Revealing in an interview with Lucette Finas his understanding of the relation between power and politics, Michel Foucault indicated a fundamental assumption of his investigative technique: "Every relation of force implies at each moment a relation of power (which is in a sense its momentary expression) and every power relation makes a reference, as its effect but also as its condition of possibility, to a political field of which it forms a part." The fields, or contexts, with which these relations of power are associated include madness, illness, death, crime, and sexuality. This principle of equivalence, of paralleling the effects of relations of power within a series of disparate social contexts with those operating at the level of the state, has been appropriated by historicist critics of the late-phase fiction of Henry James (1843–1916) in the form of metonymic substitution to uncover relations of power and their associated origins. Just as Foucault applies to the state, to the family, and to overseeing a ship equally the terminology associated with "governing" or management practices, the signifiers demarcating the repressive practices of policing, surveillance, and regulation associated with the institutions of a state apparatus to ensure political, economic, and social stability can equally be applied, as Mark Seltzer argues, to a literary text. *The Golden Bowl* (1904), for example, is political insofar as its language operates rhe-
Historically, metonymically, as representing "movements of appropriation, supervision, and regulation" at the time of the novel's conception. Similarly, from the perspective of a gender-based political interpretation of the novel, the context of the nineteenth-century male-dominated medical profession can be invoked to sustain the claim that the language of the doctor-patient relationship as it is presented in the interviews between Sir Luke Strett and Milly Theale signifies a process whereby "love and care are conflated with power and masculine force."

The preeminent drawback of such a political criticism is its reductive treatment of context, negating the significance of the political influences of specific individuals on James's work. Unfortunately, despite the prodigious correspondence testifying to James's experience with a variety of medical professionals, there is little evidence that would enable us to connect Sir Luke, for example, to the physicians James knew, physicians who may have been active in political movements — for example, in attempting to repudiate women's pursuit of the suffrage. Consequently, the context that informs the novel remains either abstracted, in accordance with the Foucauldian historicist method, or personalized and depoliticized, in accordance with the perspective of biographical criticism.

Given that the relation between context and literary text as it concerns has largely been approached in accordance with the principles of interpretation that served as the focus of Mikhail Bakhtin's radical reconceptualizing of literary analysis in his "Discourse in the Novel," we should consider reconfiguring political interpretation along Bakhtinian lines. Bakhtin's alternative to the abstraction of context is to acknowledge the significance of the "individual utterance" that constitutes it. Signifiers are, for Bakhtin, associated with individuals spanning a variety of contexts who are simultaneously competing to appropriate language to serve their particular ends: "It [language, the signifier] is entangled, shot through with shared thoughts, points of view, alien value judgments and accents." Mapping power relations within texts becomes a process of linking such relations to potential origins, individuals, rather than connecting and confining the representative value of signifiers to monolithic institutions. Bakhtin's critique of biographical criticism includes his claim that authorial intentions are always refracted as a consequence of the social basis of language. Analyzing the novel from this Bakhtinian perspective liberates the critic from constructing political interpretations restricted by the boundaries of James's personal experience with his invalid sister, Alice James (1848–92), or his close friends. The context surrounding the work, including documents written by those with whom James had little or no affiliation — including, indeed, the very language out of which were constructed the documents written during the period of the novel's conception, the 1890s — may permeate the novel, regardless of the themes and ideas that James himself was concerned to present.

An unexplored medical context against which we can read the novel, one that supersedes the monologic conception of context referred to as the nineteenth-century male-dominated medical establishment, can be constructed, one that includes historical documents and medical treatises by British psychiatrists and female doctors that reveal an engagement with conceptions of the state during the debate over national efficiency — that is, the debate over how to perpetuate Britain's imperial ascendancy. Such a context allows us to see the dissolution of stable systems of signification in the novel, systems that in other contexts reveal, critics have argued, the extent to which women were repressed. The signifiers indicating practices of surveillance and regulation were, indeed, associated with the medical establishment but were manipulated to promote competing visions of the state, including contesting visions of women's role within it. Essays in Medical Sociology, for example, a 1902 collection that brought together work by Elizabeth Blackwell (1821–1910) originally published throughout the last quarter of the nineteenth century, endorses a series of tactics of surveillance aimed at controlling the conduct of young women in the context of family as part of the author's concern to create a chaste nation. Seeking to protect and champion the British race and state within a context of imperial com-
petition, however, Blackwell challenged the status quo conceptions of women’s role within the state as endorsed by Darwinian psychiatrists, those with whom she shared similar imperial priorities. Despite — indeed, as part of — her concern to regulate the conduct of women in ways that echo the anti-suffragette positions of Darwinian psychiatrists, she promoted female doctors as playing a central role in protecting the military viability of the empire. Women were pressed by Blackwell to use the power of their status as medical professionals to serve political ends, a position highlighted in an 1897 speech on the Contagious Diseases Act that she included in her 1902 collection.8

Similarly, the 1895 edition of The Psychology of Mind by Henry Maudsley (1835–1918), a medical text designed to define, to provide guidelines for, and to indicate the means of treating and containing insanity, deploys a vision of the state repudiating women’s suffrage with rhetoric that echoes Blackwell’s.9 So too are there similarities between the diagnostic and treatment methods put forward by the American women’s rights advocate and physician Mary Putnam Jacobi (1842–1906) and those advanced by psychiatrists endorsing antisuffragette positions, such as Charles Mercier (1852–1919), a lecturer on insanity at the Westminster Medical School and Medical School for Women, and T. S. Clouston (1840–1915), a Scottish asylum physician. By contrast, Thomas Clifford Allbutt (1836–1925), a noted Darwinian psychiatrist, the commissioner of lunacy in London from 1889 to 1892, and a regius professor at Cambridge from 1892, seems to diagnose women’s illness and prescribe treatment in a way that is evocative of the women’s rights position of Blackwell. Consequently, the language in The Wings of the Dove supporting the binary oppositions of Sir Luke Strett and Milly Theale, Kate Croy and Lionel Croy, Susan Stringham and Milly Theale, Merton Densher and Kate Croy, oppositions that reveal the ways in which these characters are subject to and resist the repression associated with the nineteenth-century medical profession, can now be connected to specific systems of signification — to medical language expressed as imperial rhetoric or the rhetoric of national efficiency that simultaneously endorsed competing visions of the state as they concern women’s rights. Binary oppositions are collapsed when read against a context that acknowledges systems of signification as hybridized.

1 National efficiency referred to a series of distinctive approaches to social, economic, and political reform that would enable Britain to reverse the course of imperial decline that was, many believed, evidenced generally by the increased competitiveness among rival nation-states, most prominently Germany and the United States, and specifically by the disastrous military campaigns of the Boer War (1899–1902).10 The health of the British family became a barometer for assessing military effectiveness and the fundamental expression of imperial power. In this view, the health of the various social ranks in Britain depended on the conditions in which these ranks were reared: working-class families living in squalor were unlikely to produce fit soldiers and, equally troubling, could ill afford to continue to bear the recruits of the future. In Efficiency and Empire (1901), for example, the journalist Arnold White (1848–1925), fearing Britain’s impending military decline, noted of a recruiting office that “of the 3000 who were accepted [for military service] only 1200 attained the moderate standard or muscular power and chest measurement required by the military authorities. In other words, two out of every three men willing to bear arms in the Manchester district are virtually invalids.”11

Political solutions to the problem of national degeneration were often associated with emerging theories of evolution. Lamarckian theories of evolution, for example, which, as Bernard Semmel remarks, argued that “characteristics acquired by an individual during his lifetime could be transmitted to his progeny,” implied that treating degeneration as an environmental problem — for example, by providing better housing for the poor — would lead to creating conditions in which an imperial race could be bred and could thrive. This concept allowed the leader of the “Liberal Imperialist” faction in Parliament, the earl of Rosebery (1847–1929), to argue in 1900 that Britain could make the most of its “raw
material," that social, economic, and military degeneration could be reversed through such state-sponsored initiatives as supplying suitable housing for the poor and promoting temperance. By no means the sole alternative to this political solution, but one that was diametrically opposed to environmental reforms and endorsed by many Conservatives, was one rationalized by the science of eugenics. Eugenics suggested that biological heredity "was of greater significance than environment in determining individual characteristics and that action could be taken to regulate heredity." Such theories endorsed more radical measures of state regulation, among them educational policies designed to encourage "procreation on the part of fitter stocks and to discourage the procreation of the unfit," and also including "the financial support of the poor but eugenically favoured by the wealthy, and every kind of discouragement to child-bearing by the unfit."12

Feminist historians and cultural critics have argued that the centering of issues of health and family within the debate over national efficiency redefined the role of the male psychiatrist to include using medical knowledge to regulate the family in the interest of imperial duty.13 Darwinian theories of sexual difference allowed Henry Maudsley and T. S. Clouston to put forward a vision of the state advocating a sexual division of labor, one that repressed women. Women who had suffered mental breakdowns did so as a consequence of failing to fulfill their imperial duty to become mothers of the race, having instead sought educational and employment opportunities in the male-dominated public sphere.14 The implication of this historical analysis is that the doctor-patient relationship became politicized in the sense that interviews between doctor and patient arguably functioned as the means by which the state could compel women to accept the political status quo: their disenfranchisement from the political system and confinement to the domestic sphere of influence, to duties within the home.

This historical narrative is problematized, however, by recognizing that the crisis over national efficiency also provided female physicians with the opportunity to promote women’s participation in the medical profession and, by extension, their increased access to educational opportunities and entitlement to the suffrage. The reemergence of the contagious diseases controversy during the 1890s publicized the abuses of state-sponsored medical authority as they occurred in the doctor-patient relationship, giving Elizabeth Blackwell the opportunity to present a version of this relationship that served the interests of her agenda for political reform, which included an expanded role for women physicians – indeed, for women in the state.

In the 1860s, the British government had already established its partnership with legal institutions and the medical community in enacting contagious diseases legislation in order to protect the army from becoming emasculated by the spread of venereal disease. This legislation, of course, equipped the police and the medical community with the authority to examine female prostitutes and sequester them against their will from sexual interaction with British soldiers.15 In the 1890s, when, owing to a similar impending crisis occurring in India, the government revived this legislation, Blackwell reacted by criticizing the Royal College of Physicians for embracing a method of treatment based on somatic rather than on mind-based causes of illness. Blackwell was particularly offended by medical men who sanctioned the practice of forcibly diagnosing and restricting the freedom of female prostitutes who physically carried the illness while overlooking the inability of soldiers to restrain themselves from acting on their sexual urges – ignoring, in other words, the men’s mental preoccupation with physical pleasure. To reverse the degeneracy that was crippling Britain’s military, she instead endorsed replacing medical men with female physicians when it came to treating venereal disease: "To us medical women, the special guardians of home life, has been opened the path of scientific medical knowledge, which, as science, embraces both mind and body; and it is by our advance, independently but reverently, in that path, guided by our God-given womanly conscience, that we shall be able to detect clearly the errors in relation to sex, which lie at the root of our present degeneracy."16

The reference to conscience here is evocative of Blackwell’s emphasis on sympathy in the context of the doctor-patient rela-
tionship. Almost ten years previously, in "The Influence of Women in the Profession of Medicine" (1889), Blackwell had described the duty of the physician to see "beyond the boundary of sense" and to offer comfort to both patients and grieving relatives, "the reverential hand-clasp which conveys hope to the mourner." She believed that female physicians were in possession of a faculty that male physicians lacked, maternity. As Regina Morantz-Sanchez argues: "By modeling the doctor-patient relationship on the interaction between mother and child, Blackwell was clearly gendering such behavior, though she was careful to assert that it was something men could learn." Her concern to promote the treatment of mind and body was designed to counteract the medical profession's endorsement of materialist medicine, or medicine that was concerned to diagnose illness as a purely physical phenomenon, an approach that she associated with male physicians and one that gained credibility with new discoveries in "immunology and bacteriology." In "Why Hygienic Congresses Fail" (1891), Blackwell uses a religious analogy to predict the abuse of medical authority, the autocratic tendencies in the male physician's bedside manner that would be inspired by absolute trust in the new science:

It is the announcement of a new priesthood or esoteric sect of physical science. In the mind of the speaker it means that his science is identical with truth. If that be admitted, it is the highest wisdom of the human being to obey gladly and unhesitatingly, and the teacher thus inspired with truth rightfully commands our grateful and profound reverence. But this claim may also mean the unconscious arrogance of a mind taking too narrow a view of science—a mind which, whilst earnest and laborious in investigating partial phenomena, is intoxicated by the discovery of new facts with the theories which can be built upon them, and at once announces himself as one of the priests of a new religion demanding absolute obedience; for the temptation of all priesthoods is to form an esoteric sect.

Similarly, in the same essay, she lambasts those who would sacrifice their compassion for animals to pursue vigorously new scientific discoveries through vivisection: "It is a pitiful intellectual fallacy of short-sighted materialism that supposes it possible to obtain 'scientific accuracy' by regarding so many kilos of living dog as if they could be experimented on as so many kilos of dead matter, or as if they were the materials of a steam-engine, which can be taken apart, examined, cleaned, tested, and put together again in complete working order."

Reading Sir Luke Strett and Milly Theale's relationship against Blackwell's reconfiguration of the doctor-patient relationship in her critique of the Royal College of Physicians, one can see that Blackwell's concern to promote sympathy and to treat the mind as well as the body certainly provides, albeit tentatively, a specific historical origin for Wendy Graham's contention, inspired by Foucault, that Milly is both "a victim and an agent of the disciplinary society." The advice that Sir Luke offers Milly in a series of interviews throughout the novel initially seems to align him with the method of treatment espoused and practiced by Blackwell. In the first interview, rather than focusing on the biological causes of Milly's illness, Sir Luke attempts to acquaint himself with the circumstances surrounding her case and to extract from her information concerning her personal history: "Do you mean ... that you've no relations at all?—not a parent, not a sister, not even a cousin nor an aunt?" This concern is directed at Milly's emotional and psychological support system. Like a nurturing mother, Sir Luke advises her to surround herself with friends: "[I]t's a fact that you couldn't very well be in a better place than in their company. It puts you with plenty of others—and that isn't pure solitude." He includes himself among these friends as one on whom Milly can depend: "This is very well so far as it goes. You can depend on me ... for unlimited interest. But I'm only, after all, one element in fifty. We must gather in plenty of others. Don't mind who knows. Knows, I mean, that you and I are friends" (WD, 15; vol. 1, bk. 5, chap. 3). Indeed, the discourse of scientific diagnosis is superseded by that of support, of friendship, of sympathy, of all that is associated with Elizabeth Blackwell's emphasis on empathy and concern to examine and treat the patient's mental and spiritual well-being and not just the body and the physical illness that occupies it. The specifically medical aspect of the conversation between Milly and Sir Luke in their first meeting appears to consist of his fleeting directive to her to
Janet Oppenheim suggests that the status of within a few days come to see you at home' her to live. Sir Luke places no restrictions on Milly and simply encourages her to live.

Sir Luke's method of treatment may, however, point also to a more sinister political origin in the debate over national efficiency. Janet Oppenheim suggests that the status of British psychiatry as a respected discipline in the context of the medical profession was already tenuous by the turn of the century. Only madness in its extreme manifestations could be easily diagnosed by psychiatry: "Borderline mental states posed particular problems." Indeed, in treating mental illness, both physical and what were referred to as moral causes - emotional, mental, or nonphysical influences - were addressed: "Doctors were never sure whether to treat these illnesses with medicines aimed at restoring the body or with moral exhortations designed to rally the mind and return the will to its proper function." The rise of materialism and the use of laboratory science exclusively to explain illness both mental and physical threatened to eradicate the need for mind-based explanations for illness - thereby, indeed, seeming to threaten the raison d'être of the psychiatric profession. Consequently, psychiatrists - or alienists, as these practitioners were called later in the century - resorted to elaborate role-playing. Oppenheim argues, to preserve the integrity of their profession. Consequently, psychiatrists - or alienists, as these practitioners were called later in the century - resorted to elaborate role-playing. Oppenheim argues, to preserve the integrity of their profession. Alienists often employed materialistic or somatic diagnostic procedures and treatment regimens in treating their patients, in addition to the strategies of moral management often associated with the work earlier in the century of John Conolly (1794-1866), who played "a central role in the success of the Victorian lunacy reform movement." Conolly's treatment method was based on the belief that "even the irrational and raving could be reduced to docility, and by moral suasion and self-sacrifice rather than force." Henry Maudsley's characterization of mental illness certainly aligns him with the male materialists who constituted the focus of Blackwell's effort to reform the medical profession. The signifiers of Blackwell's repudiation of medical practices that characterized the patient as a machine to be dismantled and rebuilt seem to be echoed in Maudsley's exploration of the causes of mental illness: "Individual instances are therefore the proper subjects of study: if well constructed, how was the excellent product formed? If ill constructed, what was the fault in the process of manufacture, and how can it be mended?" Yet Maudsley also argues that "it is impossible to separate the moral and physical causes of mental disorder, seeing that every moral feeling has its physical basis and what is a moral trouble in one may not be so in another physiological state." What is more significant is the method of treating mental illness, one in which both narcotics and strategies of moral management are endorsed over therapies that, as Blackwell argued, dehumanized the patient. With respect to drugs, Maudsley points out that they are used most effectively on "any bodily disorder which is co-operating to cause or keep up the mental disorder." For him, the objective of treating the mentally ill is to stimulate self-control by means of a strategy of developing trust on the part of the patient, a strategy that includes the use of sympathy and a calm demeanor:

The wise word wisely spoken stirs in him a subconscious distrust and reflection which subdue insane belief to a sort of half-belief for the time and may perchance suppress a half-belief altogether. A kind word of real sympathy, a cheering expression of hope, a genial pressure of the hand, a good-humoured satire - a little thing of that sort will sometimes do much to hearten the melancholic and to initiate hope, reflection, and recovery. All-important is the manner of saying and doing what is said and done; for a good manner is as good a passport to the confidence of insane as it is to that of sane persons. The suspicious and irritable susceptibility of mania is offended instantly by the least misliked and therefore misconstrued expression, which he is quick to catch - by a too curious look, an angry frown, the least expression of scorn, an aggressive or constrained address, any hurt of his self-love, which, resented at the time, is remembered bitterly after recovery.

Indeed, this particular method of moral treatment - of engaging with the patient sympathetically - was subject to change, based as it was on the individual character
of the patient. As Maudsley points out: "It would be absurd to treat medically the insanity of a feeble pubescence exactly as one would treat the melancholia of a gouty climacteric; and queer people are sometimes best managed by queer people, a fellow-feeling being the foundation of confidence and influence." In the spirit of Blackwell's approach to treating illness, Maudsley proclaims: "Always the rule of rules should be to treat an individual who is sick, not an abstract disease." What distinguishes Blackwell's approach from Maudsley's here is the latter's expectation of outcome of treatment. As his discussion of heredity makes plain, although education can, at a very early stage, assist in containing the disease and, in rare instances, cure it, for him the most effective way of treating mental illness is to prevent it. As Maudsley observes (drawing on the statistical research on insanity by John Thurnam [1810–73]): "Dr. Thurnam concluded that on the whole it might be said that of ten persons who fall insane five recover and five die sooner or later without recovery. Of the five who recover not more than two remain well for the rest of their lives; the others have subsequent attacks, it may be after long intervals of sanity, during which at least two of them die."26

Sir Luke’s interviews with Milly seem evocative of Maudsley’s emphasis on developing trust between physician and patient through satire, good cheer, and expressions of sympathy. In their first interview, Milly’s reaction to Sir Luke’s methods seems initially to indicate the success of such a treatment strategy: “They had been together, before, scarce ten minutes; but the relation, the one the ten minutes had so beautifully created, was there to take straight up: and this not, on his own part, from mere professional heartiness, mere bedside manner, which she would have disliked — much rather from a quiet pleasant air in him of having positively asked about her, asked here and asked there and found out” (WD, 147; vol. 1, bk. 5, chap. 3). Her being able to take him “straight up” is suggestive of his attempt to secure her trust, and this is confirmed further by his humorous exchange with her in the second interview, indicating to the reader a nascent level of comfort between them. After Milly asks Sir Luke candidly whether she is simply out of her mind, he confounded by his recommendation simply to live, his quip is very much in keeping with Maudsley’s use of sarcasm for purposes of medical treatment: "'My dear young lady . . . isn’t to 'live' exactly what I’m trying to persuade you to take the trouble to do?'" (WD, 153). Joan Lescinski’s point that this excerpt reveals that there is nothing physically wrong with Milly is compelling, but, again, this exchange has a specific historical political origin, one that goes unrecognized in Lescinski’s argument.27 Milly’s positive reaction to Sir Luke’s interviewing method also stems from a constituent of Maudsley’s approach of adapting medical treatment to the idiosyncracies of the individual patient. The narrator’s concern to convey Milly’s impression of Sir Luke’s thoroughness, the repetition of asked, the process of investigating Milly’s illness — these things together suggest that Sir Luke is researching his patient for the purpose of devising a custom-made treatment protocol.

Wendy Graham’s contention that Milly is susceptible to the process of surrendering "to the magisterial gaze of her physician" therefore becomes politicized in a specific sense.28 This surrendering depends on Milly’s concern to associate Sir Luke with representatives of institutional power, of the means by which the state can govern the population: “His large settled face, though firm, was not, as she had thought at first, hard; he looked, in the oddest manner, to her fancy, half like a general and half like a bishop, and she was soon sure that, within some such handsome range, what it would show her would be what was good, what was best for her” (WD, 145). While critics like Graham see such signifiers as an opportunity to impose contemporary political history, Foucauldian conceptions of power, on James’s text, it seems equally compelling to read Milly’s impressions of Sir Luke as an example of the kind of ideological interpellation to which women were subject, Blackwell argued, when they were treated by medical men. Blackwell’s critique of medical men as high priests is, certainly, evoked by the reference to Sir Luke as a bishop. The narrator’s concern to raise our awareness of Milly’s construction of her own process of manipulation at the hands of a medical man provokes us to consider
A historical narrative that was aimed at empowering women, at promoting their involvement in the professions, in the public sphere.

Milly's reaction to Sir Luke's interviewing process is also evocative of the overlapping of the treatment methodologies of Charles Mercier and Mary Putnam Jacobi, a leading women's rights advocate who differed significantly from Elizabeth Blackwell in her approach to promoting women's rights within a medical context. Rather than critiquing the medical men associated with the new science, with materialist practices, Jacobi embraced a strategy whereby women were to achieve equality within the medical profession by appropriating materialist methods so as to demonstrate to medical men that women were intellectually capable of being competent physicians. As Morantz-Sanchez argues with respect to Jacobi's political strategy: "The chief task of women physicians, she believed, was not the fostering of morality but the creation of a scientific spirit." For Blackwell's emphasis on sympathy within the doctor-patient relationship Jacobi substituted what she referred to as "wholesome neglect." In an 1895 essay, she offers, for example, her prescription for the female hysteric: "Constantly considering their nerves, urged to consider them by well-intentioned but short-sighted advisers, they pretty soon become nothing but bundles of nerves. They suffer from lack of the wholesome neglect to which their grandmothers were habitually consigned; too much attention is paid to women as objects, while yet they remain in too many cases insufficiently prepared to act as independent subjects." Belittling the female patient and criticizing the medical doctors who were sympathetic toward her became important constituents of Jacobi's political strategy. Similarly, Charles Mercier, who, according to Elaine Showalter, was a Darwinian psychiatrist endorsing women's repression, offered a prescription that echoes that of Jacobi. He writes in Sanity and Insanity (1890): "The intimate connection of hysteria with the craving for sympathy, interest, and fellowship is shown very clearly by the effect of the display of sympathy towards the hysteric. Nothing is more certain or more striking than the aggravation of symptoms produced by such a display.

Milly's endorsement of the lack of attention that she receives from Sir Luke can, therefore, be seen as more than an apolitical "resolute determination to be private about her illness." The narrator reports Milly's reaction to Sir Luke's lack of attention: "What it really came to, on the morrow, this first time - the time Kate went with her - was that the great man had, a little, to excuse himself; had, by a rare accident - for he kept his consulting-hours in general rigorously free - but ten minutes to give her; ten mere minutes which he yet placed at her service in a manner that she admired still more than she could meet it: so crystal-clean the great empty cup of attention that he set between them on the table." Mercier's and Jacob's corresponding methods of treating hysteria, of neglecting to humor the patient's desire for sympathy, are emphasized here in Milly's surprise at Sir Luke's refusal to dote on her; she is prepared for a long interview in which she will experience the sympathy associated with moral management, with Maudsley's and Blackwell's methods of treatment, but, instead, she is pleasantly surprised by the prospect of an "empty cup of attention." Jacobi's emphasis on the need for female physicians to embrace the scientific spirit for purposes of professional and, by extension, political recognition is also associated with Milly's construction of Sir Luke: "The friendship that she feels for the physician is dependent on the extent to which his character is associated with the certainty of the materialist science so vociferously embraced by Jacobi. Indeed, Milly's diagnostic authority - or, as Rita Charon would have it, her propensity to demonstrate her appropriation of medical authority via self-diagnosis - can be associated with a specific historical-political tactic that testifies to divisions within the women's rights move-
ment. Here, Milly may also represent women's appropriation of the repressive practices of Darwinian psychiatrists in keeping with the views of Charles Mercier – an empowering, although, from Blackwell's perspective, morally objectionable, effect – in addition to representing a newly critical, apolitical mapping of power relations within the doctor-patient relationship.

Yet James's plotting reminds us of the indeterminacy of the historical-political origins of his late-phase fiction. Milly reconsiders her earlier endorsement of Sir Luke's methods. She becomes the object of Maudsley's admonitions to fellow medical practitioners regarding the consequence of refusing to use sympathy and humor to subdue mental patients. Ironically, it is Sir Luke's adherence to Maudsley's principles that makes Milly unmanageable. Sir Luke is vilified by Milly for treating her with sympathy, with pity: "He was interested – she arrived at that – in her appealing to as many sources as possible; and it fairly filtered into her, as she sat and sat, that he was essentially propping her up. Had she been doing it herself she would have called it bolstering – the bolstering that was simply for the weak; and she thought and thought as she put together the proofs that it was as one of the weak he was treating her" (WD, 156; vol. 1, bk. 5, chap. 4). Milly's critique of medical authority, of sympathy, also evokes our consideration of the conflict between Blackwell and Jacobi, now temporarily associating her with Jacobi's tactics; like Jacobi, Milly is, arguably, criticizing male physicians. Sir Luke, for refusing to treat her with wholesome neglect. Yet a political reading based on the correlation between the constituents of Jacobi's strategy and Milly's character is also subverted by Milly's echoing of Blackwell's critique of materialist science, of the scientific spirit that Jacobi was promoting as essential for the success of female physicians within a male-dominated medical profession. Sir Luke is lambasted by Milly for putting her life in the scales, for measuring it provably, scientifically: "Such was Milly's romantic version – that her life, especially by the fact of this second interview, was put into the scales; and just the best part of the relation established might have been, for that matter, that the great grave charming man knew, had known at once, that it was romantic, and in that measure allowed for it" (WD, 148; vol. 1, bk. 5, chap. 3).

Wendy Graham's concern to associate Susan Stringham with "diagnostic procedures" and, consequently, with a reading, indebted to Foucault, that promotes Stringham's complicity with a "generalized policing power" can be fleshed out historically and politically on the basis that Stringham's relationship with Milly is evocative of the competing medical diagnoses and prescriptions by Darwinian psychiatrists deployed in such a way as simultaneously to repress and empower women. Stringham's consideration of Milly's illness while traveling along the "great Swiss road" provokes us to consider a psychiatric medical context; she associates Milly potentially with a "drama of nerves," claims that Europe is "the great American sedative," and suggests that a "nervous explanation" for Milly "would have been coarse" (WD, 83; vol. 1, bk. 3, chap. 1). The specificity of the expression of Stringham's medical authority is revealed, however, in her description of Milly's concern to use the sympathetic reactions of those around her to achieve her objectives, albeit unsentimentally: "She worked – and seemingly quite without design – upon the sympathy, the curiosity, the fancy of her associates, and we shall really ourselves scarce otherwise come closer to her than by feeling their impression and sharing, if need be, their confusion" (WD, 84). What amounts to a craving for sympathy, her working on it, was, according to Charles Mercier, the preeminent diagnostic criterion for hysteria. Mercier's prescription for curing hysteria was to remove the afflicted from the surveillance of her "weak-minded mother" and place her under the "care of a firm, kind, judicious, strong-minded woman." What Mercier also suggested was to place the patient in entirely new surroundings: "[T]he readiest, speediest, and most reliable means of cure is to remove the patient from her home, and place her in new conditions of life."37

This is precisely Susan Stringham's role, to assist Milly in relocating to new surroundings – to Switzerland, to England, and, finally, to Italy. While the authority that Stringham wields as Mercier's "strong-minded woman" is turned against her, this occurs in terms of Mercier's prescription for hysteria. Stringham becoming instead a surrogate version of Mercier's "weak-minded
mother." Indeed, Stringham’s commitment to Milly’s care is inspired by her desire to be a mother; she wishes to achieve the strength and the respect that she accorded her own mother, as the narrator suggests: “These reminiscences, sacred today because prepared in the hushed chambers of the past, had been part of the general train laid for the pair of sisters, daughters early fatherless, by their brave Vermont mother, who struck her at present as having apparently, almost like Columbus, worked out, all unassisted, a conception of the other side of the globe” (WD, 84). Stringham’s echoes those of her mother, save for children, and Milly is to become the surrogate child from whom Stringham will draw her strength. Yet, in her desperate attempt to ascertain whether Milly is ill, in her persistent effort to explore the nature of Milly’s pain, at points flaring “into sympathy” (WD, 91; vol. 1, bk. 3, chap. 2), she becomes the weak-minded mother, the object of mockery, as the narrator points out: “She had at present the effect, a little, of confounding, or at least of perplexing her comrade, who was touched, who was always touched, by something helpless in her grace and abrupt in her turns, and yet actually half made out in her a sort of mocking light” (WD, 92). The extent to which she has been deprived of her authority over Milly can be emphasized only further by the narrator’s claim that her “clinging to the girl” was a satisfaction in itself (WD, 84; vol. 1, bk. 3, chap. 1).

The Alpine scene is, according to Virginia Fowler, susceptible to many symbolic interpretations but, ultimately, produces the effect of making the reader aware of “the solitariness and the precariousness of Milly Theale’s life.” The threat of illness is, no doubt, evident in Susan Stringham’s fear that Milly will throw herself over the precipice, but the description of Stringham’s reaction to the surroundings is evocative of climatotherapy and its associated political uses: “The irrecoverable days had come back to . . . [Susan] from far off; they were part of the sense of the cool upper air and of everything else that hung like an indescribable scent to the torn garment of youth – the taste of honey and the luxury of milk, the sound of cattle-bells and the rush of streams, the fragrance of trodden balms and the dizziness of deep gorges” (WD, 86; vol. 1, bk. 3, chap. 1). Climatotherapy – that is, treating a patient by advising relocation for a change of air and scene – was often associated with the assumption that mental illness was caused by the stress and overwork produced by modern urban civilization.

But there were psychiatrists who challenged this assumption, staunchly defending the fast-paced lifestyle of hardworking professionals and the technological advances that made this lifestyle possible. In an 1895 article, Thomas Clifford Allbutt argues, for example:

There is some ground, I believe, for the assertion that dwelling exclusively in large cities is tending to dwindle and impoverish the bodily health of the wage-earning or permanently resident class; but it is not in this class that the effects of brain pressure, of ambitious projects, of business competition, of pampered aestheticism are to be sought. Will any serious person, looking round at our footballing young men, our tennis-playing and bicycling young women, our maturing alpinists and golfers of both sexes, our ancient mariners and sporting matrons, declare that the standard of physical health in our upper and middle classes is falling? Allbutt endorses a middle-class ethos of hard work and play; and, in extending his argument that modern civilization stimulates rather than undermines mental health, he seems to defy Showalter’s contention that Darwinian psychiatrists were concerned to exclude women from educational opportunities, to sequester them in domestic confines. “Women,” he goes on, “especially seem to be changed for the better. Freedom to live their own lives, and the enfranchisement of their faculties in a liberal education, which, physically put, means the development of their brains and nerves, so far from making women more whimsical or languorous, seem not only to have given them new charms and fresher and wider interests in life, but also to have promoted in them a more rapid and continuous flow of nervous spirits, and to have warmed and animated them with a new vitality both of mind and body.” Allbutt’s defense of modern society is based also on a critique of the press’s tendency to popularize nervous disease, a popularization that resulted, he thought, in false disorders manifested as “restlessness, quackishness and craving for sympathy.” Henry Maudsley too, although certainly not...
advocating Allbutt’s endorsement of women’s educational freedom, argued that technological developments in modern society helped prevent insanity: “Railways and steamboats may have done more to prevent insanity by the variety, than they have done to produce it by the hurry, of life which they have occasioned. The more numerous and various the impressions to which a mind is subject in the complex relations of life the less likely is its balance to be upset by the exaggerated preponderance of any one of them.”

Susan Stringham’s diagnostic authority, her privileged position of constructing Milly’s intentions in a peaceful, country setting, away from the pressures of city life, as Milly stares out on the “view of great extent and beauty” (WD, 88; vol. 1, bk. 3, chap. 1), can be associated with Darwinian psychiatrists treating and regulating the mentally ill by means of climatotherapy. Yet that diagnostic authority should also be read in light of her construction of Milly that immediately precedes this scene, a construction in which Stringham expounds on her contention that Milly was the greatest impression of her life:

It was her nature, once for all – a nature that reminded Mrs. Stringham of the term always used in the newspapers about the great new steamers, the inordinate number of “feet of water” they drew; so that if, in your little boat, you had chosen to hover and approach, you had but yourself to thank, when once motion was started, for the way the draught pulled you. Milly drew the feet of water, and odd though it might seem that a lonely girl, who was not robust and who hated sound and show, should stir the stream like a leviathan, her companion floated off with the sense of rocking violently at her side. (WD, 81–82)

Here, there is much to suggest a political-medical dimension to Stringham’s (as Milli- cent Bell would have it) romantic sensibi-
lity. The constituents of Maudsley’s defense of modern civilization appear in Stringham’s evaluation of Milly’s leviathan-like power. Rather than as a patient suffering nervous collapse as a consequence of the pressures of business competition, Milly is constructed as Maudsley’s catalyst for good health, the synecdoche of the successes of modern civilization and capitalism, the steamship.

Indeed, the origin of Stringham’s construc-
tion of Milly’s power of attraction as tanta-
mount to the propelling force of a steam-
ship – of Milly’s ability to render her so-called surrogate physician, Susan Stringham, obsequious to her wishes – is also associated with Allbutt’s strategy, marking the distinc-
tion between Maudsley’s and Allbutt’s uses of medical knowledge in their respective visions of the state. Stringham’s thinking of “newspapers” is evocative of Allbutt’s critique of those who appropriate medical authority, transmit the causes of mental illness, to vilify the values of modern society. Milly is assessed here, in accordance with Maudsley, as mentally stable, yet her affiliation with Maudsley’s use of medical knowledge to endorse the political status quo, which supports women’s disenfran-
chisement, is questioned on the basis that it is gleaned from, according to Allbutt’s critique, a politically biased and unreliable source: the newspapers.

Milly’s association with Allbutt’s cele-
bration of women’s health, of the alpinists of the middle classes, is suggested in the exchange between Milly and Stringham immediately following the Alpine scene, in which Stringham attempts to defend herself against Milly’s accusation that she is in cahoots with Dr. Finch and has not been forthcoming about their relationship: “I’m not in his confidence – he had nothing to confide. But are you feeling unwell?” (WD, 91; vol. 1, bk. 3, chap. 2). The narrator’s commentary immediately following Stringham’s question may suggest that Milly is too ill for climatotherapy, but it may also signal the possibility that, according to David McWhirter, she draws her strength, her ability to resist attempts to impose on her an unwanted identity, from “her own impending doom.”

Still, the narrator arguably offers the more specific historical-political origin for Milly’s resistance to Stringham in terms of Allbutt’s synecdoche for women’s emancipation, for celebrating the mental health produced by modern civilization: “The elder woman was earnest for the truth, though the possibility she named was not at all the one that seemed to fit – witness the long climb Milly had just indulged in. The girl showed her constant white face, but this her friends had all learned to discount, and it was often brightest when superficially not bravest.”

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Milly’s long climb may suggest that she is mentally and physically healthy, robust, capable of physical activity, but these comments may also serve the function of understatement; it may be obvious that she is very ill and should not have made the climb.

2.
Diagnostic authority divorced from political context has also been linked with Kate Croy’s attempts to construct Milly’s identity as dove. So too has Kate’s own medical identity been implied by such critics as Hugh Stevens, who argues that Kate fashioned from her “desire to resist societal prescriptions as to who she should marry” her ability to resist Aunt Maud’s determination to impose on her a profitable commercial marriage. The historical origin, the political field surrounding the novel to which Stevens links this power, is the domain of the abstraction of specific relations as encapsulated by the synecdoche New Woman. Yet we can establish precise correlations between historical-political context and literary text by reading Kate’s relationships with her lover, Merton Densher, and her father, Lionel Croy, against the more complex context of Elizabeth Blackwell’s engagement with the debate over national efficiency and by exploring the assumptions of Blackwell’s conception of the state as they are touched on in her 1897 speech but fleshed out in her earlier articles reprinted in Essays in Medical Sociology — essays that, although written earlier, were still relevant to feminist arguments associated with the movement for social purity during the 1890s. Also, a stable political reading endorsing women’s rights or the political status quo of the 1890s is problematized by tracing the extent to which political rhetoric and conceptions of the state permeate Henry Maudsley’s discussion in The Pathology of Mind of the causes of and ways to prevent mental illness and by noting the extent to which the rhetoric of Maudsley and Blackwell can be viewed as overlapping.

Blackwell attributed the central cause of the spread of venereal disease to men, the soldier’s determination to ignore the medical tenet that “the sexual organs are not essential to individual life, although they are essential to the continuation of the race,” and to overlook the corollary that “[n]either is their full exercise by sexual congress indispensable to individual health.” The spread of vice caused by the refusal of the Royal College of Physicians and the military to promote sexual restraint among soldiers created this state of “national degeneracy.” The sexual double standard, whereby women were subjected to medical inspections and the diseased among them quarantined while men continued to spread the disease unchecked, made the Contagious Diseases Acts ineffective from Blackwell’s perspective. The sanctioning of this sexual double standard by male medical men necessitated the intervention of “medical sisters.” Blackwell believed that these medical women should “recognise that the redemption of our sexual relations from evil to good, rests more imperatively upon them than upon any other single class of society.”

Such action, such a process of redemption would be, not localized, restricted to the army in India, but made part of a larger social purity movement and feminist mission at home, which effort included, as a suffrage pamphlet stated the goal, “the infusion into political life of those higher moral and spiritual influences which it is the mission of women to diffuse in family and social life.” The institutionalizing of the virtues that feminists associated exclusively with women, moral purity stemming from maternity, through such organizations as the Moral Reform Union (active from 1881 to 1897) — to which Elizabeth Blackwell belonged and which sought to reform sexual morality — constituted for feminists evidence of the process of women’s moral purification of the public sphere. For feminists, this purification was a political act, as Antoinette Burton suggests: “The public sphere was national by virtue of its being political and social; the vote was a ‘national question’ and a ‘national privilege.’” Indeed, for feminists, there was an inextricable link between British women’s philanthropy in Britain’s colonies — eliminating sexual immorality and prostitution in India, for example — and promoting women’s suffrage at home. By purifying Britain’s colonies, women like Josephine Butler (1828–1906) were demonstrating a substantial contribution as citizens to the nation and, consequently, justifying women’s full participation in the
political system at home. Elizabeth Blackwell also made this connection, in effect recontextualizing it to promote women's medical authority, in her 1897 speech; for Blackwell, the work of redeeming sexual relations that was to be carried out by medical sisters "concerns our work in Great Britain as well as in India and in Africa."54

Drawing the reader's attention to the opening scene of The Wings of the Dove in Chirk Street, in which Kate "moves restlessly about the room" as she "takes inventory of her derelict father's surroundings," and coupling that with Kate's reaction in the following chapter to the ostentation of the narrow black house-fronts, adjusted to a standard that would have been low even for backs, constituted quite the publicity implied by such privacies" (WD, 21; vol. 1, bk. 1, chap. 1). Epithets of sexual promiscuity — "sticky," "slippery" — summon up Maudsley's repudiation of the collapse of self-discipline. Such epithets attest to the dissemination of the corruptions of "individual vice" and "crime," of people "doing what they lust" at the expense of the state. Kate, like Maudsley, is expressing her disgust at the marks of decline, and, thus, she can be associated with his diagnostic authority.

Indeed, Kate's family's association with mental illness is evoked in her affiliation with a musical metaphor used by Maudsley: "Her father's life, her sister's, her own, that of her two lost brothers — the whole history of their house had the effect of some fine florid voluminous phrase, say even a musical, that dropped first into words and notes without sense and then, hanging unfinished, into no words nor any notes at all. Why should a set of people have been put in motion, on such a scale and with such an air of being equipped for a profitable journey, only to break down without an accident, to stretch themselves in the wayside dust without a reason?" (WD, 22; vol. 1, bk. 1, chap. 1). The musical metaphor describing the social decline of the Croy family in terms of the fragmentation of musical form initially into "words and notes without sense" mirrors Maudsley's description of those predisposed to insanity: "[T]he finer and more complex the harmony of an organic whole, the more easily is it deranged." The Croy family entering its stage of alienation from the socially elite as music that is essentially no longer measurable — no longer

Kate repudiates her father for bringing dishonor on the family: "Each time she turned
Yet, if Kate can be associated with the diagnostic authority of Maudsley, she can equally be associated with a repudiation of Maudsley's authority and an affirmation of the central constituents of Blackwell's vision of the state. Blackwell shared Maudsley's view that selfishness and lust, among other vices, were responsible for the pauperism marking the decline of national greatness. But she was sympathetic toward the plight of the unfortunate, often seeing them as the "weaker portions of the human race ... more deeply crushed down by the misery of a limitless competitive system." Opposing Maudsley's endorsement of a eugenic position, which is evident in his support for competitive struggle and in his attack on those who would sacrifice themselves to prolong "the feeblest life to its utmost tether," Blackwell promoted educating the mind to control the selfishness that sprang from the materialistic urges of children, to convey the notion that children should begin life "as simply as their parents began it" and, consequently, develop the ability to resist "being enervated by luxury."

Kate's reaction to the location of her father's flat in Chirk Street likewise demonstrates a perverse kind of satisfaction at having to confront her humble beginnings: "To feel the street, to feel the room, to feel the table-cloth and the centerpiece and the lamp, gave her a small salutary sense at least of neither shirking nor lying." The use of shirk is not associated here with expressing a condemnation of the poor as degenerate, with treating her father as the object of Maudsley's social critique; rather, it signifies Kate's own emasculation as representative of Maudsley's diagnostic authority. The "shirking" with which Kate denies any affiliation is associated with the upper classes, with those who would deny their humble beginnings to promote their social respectability. The Chirk Street setting comforts Kate in the terms of Blackwell's social critique, which advances the virtues of honesty, simplicity, and morality against such virtues of the competitive system as ambition; Kate is comforted by the fact that here, unlike at Lancaster Gate, she does not lie or shirk. Although she blames her father for the economic collapse of her family, she also appears, in condemning him, to struggle with her emotional commitment to him or, perhaps, with the principles of
family loyalty: "She tried to be sad so as not to be angry, but it made her angry that she couldn't be sad" (WD, 21; vol. 1, bk. 1, chap. 1). The ambiguity of her emotional state is evocative of the conflict between Maudsley's and Blackwell's views concerning pauperism: Maudsley's absolute intolerance of pauperism, and defense of the capitalist system at the expense of the poor, confronting Blackwell's view that sympathy and education will eradicate this social problem.

Both Maudsley's and Blackwell's visions of the state as they concern the debate over national efficiency include strict surveillance of the courtship ritual and regulation of sexual relations between men and women, and the constituents of their opposing positions on women's rights clearly inform Kate's relationship with Merton Densher. Blackwell argued that a love of dress, luxury, and pleasure was a dangerous influence on marriage, the home, and society because it signified, from her perspective, conduct associated with the sensual union. Since Blackwell argued that "the value of a nation" depended on "the strength and purity of home virtues," a courtship based on sexual attraction rather than on spiritual union would, arguably, lead to the moral degeneracy of the family and, by extension, the state — including "our great Indian Empire." Blackwell warned her reading public about the potential causes of moral decline in marriage: "As already stated, the direct result of the mastery of young men by irresistible physical instinct will be to create a necessity in young women for dress which will bring physical attractions into prominence or supply their deficiency. The craving for riches and luxury, the ignorance of economy, so often urged as an obstacle to marriage, are the inevitable results of licentiousness, which strengthens and cultivates exclusively material desires and necessities."63

Blackwell's concern to construct young women in the courtship ritual as potential victims of "irresistible physical instinct," which, here, she unequivocally associates exclusively with men — a kind of moral debasing of men, also expressed in terms of a threat to imperial authority — constitutes a defense of the constituents of "spiritual motherhood," Blackwell's belief in women's moral superiority whereby "a whole nation represented a woman's progeny, to be 'protected' and 'saved'" by women.64 The opening scene of The Wings of the Dove, in which Kate assesses herself in front of the mirror, can be associated more exactly than with a vague reference to "the classic trope of the woman before the mirror . . . an act of assessing her power." Kate herself can be linked to a constituent of Blackwell's critique of male sensuality. Kate is the imperial mother of the future, a victim of Merton's sexual passion; her implied victimization at the hands of Merton, the emphasis of her political authority in accordance with Blackwell, is stressed in her obsession with her physicality, the narrator's repeating of "beautiful": "staring at her beauty alone," readjusting her "closely-feathered hat," "her eyes aslant no less on her beautiful averted than on her beautiful presented oval" (WD, 22; vol. 1, bk. 1, chap. 1).

Equally compelling in this regard is James's narrator's concern to describe Densher's intense feelings for Kate in terms of a growing passion as set against the pressing demands of Aunt Maud for Kate to marry Lord Mark, not Densher, for money, a conflict expressed in medical terms: "Their mistake was to have believed that they could hold out — hold out, that is, not against Aunt Maud, but against an impatience that, prolonged and exasperated, made a man ill" (WD, 191; vol. 2, bk. 6, chap. 1). Impatience here refers to the frustration that Densher experiences at having to respect female modesty and chastity rather than fulfill his sexual desire. He is frustrated, in his state of not being married to Kate, by, having "nowhere to 'take' his love," the narrator explaining from Merton's perspective that to take Kate to his apartment would invariably require them to follow the rules of social respectability: "She would have to stop there, wouldn't come in with him, couldn't possibly; and he shouldn't be able to ask her, would feel he couldn't without betraying a deficiency of what would be called, even at their advanced stage, respect for her" (WD, 190). Indeed, Densher constructs Kate as the physician who can cure his illness, his expression of sexual passion, as the text suggests to us: "[B]ut, he struck himself as also knowing that he had already suffered Kate to begin finely to apply antidotes and remedies and subtle sedatives." The medical terms seem metonyms for expressions of physical affection.
kind of physician Kate becomes in Densher’s eyes might seem incompatible with the piety and morality of an Elizabeth Blackwell, were it not for Densher’s admission of the vulgarity of his pleas: “It had a vulgar sound – as throughout, in love, the names of things, the verbal terms of intercourse, were, compared with love itself, horribly vulgar; but it was as if, after all, he might have come back to find himself ‘put off,’ though it would take him of course a day or two to see” (WD, 191). Kate’s sexual submission to Densher, to which Bell refers, can, therefore, be linked to a specific medical and political text.

Still, this correlation may be problematized if we consider Maudsley’s critique of women forfeiting their imperial duty as mothers and his gendered assumptions informing his celebration of social order. In an 1874 article, Maudsley argued that, for “the sake of the race,” women should respect the social limitations that their physiology had imposed on them, warning: “Those in whom the organs are wasted invoke the dressmaker’s aid in order to gain the appearance of them; they are not satisfied unless they wear the show of perfect womanhood. However, it may be in the plan of evolution to produce at some future period a race of sexless beings who, undistracted and unharassed by the ignoble troubles of reproduction, shall carry on the intellectual work of the world, not otherwise than as the sexless aunts do the work and fighting of the community.” Kate’s appeal to the eye, as conveyed by James’s narrator, and her continually being described by her father as “handsome” would seem to constitute the basis of an equally compelling correlation between her character and Maudsley’s view of imperial duty for women: “Slender and simple, frequently soundless, she was somehow always in the line of the eye – she counted singularly for its pleasure. More ‘dressed,’ often, with fewer accessories, than other women” (WD, 22; vol. 1, bk. 1, chap. 1).

Like Blackwell, Maudsley regarded the family as central to political stability, but he chose to express this parallel in terms of women’s repression. “Destroy the social structure of a nation, as in the French Revolution,” he warns in The Pathology of Mind, “and then behold what monsters of aspish deformity and tigrish ferocity the individ-

uals are capable of becoming. We see the same principle at work on a small and meaner scale when a wife, the conduct of whose life has been fair and regular in the domestic system established during her husband’s life, goes her way quite astray when his supporting and restraining hand has been removed by death.” Note Maudsley’s concern both to denounce the Parisian mob in a Carlylean or Burkean fashion and to parallel this source of disorder with women in the context of family. Maudsley’s sexist assumption – that, by virtue of their animal nature, their inferior position on the evolutionary ladder, women exclusively require restraint in the context of family – is extended to the courtship ritual at the point at which he attempts to warn male suitors that marriages marked by neurotic lovers “inspired by . . . intense sentiments and idealistic aspirations of the unpractical kind” are potentially socially destabilizing. Although Maudsley is not explicit about what constitutes idealism, it seems likely that he supported marriage according to rank, a position commensurate with the principles of commercial marriage. He also endorsed the radical eugenic position of selective breeding, and, like Blackwell, he presents his concern about preserving the strength and vitality of the race in gendered terms. He is particularly sympathetic to men who are unaware that they are courting women predisposed to insanity. He warns that male suitors are very often deluded by love or passion for the woman, seeing “in the sacrifices which she inflicts on others only rights withheld from her or wrongs done to her.” What for Maudsley is of preeminent importance if this potential social catastrophe is to be avoided is for the young man to “study her character in her history.” He must ascertain what her life has been “at home as a daughter.”

Like that of Maudsley’s neurotic lovers, Kate and Densher’s union is characterized by “idealistic aspirations.” It is clear from Densher’s perspective that pursuing Kate is economically and socially unviable: “His want of means – of means sufficient for any one but himself – was really the great ugliness, and was moreover at no time more ugly for him than when it rose there, as it did seem to rise, all shameless, face to face with the elements in Kate’s life colloquially and conveniently classed by both of them as funny” (WD, 54–55; vol. 1, bk. 2, chap. 1).

Yet Densher offers a rationalization to per-
petuate their relationship despite Aunt Maud’s effort to destroy it: “Since what she builds on is the gradual process of your alienation, she may take the view that the process constantly requires me” (WD, 72–73; vol. 1, bk. 2, chap. 2). Densher’s positing of the notion that it is precisely the conflict between Kate and her aunt over the principles of selection for marriage that will sustain his and Kate’s relationship testifies to the desperation with which he will cling to her, a desperation borne out by his willingness to sacrifice his instincts about Kate to follow her plan to manipulate Milly. Bell is compelling in pointing out that Densher does suffer from self-delusion, but this signifier is not immune to a political valence. Densher’s delusion can be associated with Maudsley’s deluded young man.

Both Kate and Densher seem to embrace the sentimentality that constitutes the dangerous idealistic aspirations that govern the courtship ritual of Maudsley’s degenerate marriage. Kate’s admission that she was in love and her pledge to Merton seem to confirm this: “And I pledge you— I call God to witness!— every spark of my faith; I give you every drop of my life” (WD, 73; vol. 1, bk. 2, chap. 2). But what is most telling is James’s rewriting of Maudsley’s concern to advise the young man to avoid marrying into insane stock by conducting a thorough investigation into the history of the young woman he is courting, thereby establishing whether insanity exists in her family. Densher exhibits a healthy suspicion of Kate’s vision of their relationship, a desire to investigate the basis of her conception of it: “But Densher, though he agreed with her, found himself moved to wonder at her simplifications, her values. Might prove difficult— was evidently going to; but meanwhile they had each other, and that was everything. This was her reasoning, but meanwhile, for him, each other was what they didn’t have, and it was just the point” (WD, 54; vol. 1, bk. 2, chap. 1). Possessing no medical expertise, he cannot identify the signs of mental illness— those that Maudsley puts forward— that Kate reveals to him in disclosing the cause of her family’s decline, illness whose transmission via heredity, a constituent of Maudsley’s definition of the causes of mental illness, is echoed in James’s plotting of Kate’s character: “’The tune,’ she exclaimed, ‘to which we’re a failure as a family! With which he had it all again from her— and this time, as it seemed to him, more than all: the dishonour her father had brought them, his folly and cruelty and wickedness’” (WD, 56).

Maudsley suggests that insanity is often associated with a “narrow, keen and intense egotism which entirely disables the individual from viewing anything in the world from another standpoint than that of his own sensitive self-love.” He also describes the plight of a family coping with an insane, selfish, and immoral relative who causes “no little unhappiness to others, who have in the end to bear his burdens, to suffer for his selfishness, to expiate his errors, to make atonement for his wrong.” The scenes in which Kate expresses her disdain for her father provide the reader with the components of this anecdote, components to which Densher remains blind for much of the novel. Expressing her disappointment at the unconvincing staging of Lionel Croy’s illness as she arrives at the flat, an initial indication of the animosity that marks their relationship, she points out: “He might be ill and it might suit you to know it, but no contact with him, for this, could ever be straight enough. Just so he even might die, but Kate fairly wondered on what evidence of his own she would some day have to believe it.” Her construction of him in terms of Maudsley’s anecdote of suffering family members is indicated in her experience of the “old ache” (WD, 23; vol. 1, bk. 1, chap. 1) that she associates with her mother as victim of Croy’s undisclosed immoral conduct. Moreover, Croy’s frustration at Kate’s decision not to share with him her inheritance from her mother is certainly suggestive of his affiliation with Maudsley’s conjoining of selfishness with insanity; Kate’s decision to assist her impoverished, widowed, pregnant sister provokes Croy to think only of himself, noting bitterly, selfishly: “She should have divided it with him” (WD, 34). Merton passes through the delusional state in which he strives to trust Kate despite the vices of wickedness, folly, and cruelty to which she is predisposed via paternal heredity, consistent with Maudsley’s diagnostic criteria for insanity. Her arguably philanthropic, although undoubtedly self-serving, plan to steal Milly’s money so that Densher may become suitable for marriage is discovered by Densher, enabling him to follow Mauds-
ley's advice to preserve the morality of the state: avoid courting women predisposed to insanity such as Kate.

If Lionel Croy can be read as the object of Maudsley's diagnosis of insanity, he can also be read as the object of Blackwell's effort to promote parents as educators of sexual morality, the "base of national progress." Like Maudsley, Blackwell recognized the significance of the hereditary transmission of illness and promoted "parentage" as the most "potent and persistent civilizer and educator of our race." For Blackwell, a woman was, "from her central position in the family as wife and mother," to be "a guide to the education . . . not only of the infant, but of the growing and grown man." The process of educating a youth to embrace chastity and sexual morality depended on establishing a relationship of trust between child and parent, "the first and truest friend of the child." Constructing a parent-child relationship as a friendship would permit the parent to exert the necessary influence, to practice "not dogmatism, nor rigid laws, nor formal instruction . . . but the formative power of loving insight and sympathy." Blackwell argued that such responsibility should be embraced by the father as earnestly as by the mother for "[n]o home can be a happy one, if the father's keest interest and enjoyment do not centre in his family life." In taking the latter position, Blackwell did not, however, endorse what could be regarded as a radical challenge to the sexual division of labor in society, pointing out, for example, that fathers and brothers who "lounge about the pot-house" undermined the "natural order of industry by which the man is the chief material support of the family."74

Graham's observation that Lionel Croy's "tutelary function in the novel" is "deficient as well as destabilizing" can be fleshed out historically and politically if we read his marital advice to Kate against the context of Blackwell's discussion of methods of promoting sexual morality.75 Our consideration of a medical context, of the political views of doctors such as Blackwell and Maudsley, is immediately provoked by Kate and her father's interview being described in terms of illness. Croy's questionable state of health is what brings Kate to Chirk Street, and her suspicion (in a passage quoted earlier) about whether he is ill buttresses her construction of his character as untrustworthy, manipulative: "He might be ill and it might suit you to know it . . . but Kate fairly wondered on what evidence of his own she would some day have to believe it" (WD, 23: vol. 1, bk. 1, chap. 1). Yet there are signs during their conversation that perhaps Croy can be associated with the kind of sympathy and fellow feeling evocative of Blackwell's ideal parent-child relationship. In sanctioning Aunt Maud's decision to blackmail Kate into marrying Lord Mark, whereby receiving the financial benefits of Lancaster Gate depends on Kate never seeing her father again, Croy seems to betray signs of physical illness that are, perhaps, brought on by his being forced to forfeit his ability to care for his child: "Yet as this, much as she had seen, left her silent at first from what might have been a sense of sickness, he had time to go on" (WD, 29). Kate's silence might stem from her own feeling of illness or from witnessing, perhaps, for the first time evidence of her father's genuine expression of family sentiment in his attempt to hide his illness.

Again, this vague reference to a medical context is fleshed out further in Croy's speech, which we might, in acknowledging this expression of emotion, read as a rare example of his genuineness:

"Then, my dear girl, you ought simply to be ashamed of yourself. Do you know what you're a proof of, all you hard hollow people together? . . . Of the deplorably superficial morality of the age. The family sentiment, in our vulgarised brutalised life, has gone utterly to pot. There was a day when a man like me -- by which I mean a parent like me -- would have been for a daughter like you quite a distinct value; what's called in the business world, I believe, an 'asset.' . . . I'm not talking only of what you might, with the right feeling, do for me, but of what you might -- it's what I call your opportunity -- do with me. . . . They come a good deal to the same thing. Your duty as well as your chance, if you're capable of seeing it, is to use me. Show family feeling by seeing what I'm good for. If you had it as I have it you'd see I'm still good -- well, for a lot of things. There's in fact, my dear, . . . a coach-and-four to be got out of me." (WD, 29–30)

As an educator, attempting to persuade Kate to embrace a commercial marriage with a man of Aunt Maud's choosing, Croy is align-
ing himself with Blackwell’s condemnation of sensual marriage. What is also significant here is the extent to which we are provoked to consider Croy’s violation of the very parental practices that Blackwell endorsed. He does not establish a relationship with Kate built on trust; initially, he attempts to bully her, to dominate her and, thereby, force her to embrace his definition of family sentiment. He may be a concerned parent, but he violates Blackwell’s natural order of industry – even though his pleas to be used financially by his daughter are evocative of his commitment to such an order. He does appeal, admittedly perversely, to family sentiment, to sympathy, to “family feeling,” to help her survive, but his construction of family feeling may be rhetorical and can easily be associated with a selfish motive.

The attempt to educate Kate is also suggestive of Maudsley’s vision of the state in more than simply demonstrating that Croy is morally corrupt. Embracing economic competition as part of his medical prescription for a healthy state, Maudsley admonished his readers against “suicidal self-sacrifice.” Unhealthy individuals were those who carried this “moral law of self-sacrifice” to extremes, threatening to eradicate “competition, in making an equal distribution of wealth, in prolonging the feeblest life to its utmost tether, in banishing strife and war from the earth, in bringing all people on it to so sheep-like a placidity of nature that they would no more hurt and destroy, and to such an ant-like uniformity of industrious well-doing that no one would work for himself but every one for all, they would have robbed human nature of its springs of enterprise and reduced it to a stagnant state of decadence.” Maudsley suggested that what exposed inferior stock, what contributed to the causes of insanity, was the mental inactivity associated with men who were forced to retire from a business context: “He cannot get away from himself because he has nothing to lay hold of outside himself and no resources in himself: founders in a weltering sea of self for want of way on his life-craft.” And he mentioned a successful businessman who, after retiring to enjoy the fruits of his labor, shot himself because of his preoccupation with minutiae.76

Croy, who is treated as a social outcast and who has possibly lost a fortune, seems not to dwell on the insignificant or petty. Rather, in his effort to ensure that Kate “shan’t be so beastly poor” (WD, 31; vol. 1, bk. 1, chap. 1), he devises a plan for her future that evidences his commitment to Maudsley’s ideas of balanced self-sacrifice in an economic context and to management tactics that prevent or dampen the likelihood of perpetuating mental illness via heredity. Croy’s priority to make himself economically viable again can, by Maudsley’s standards, be read as evidence of his sanity. More important, his rebuke of Kate for defining family sentiment in idealistic terms, terms that will contribute to the continued economic decline of the Croy family, suggests that his sacrifice is by no means suicidal: “One doesn’t give up the use of a spoon because one’s reduced to living on broth. And your spoon, that is your aunt, please consider, is partly mine as well” (WD, 28). The immoral implications of his use of his own daughter for economic gain are, arguably, mitigated significantly by the fact that his plan is designed, not to accumulate capital, but simply to ensure survival, his own and his daughter’s. Clearly, Croy can be seen as acting as an alienist who realizes the extent to which he is responsible for his family’s decline and is taking action to isolate himself as a negative nurturing element that will contribute to promoting Kate’s undoing, her marriage for sensuality or love, not for economic security.

In conclusion, the debate over national efficiency provided feminist activists such as Elizabeth Blackwell the opportunity to politicize, not only medical discourse, but also the discourse associated with the family and the home, to serve the agenda of expanding women’s authority in the public sphere. The debate also, however, permeated medical texts of those long retired from engaging in the struggle against extending women’s rights. For Henry Maudsley, the very terms that informed his method of treating the mentally ill were drawn from a rhetoric endorsing the social, economic, and political status quo. In examining a text situated in a culture dominated by discussions of social reform and politi-
cal change, we should not be surprised, in adopting the application of Bakhtinian literary theory, to discover that the complexity of Henry James's narrative method is as much a product of the intricacies of the social basis of language, of hybridized rhetoric, as it is of his genius and his lived experience.

NOTES
8. Elizabeth Blackwell, "Medical Responsibility in Relation to the Contagious Diseases Act" (1889), in Essays in Medical Sociology, 2 vols. (London: Bell, 1902), 128-111. The essay was originally an address to a meeting of medical women in London, 27 April 1897.
14. Showalter, Female Malady, 122, 123.
17. Elizabeth Blackwell, "The Influence of Women in the Profession of Medicine" (1889), in Essays, 21-32, 26 (see also 12).
25. Maudsley, Pathology, 90, 87, 546, 561.
29. Morantz-Sanchez, Sympathy and Science, 191.
30. Ibid., 196.
32. Showalter, Female Malady, 106.
34. Lescinski, "Fierce Privacy," 128.
35. Rita Charon, "The Great Empty Cup of Attention: The Doctor and the Illness in The Wings
37. Mercier, Sanity and Insanity, 229, 230.
41. See Showalter, Female Malady, 128.
42. Allbutt, "Nervous Diseases," 219, 217.
43. Maudsley, Pathology, 30.
46. See Charon, "Great Empty Cup," 116.
47. Stevens, James and Sexuality, 28.
52. Burton, Burdens of History, 45. Burton is quoting, respectively, Mrs. Bamford Slack, Twentieth Annual Report of the Central National Society for Women's Suffrage (1882), and Helen Blackburn, "Comments on the Opposition to Women's Suffrage" (n.d.).
53. Burton, Burdens of History, 47.
55. Bell, Meaning in Henry James, 303, 304.
56. Maudsley, Pathology, 32–33.
57. Ibid., 123, 123, 84.
58. Ibid., 90, 131.
61. Maudsley, Pathology, 37.
62. Blackwell, Moral Education of the Young, 293.
63. Ibid., 237, 289, 292–93.
64. Bland, Banishing the Beast, 68.
66. Bell, Meaning in Henry James, 321.
68. Maudsley, Pathology, 32, 532, 536, 536, 536.