body in the Nineteenth Century." *The Disability Studies Reader*. New York: Routledge, 1997. Print.
- Diliberto, Gioia. *A Useful Woman: The Early Life of Jane Addams*. New York: Scribner, 1999. Print.
- Doskow, Minna. "Charlotte Perkins Gilman: The Female Face of Social Darwinism" *Weber: The Contemporary West*. 14. 3 (1997). Print.
- Dykstra, Natalie A. "'Trying to Idle': Work and Disability in *The Diary of Alice James*." *The New Disability History: American Perspectives*. Eds. Paul K. Longmore and Lauri Umanksi. New York: New York University Press, 2001. Print.
- Edelstein, Sari. "Charlotte Perkins Gilman and the Yellow Newspaper." *Legacy*. 24 (2007): 72-92. Print.
- Esch, Deborah. *In the Event: Reading Journalism, Reading Theory*. Stanford: Stanford University Press, 1999. Print.
- Gilman, Charlotte Gilman. *The Home: Its Work and Influence*. 1903. New York: The Carlton Company, 1910. Print.
- . *The Living of Charlotte Perkins Gilman: An Autobiography*. Madison, Wisconsin: The University of Wisconsin, 1935. Print.

- . "The Yellow Wallpaper." *The Yellow Wallpaper: Charlotte Perkins Gilman*. 1892. Ed. Dale M. Bauer. Boston, MA: Bedford/St. Martin Press, 1998. Print.
- . *Women and Economics: The Economic Factor Between Men and Women as a Factor in Social Evolution*. 1898. New York: Cosimo Classics, 2006. Print.
- . "Why I Wrote The Yellow Wallpaper?" *The Yellow Wallpaper: Charlotte Perkins Gilman*. Ed. Dale M. Bauer. Boston: Bedford/St. Martin Press, 1998. Print.
- Golden, Catherine J. and Joanna Schneider Zangrando. *The Mixed Legacy of Charlotte Perkins Gilman*. Newark: University of Delaware Press, 2000. Print.
- Gosling, F. G. *Before Freud: Neurasthenia and the American Medical Community, 1870-1910*. Illinois: University of Illinois Press, 1987. Print.
- Gould, Stephen Jay. *The Mismeasure of Man*. NY: W. W. Norton and Company, Inc. 1981. Print.
- Hamington, Maurice. *Embodied Care: Jane Addams, Maurice Merleau-Ponty, and Feminist Ethics*. Chicago: University of Chicago Press, 2004. Print.
- Hawkins, Anne Hunsaker. *Reconstructing Illness: Studies in Pathography*. Indiana: Purdue University Press, 1999. Print.
- Herndl, Diane Price. *Invalid Women: Figuring Feminine Illness in American Fiction and Culture, 1840-1940*. Chapel Hill, NC: The University of North Carolina Press, 1993. Print.
- Hill, Mary A. *Charlotte Perkins Gilman: The Making of a Radical Feminist*. Philadelphia: Temple University Press, 1980. Print.
- Hudak, Jennifer. "The 'Social Inventor': Charlotte Perkins Gilman and the (Re) Production of Perfection." *Women's Studies: An Interdisciplinary Journal*. 32 .4 (2003): 455-77. Print.
- James, Alice. *Alice James, Her Brothers--Her Journal*. Ed. Anna Robeson Burr. New York: Dodd, Mead, 1934. Print.

---. *The Diary of Alice James*. Ed. Leon Edel. New York: Dodd, Mead & Company, 1964. Print.

Joslin, Katherine. *Jane Addams, A Writer's Life*. Urbana and Chicago: University of Illinois Press, 2004. Print.

Karpinski, Joanne B. *Critical Essays on Charlotte Perkins Gilman*. New York: Macmillan International, 1992. Print.

Knight, Louise W. *Citizen: Jane Addams and the Struggle for Democracy*. Chicago and London: University of Chicago Press, 2005. Print.

Lanigan, Esther F. "Negative Mentorship in the Case of Alice James." *American Literary Mentors*. Eds. Irene C. Goldman-Price and Melissa McFarland Parnell. Gainesville: University of Florida Press, 1999. Print.

Lears, T. J. Jackson. "From Salvation to Self-Realization: Advertising and the Therapeutic Roots of Consumer Culture, 1880-1930." *The Culture of Consumption: Critical Essays in American History*. New York: Pantheon Books, 1983. Print.

Linton, Simi. *Claiming Disability: Knowledge and Identity*. New York: New York University Press, 1998. Print.

Lamp, Sharon. "'It Is for the Mother': Feminists' Rhetorics of Disability During the American Eugenics Period." *Disability Studies Quarterly*. 26. 4 (2007).

Lane, Ann J. *To Herland and Beyond: The Life and Works of Charlotte Perkins Gilman*. Virginia: University of Virginia, 1997. Print.

Lutz, Tom. *American Nervousness, 1903: An Anecdotal History*. Ithaca: University of Cornell Press, 1991. Print.

Magner, Lois N. "Darwinism and the Woman Question: The Evolving Views of Charlotte P Perkins Gilman." *Critical Essays on Charlotte Perkins Gilman*. Ed. Joanne B. Karpinski. New York: G. K. Hall & Co., 1992: 115-129. Print.

- Menand, Louis. *The Metaphysical Club*. Farrar, Straus and Giroux, 2001.
- Michaels, Walter Benn. *The Gold Standard and the Logic of Naturalism*. Berkeley: University of California Press, 1987. Print.
- Mitchell, Weir S. *Fat and Blood: And How to Make Them*. (1877) Philadelphia: J.B. Lippincott, 1907. Print.
- Meyering, Sheryl C. *Charlotte Perkins Gilman: The Woman and Her Work*. Ann Arbor: UMI Research Press, 1988. Print.
- Ratcliff, Krista. *Anglo-American Challenges to the Rhetorical Tradition: Virginia Woolf, Mary Daly*. Carbondale: University of Southern University Press, 1996. Print.
- Rudd, Jill and Val Gough. *Charlotte Perkins Gilman: Optimist Reformer*. Iowa City: University of Iowa Press, 1999. Print.
- Salazar, James. "Character's Conduct: The Democratic Habits of Jane Addams's 'Charitable Effort'" *Our Sister's Keepers: Nineteenth-Century Benevolence Literature by American Women*. Tuscaloosa: The University of Alabama Press, 2005. Print.
- Sawaya, Francesca. "The Authority of Experience: Jane Addams and Hull House." *Women's Experience of Modernity*, 1875. Eds. Leslie W. Lewis and Rita Felski. Baltimore: Johns Hopkins UP, 2002. Print.
- Scarry, Elaine. *The Body in Pain: The Making and Unmaking of the World*. New York and Oxford: Oxford University Press, 1985. Print.
- Sedgwick, Mary L. "Some scientific Aspects of The woman suffrage Question." *Gunton's Magazine*. 20 (1901): 333-44. Print.
- Siebers, Tobin. "Disability in Theory: From Social Constructionism to the New Realism of the Body." *The Disability Studies Reader*. New York: Routledge, 1997. Print.
- Showalter, Elaine. *The Female Malady: Women, Madness and English Culture, 1830-*

1980. New York: Penguin, 1987. Print.
- Smith-Rosenberg, Carroll. *Disorderly Conduct: Visions of Gender in Victorian America*. New York: Knopf, 1985. Print.
- Stoddard, Martha. "Working (With) the Rhetoric of Affliction: Autobiographical Narratives of Victorians with Physical Disabilities. *Embodied Rhetorics: Disability in Language and Culture*. Eds. James C. Wilson and Cynthia Lewiecki-Wilson. Illinois: Southern Illinois University Press, 2001
- Strouse, Jean. *Alice James, A Biography*. Boston: Houghton, Mifflin, 1980. Print.
- Trent, James W. *Inventing the Feeble Mind: A History of Mental Retardation in the United States*. Berkeley: University of California Press, 1994. Print.
- Unnamed Author. "Jane Addams: --- Hull House; Twenty Years' Social Service in Chicago and the Worker's Equipment for her Task:" *The New York Times*, 1911. Print.
- Yeazell, Ruth Bernard. *The Death and Letters of Alice James, Selected Correspondence*. Berkeley: University of California Press, 1981. Print.
- Wendell, Susan. *The Rejected Body: Feminist Philosophical Reflections on Disability*. Great Britain: Routledge, 1996. Print.