REWRITING THE BODY POLITIC: THE ART OF ILLNESS AND THE PRODUCTION OF DESIRE IN THE DIARIES AND JOURNALS OF ALICE JAMES AND ACHSA SPRAGUE

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REWITING THE BODY POLITIC: THE ART OF ILLNESS AND THE PRODUCTION OF DESIRE IN THE DIARIES AND JOURNALS OF ALICE JAMES AND ACHSA SPRAGUE

BY

SUSAN GRANT

A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN ENGLISH

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ABSTRACT

The term "invalid," in its usage as a label for women who occupy the space of the "sick" bed, functions to reify socio-political apparatuses which inscribe pain onto the female body, diminish the value of the feminine, and reproduce oppression vis-à-vis gender. This thesis critiques languages and ideologies used by doctors and editors/critics, as well as those used by nineteenth-century diarists Alice James and Achsa Sprague. This project examines the plurality of voices reflecting and projecting discourses that are now in conflict, now at plateau. Specifically, this thesis studies strategies used by James and Sprague to reclaim voice through inverting and/or contesting nineteenth-century socio-political languages depicting medical, religious, political, and domestic ideologies. Central to this project is an awareness of factors which inform the "sick" bed as a non-neutral space of economic production and exchange. Because Sprague and James both resisted the domestic roles of wife and mother, and because both endured prolonged confinements to the "sick" bed, their diaries are especially important documents for studying language, gender, and productivity in nineteenth-century American culture. This thesis participates in the ongoing efforts to re-validate discourses by women which have previously been "invalidated" by master narrators and narratives.
ACKNOWLEDGEMENT

The work contained herein is a by-product of my own mem-wars, but also of the events unfolding in world history in the year nineteen-hundred and ninety-three. I want to express my deepest gratitude to Mary Cappello, my thesis advisor, for sharing her visions and languages, making this project possible.

I want to thank my husband, Steve Grant, for his never-ending patience and his willingness to dance with me in the margins; my sons, Andy and Jon Grant who guide my vision and share my nervous laughter; my parents Ron Harvey and Joanne Harvey for their honesty and perseverance.

I especially want to thank Dana Shugar, Judith Anderson and Marjorie Keller for serving on my oral defense committee, as well as the graduate faculty and students of the University of Rhode Island for their encouragement and support. Paul Carnahan at the Vermont Historical Society, Jeffrey Marshall at the University of Vermont, Ted Graham in Lawrenceville, New Jersey, and Sheryl Kujawa in New York have contributed their time and energy to the ongoing search for the diaries and journals of Achsa Sprague, and I thank them for their cooperation.

Finally, I want to thank Alice James and Achsa Sprague for their courage to challenge centuries of assumptions informing genderized pain, and leaving documentations of their mem-wars.
PREFACE

It is my goal in this project to participate in rereading the epistemologies of gender and illness as they function in the autobiographical writings of Alice James and Achsa Sprague. By looking for “art,” subversive resistance to nineteenth-century constructs of “illness,” I center the dialectics of this project on the problematics of reading autobiography written by “sick” women as the bi-product of cultural war(s) and/or body politics. I emphasize the duality of production to challenge a linear analysis of economics and to clarify that the margin can function as an alternative space for alternative products under a system of centralized authority.

In this study of illness, gender, and autobiography, I examine the space of the “sick” bed as non-neutral, a premise which serves to expose specific tensions involving control of the female body. I use the diary and journal of Achsa Sprague, and the diary of Alice James as documentations of struggles for agency, voice and health.

To narrow the breadth of this study, I have divided the project into three chapters. Chapter one brings together different theorists whose work I use to argue that the space of the “sick” bed and woman-as-patient, as depicted in these autobiographies, are products of what Teresa de Lauretis calls “the technologies of gender.” In this chapter, I focus on an historiographical reading of nineteenth-century medical discourses and their relationship to the female body.

Chapter two is a study of the nineteenth-century diary written by Alice James, as well as the study of three twentieth-century writers who have critiqued the diary. In this chapter I apply the theories argued in chapter one, exposing how editorial subjectivity has participated in negating and eclipsing the voice of Alice James, and how psychoanalytic theory can participate in the production of
woman-as-patient.

Chapter three introduces the diary(s) and journal(s) of Achsa Sprague to a close reading of body politics. In this chapter I again critique editorial participation in the silencing of voices of women, adding an analysis of Sprague’s use of autobiography as means to escape from the space of the “sick” bed, into the spaces occupied by social reformer, or as Achsa Sprague herself wrote, “Public Speaking Medium.”

Throughout this project I play with syntax to accent specific semantics essential to understanding how language usage participates in socio-political struggles. Words such as “re-production” and “re-cognition” emphasize the repetition of the verb, which allows for an evaluation of language and social conditioning vis-à-vis gender and economics.

Finally, I’ve deliberately chosen not to include a glossary of “feminist” terminology for two reasons. First, this project encourages, and is dependent on a fluidity of language and a freedom of expression which resists formal definition. And second, I hope to have provided a clear understanding of my use of specific terminologies within the context of the paper.
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CHAPTER ONE

Introduction

Voices of women are rising from the past to demand a hearing at the trials which previously denied, rejected, or eclipsed their defenses. The ongoing re-cognition of texts written by women during political shifts occurring in American culture is realizing the politics of gender. This recognition of gender differences exposes operatives of hierarchies which systematically "grade" the identity of the "universal self" in accordance with "man's" definition of an "other."¹

While some historical records have acknowledged women contesting their position(s) within these hierarchies, other women and marginalized peoples have been ignored or misinterpreted. Cultural studies/feminist studies has provided many of the tools necessary for re-evaluating the cultural contributions of women by imagining "a location where the new politics of difference--racial, sexual, cultural, transnational--can combine and be articulated in all their dazzling plurality."² As part of this re-membering of American culture, this thesis focuses on autobiography, gender and nineteenth-century constructs of medicine.

¹Many theoretical works have focused on an understanding of hierarchies and patriarchal values over the last 25 years. Two specific works which discuss these factors include Shoshana Felman's essay, "Women and Madness: The Critical Phallacy," and Kaja Silverman's book, The Subject of Semiotics.

Semiotics and Space

In her essay, “Women and Madness: The Critical Phallacy,” Shoshana Felman explains how political binaries in Western theoretics have functioned to create “a presence-to-itself of a center” which serves to “centralize the world through the authority of its self-presence and subordinates to itself, in an agonistic, hierarchical manner, all the other cognizable elements of the same epistemological (or ontological) system.” ³ Felman’s analysis of the structure of patriarchal culture not only reveals the oppressive details of hierarchical constructs, but also the logical fallacies inherent in the domineering system. Felman exposes these fallacies by adopting and critiquing the theories of Luce Irigaray—specifically Irigaray’s description of patriarchy as a system containing “a latent design to exclude the woman from the production of speech, since the woman, and the Other as such, are philosophically subjugated to the logical principle of Identity.”⁴ Following this summation, Felman asks the question, “if ‘the woman’ is precisely the Other of any conceivable Western theoretical locus of speech, how can the woman as such be speaking in this book?”⁵ Although Felman’s question is posited within the binary of women/men, it centers feminist theory on the debate concerning locus of agency.⁶ The space Felman created by contesting patriarchal structure allows for a critique of monolithic discourses through which new questions can be asked, new voices heard. Felman’s criticism also functions as a leveler of power imbalances,

⁴Felman, 3.
⁵Felman, 3.
⁶In this project I use “agency” as a means of locating and tracing the applications of, and resistances to, different kinds of power.
as well as an acknowledger of marginal agency. It is within an understanding of spaces such as those emerging through Felman's criticism of non-neutrality, that I will examine the contextuality of gender, illness, and autobiography in nineteenth-century America.

In theorizing autobiography and illness vis-à-vis gender, an understanding of the concept of “space” as an evolving entity is essential. While Felman's critique of Irigaray's supposition creates space(s) for alternative dialogue(s), it is important to emphasize how the general production of space can serve multiple functions. This fluctuation of space operates not only within the always already hierarchies of oppression, but specifically within hierarchical cultural structures obsessed with consumption, dependent on a production and exchange of goods and services. 7 In trying to bridge the concepts of autobiography, illness, gender, space and production, it is beneficial to refer to the work of Jody Berland as she theorizes “space” in its relation to music, media, and technology.

In her essay, “Angels Dancing: Cultural Technologies and the Production of Space,” Berland states her objective as conceiving /imagining music spatially, without meaning or text, “in relation to the changing production of spaces for listeners, and thus as an extension of the changing technologies that follow or draw their subjects into these spaces.” 8 To adapt this theory for the purpose of understanding space and its relation to autobiography, illness, production and gender, a clarification of media and ideology is necessary. Although literature as cultural product cannot be theorized “without meaning or text,” literature can be posited within a theory based on a changing market place, demonstrating literature’s function within what Berland describes as “the changing

7 In my use of “always already,” I mean an understanding of a theoretical assumption as concrete/static rather than fluid/active.

technologies that follow or draw their subjects into these spaces." Just as Felman notes the importance of questioning agency of voice when studying gender differences in literature, Berland contributes the concepts of evolving and potential "markets," and/or "audiences." The necessity of this distinction, according to Berland, is "to situate cultural forms within the production and reproduction of capitalistic spatiality."⁹

By coupling the semantic points of arbitration of both Berland and Felman, a discourse on questions central to an understanding of "agency" evolves. While Berland's "technology" is to music, as Felman's "voice" is to literature, both binaries situate the subject within a fluctuation of capitalistic space. Just as Berland stresses the importance of understanding the space posited between technology and audience as a site of production of music, so emanates the importance of understanding the space posited between language (voice) and literature (text) also as a site of production. If the female body inhabits the space or site of production, then the tensions and dynamics operating within these spaces elicit questions concerning theorizations of "producer" and "consumer." For example, how does a socio-political system based on capitalism allow/demand intermittent/cyclical role reversals for the subject, and/or the expansion/contraction of socio-political bodies/spaces?

To explore questions central to debates on theories of production, I return to Berland and her argument of closed-system production. To defend this argument, Berland cites recent Canadian suppositions which explore spatio-temporal relations. "Its legacy," states Berland,

might be to insist that the production of texts cannot be conceived outside of the production of diverse and

⁹Berland, 38.
exacting spaces: that much of the time we are not simply listeners to sound or watchers of images, but occupants of spaces for listening who, by being there, help to produce definite meanings and effects.”

The goal, then, for this study, is to examine the roles of doctor and patient as non-neutral participant(s)/audiences in the production of signs and significations. While Western theoretical discourses such as those utilized by differing religious and governmental institutions have instigated and defended a social philosophy supporting a separation between the power binaries of production and consumption (as well as related power factors such as class, race and gender), current theories such as those being conceptualized by Berland and Felman expose the tensions, fallacies and social injustices created by such monolithic thinking.

In *The Subject of Semiotics*, Kaja Silverman challenges Western myths of neutrality and universality by contesting the binaries of man/environment as she traces these oppositions to the Renaissance and the work of René Descartes. Silverman isolates specific semiotic connotations which contribute to Descartes’s conceptualization of an “individual” as a person who demonstrates “private consciousness... a cognitive operation which believes itself to be both independent and authentic for all time.”

As Silverman elaborates her critique, she exposes an exclusiveness in Descartes’s logic: “the attribution of individuality or privacy to this consciousness suggests that man’s thinking processes are in no way coerced either by the material world or by the thoughts of other men [and women]; he is understood to be a free intellectual agent, except insofar as a greater mind--like God’s--impinges upon him.”

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Berland, 39. Also see Berland’s summary of the work of Canadian economic historian and communication theorist, Harold Innis.

lone existence premise in Descartes's logic perpetuates hierarchies of power, economics, subjectivity, and gender. Whether theorized independently of each other, or collectively, these hierarchies reproduce monolithic subjectivity, privileging "man" over "woman," "white" over "black," and "rich" over "poor."

If space can be theorized as non-neutral, then the products of different spaces can be theorized through an examination of the differing cultural factors that flow in and out of these spaces. In the introduction to Technologies of Gender: Essays on Theory, Film, and Fiction, de Lauretis explains the "space-off" concept as used in avant-garde cinema. In this context, "space-off" exists concurrently and alongside the represented space, [and the avant-garde cinema] has made it visible by remarking its absence in the frame or in the succession of frames, and has shown it to include not only the camera (the point of articulation and perspective from which the image is constructed) but also the spectator (the point where the image is received, re-constructed, and re-produced in/as subjectivity).¹³

De Lauretis's logic supports a move away from a Western theoretics which constructs all spaces as "universal," "God-given," or "neutral," toward a theoretical construction which reveals multiple spaces occupied by power hierarchies interacting with one another. In theorizing how nineteenth-century medical expectations for women may have participated in "producing" a "sick" woman, the space-off analogy can situate medicine and gender in a "sex-gender system [which] is always intimately interconnected with political and economic factors in each society."¹⁴

¹²Silverman, 126.
accomplishes politically through exposing the fallacy of spatial neutrality, in addition to economic motivation, is nothing less than a re-production of marginal space(s) theorized with a conscious acknowledgement of void/non-sense, thus reversing the patriarchal myth of women’s knowledges as lacking subjective agency/meaning.

Although de Lauretis acknowledges a margin and center, she cites specific problematics in theorizing gender within binaries such as woman/man, or patient/doctor. These oppositional binaries, which are a primary premise of Western patriarchy, formulate/produce/re-produce the feminine within the conceptual framework of what de Lauretis calls the “dominant cultural discourses and their underlying ‘master narratives’—be they biological, medical, legal, philosophical, or literary.” The result, concludes de Lauretis, is that this “master narrative... will tend to reproduce itself, to retextualize itself... even in feminist rewriting of cultural narratives.” Although the question of reifying the patriarchy in feminist discourse is necessary for a close analysis of patterns of cultural change, I will use this question as a tool to examine the functionality of the languages of patient and doctor, editor/critic and author as they participate in the re-production of gendered bodies and gendered texts.

14 de Lauretis, 5.
15 de Lauretis, 1.
16 de Lauretis, 1-2.
Language, Gender and Power

In their study of scientific discourses, feminist theoreticians have located a paradigm shift linking priest/church as oppressor, to doctor/medicine as oppressor. This nineteenth-century manifestation of passing the woman from one paternal arm to another, is an extension of the colonial construct of nature as feminine: abundant, exploitable, procreative. One major barrier for feminist theorists, as stated in the introduction to *Body/Politics: Women and the Discourses of Science*, is that “the field of nature turns out to have been colonized already; language has always been there before us.” This barrier can be understood as a political tool when viewed within the context of struggle over agency. In the nineteenth century, the languages of religion and science paralleled each other in the re-production of specific social roles for women, thus functioning as dual inscribers/producers of gender.

In her essay, “Immaculate Conceptions and Feminine Desire,” Mary Jacobus explores how Catholicism constructs woman as the maternal, a sign which exists outside language. Citing Julia Kristeva’s work on the cult of the Virgin Mary, Jacobus notes that the “maternal” is “an identity catastrophe that causes the Name to topple over into the unnameable that one imagines as femininity, non-language or body.” Jacobus continues, “In Marian iconography, milk and tears become ‘the metaphors of non-speech, of a ‘semiotics’ that linguistic communication does not account for.’” Power is distributed in the religious oppression of women.

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19 Jacobus cites *The Kristeva Reader*, edited by Toril Moi.
through a re-production of the icon of the reticent Virgin Mary. In silence, in solitude, woman is to serve and suffer for man.

Within scientific discourse, medicine likewise functions to define women as passive, weak creatures of nature. According to Barbara Ehrenreich and Deirdre English, this conceptualization of women seemed to feed the growing industry of medicine:

The association of TB with innate feminine weakness was strengthened by the fact that TB is accompanied by an erratic emotional pattern in which a person may behave sometimes frenetically, sometimes morbidly. The behavior characteristic for the disease fit expectations about woman’s personality, and the look of the disease suited—and perhaps helped to create—the prevailing standard of female beauty. 21

Women were identified not only as the image of the product of bacterial infections such as TB, women were also conceptualized as inherently sick due to anatomical difference. According to Ehrenreich and English,

Puberty was seen as a ‘crisis’... Menstruation... was regarded as pathological throughout a woman’s life... a pregnant woman was ‘indisposed’... doctors campaigned against the practice of midwifery on the grounds that pregnancy was a disease and demanded the care of a doctor. Menopause was the final, incurable ill, ‘the death of the woman in the woman.’22

For the purpose of understanding how the language and ideology of medicine functioned in the production of woman-as-patient, it is

20 Jacobus, 21.
22 Ehrenreich, 20-21.
important to note the hierarchies of this medical epistemology. Nineteenth-century medicine did not exist primarily to acknowledge/embrace difference. Medicine functioned for the purpose of creating/establishing hierarchies of social order. Within the jargon of medical terminology, doctors developed gradations for "strength," "morality," "desire," and "(re)productivity." Ultimately, medicine functioned to defend and promote a social order privileging white middle and upper-class males.

As medical discourses developed, so developed a "scientific" postulation which "produced" a "woman" whose desires could be controlled by scientifically theorizing a feminine body whose uterus was connected to her central nervous system. As reported by Carroll Smith-Rosenberg and Charles Rosenberg,

shocks to the nervous system might alter the reproductive cycle--might even mark the gestating fetus--while changes in the reproductive cycle shaped emotional states. This intimate and hypothetical link between ovaries, uterus, and nervous system was the logical basis for the 'reflex irritation' model of disease causation so popular in middle and late nineteenth-century medical texts and monographs on psychiatry and gynecology."23

Modern feminism cites repressed anger and confining social roles as contributing to the development of various "nervous" conditions of female patients. It was through the nineteenth-century medical assumption that the uterus and the central nervous system were connected that "treatments" for women's "health" were "produced" and "distributed." What I postulate, given the combined theoretics of space, language and production, is that

through the development of medical discourse, science was able to restrict women to the same socio-political space that religion had produced when it perpetrated the Virgin Mary icon. Thus, woman-as-patient functions politically the same way woman-as-Virgin Mother functions politically--woman remains a passive creature whose purpose is to serve and reproduce man’s kind of thinking.
Reproduction, Gender and Desire

While I have discussed how medicine has functioned to maintain a system of oppression shared with organized religion, I would like to expand on the socio-political function of medicine through an examination of the construction of gendered desire. In her essay “Speaking of the Body: Mid Victorian Constructions of Female Desire,” Mary Poovey researches prostitution in nineteenth-century England. “The first British analysts of prostitution were either doctors or laymen influenced by Evangelicalism or journalists interested in mapping the previously undifferentiated mass of the laboring and indigent poor.”24 According to Poovey, the political motivation behind the examination of prostitution in Victorian cultures was fueled by religious moralism, but functioned specifically to defend the economic prosperity of the middle class.

For women, the emerging social structure being informed/produced by church and medicine prescribed social characteristics such as asexuality, self-sacrifice, and passivity. Ehrenreich and English support Poovey’s research by revealing how science and medical ideology were used in America to bar women from medical school, from higher education, and from voting.25 As Complaints and Disorders notes, “Medical arguments seemed to take the malice out of sexual oppression: when you prevented a woman from doing anything active or interesting, you were only doing this for her own good.”26 The economic operative in the production of gender vis-à-vis medicine should not be viewed lightly. As capitalism began to flourish with the inventions of “labor saving devices,” so rose the monetary stakes involved in “production.” In

25 Ehrenreich, 22.
26 Ehrenreich, 22.
the framework of gendered medicine, economics helped perpetuate the myth of female frailty, thus serving two purposes. Doctors were able to disqualify women as healers, while at the same time making women highly qualified as patients.27

As medicine “treated” women’s desires for equal education, safe employment, and control of their own reproductive systems by pronouncing them “ill,” the erotic desire, especially if produced through masturbation, was diagnosed as a “particularly vicious character defect that lead to physical damage.”28 “Sex,” was described within medical jargon as a means of “developing women’s reproductive powers, their maternal instincts, their ‘femininity.’”29 Female sexuality had no “natural” form, and relied on intercourse/penetration for inducing and controlling “desire” in “woman.” In their efforts to control women and desire, doctors used their socio-politically produced power to justify exploration of and experimentation on the female body. By denying any innate sexual desire in women, doctors created a scenario of privilege which located desire, as well as agency of desire, outside the woman’s body.

While [doctors] denied the existence of female sexuality as vigorously as any other men of their times, they were always on the lookout for it. Medically, this vigilance was justified by the idea that female sexuality could only be pathological. So it was only natural for some doctors to test for it by stroking the breasts or the clitoris.30

27 Ehrenreich, 23.
28 Ehrenreich, 30.
29 Ehrenreich, 30-31.
30 Ehrenreich, 31.
Treatments for containing "desire(s)," included doctors placing leeches on the "external lips [of the genitals], a few days before the period is expected" to cure amenorrhea, (chronic lack of menstrual periods).31 Leeches were also placed on the breasts because of an assumed correlation between the breasts and genitals. "In some cases leeches were even applied to the cervix despite the danger of their occasional loss in the uterus."32

As feminist research has revealed, "medicine" functioned as a means of enabling "doctors" to restrict women to specific social roles. This restriction of behavior (as well as access, status and true "health") was specifically used to treat a wide variety of symptoms diagnosed as "nervous disorders." Not unlike a penal system used to constrain "criminals," the medical system functioned to constrain and "condition" women for their prescribed roles in society. While the doctors exerted physical and ideological control over the bodies of their female patients, the effects of such systemic control included increased dependence(s) on men. Money exchanged between husband and doctor, combined with the "luxury" of leisure, functioned to create the social space and economic conditions which produced woman-as-patient.

While upper-class women were more likely to live within these social and economic constraints, working-class women had neither the money nor the leisure time for bed-rest treatments. Their sufferings were often the result of unsanitary and hazardous work spaces. As women social reformers searched for ways to intervene in the welfare of the poor, they were met with double standards from the medical community. When asked for contraceptive information for poor women, Emma Goldman, a trained midwife and an anarchist leader, was told that "The poor have only

31 Ehrenreich, 33.
32 For further detail on specific "treatments" such as clitorectomies and ovariotomies, see Complaints and Disorders, 34-36.
themselves to blame; they indulge their appetites too much,” and, “When she uses her brains more, her procreative organs will function less.” According to the “scientific” method, “women,” as a totality, were to serve as reproducers of man-kind, yet middle and upper-class women were to be spared the burden of their husband’s uncontrollable lust, thus justifying prostitution and sexual aggression against black women. Middle and upper-class women were “medicated” for wanting to use their brain—an act which science warned might endanger their reproductive apparati and threaten their prescribed re-productive social role. Working class women, on the other hand, need only exert a will-power, a self-control, a self-determined intelligence, and thus their “pains” would be “cured.” Doctors/scientists determined that for working-class women “actual physical reproductive problems and diseases, including cancer, could be traced to bad habits and attitudes.” As Complaints and Disorders shows, the hegemony pitted the middle and upper classes against the working class in the scramble for locating the “source” of illness(es.) While the medical structure gained socio-political “status,” “woman” was being produced as either “sick” or “sickening,” depending on their economic status.

These “health” standards for women proscribed and inscribed a narrow definition of desire based on a patriarchal construct of gender. The methodologies used to enforce these inscriptions were established through a gendered theoretics of “natural law” labeled “conservation of energy.” Under this law, the “energy” of each person was analyzed according to gender. Within this context of (re)production, men’s reproductivity privileged the intellect, while women’s reproductivity privileged the body. Therefore, doctors’

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33 Ehrenreich, 48.
34 Ehrenreich, 30.
35 Ehrenreich, 30.
36 Ehrenreich, 27.
diagnoses and prescriptions were based on the assumption that "women ought to concentrate their physical energy internally, toward the womb." 37 Ehrenreich and English explain how the uterus became the heart of the woman, and all prescriptions signified the uterus as site of reproduction: "In The Diseases of Women (1849), Dr. F. Hollick wrote: 'The Uterus, it must be remembered, is the controlling organ in the female body, being the most excitable of all, and so intimately connected, by the ramifications of its numerous nerves, with every other part.'" 38

As scientific discourse centered its prescriptions around an understanding of the uterus as the locus of female health, the relationship between woman as patient/reproducer and man as doctor/technical operator began to develop into what is now known as psychoanalysis. By 1870, a clear "medical" link had been made between the ovaries and the mind: "all woman's 'natural' characteristics were directed from the ovaries, and any abnormalities—from irritability to insanity—could be attributed to some ovarian disease." 39

The study of the rise of psychoanalysis from this juncture in social history is an important factor in understanding technologies of gender and the implications affecting women and the differing spaces they occupied. As medical discourse developed and the doctor/patient relationship grew in dimensions of dependency, the resistance of woman against accepting the role of patient manifested itself in the lives of many middle and upper-class women in the form of what is now labeled “hysteria.” Hysteria was defined by a culmination of symptoms which had no discernible organic basis, and was totally resistant to medical treatment. 40

37 Ehrenreich, 27.
38 Ehrenreich, 29.
39 Ehrenreich, 30.
40 Smith-Rosenberg, Carroll and Charles Rosenberg. Disorderly Conduct;
This is important to remember, given the context of science, production, and gender. While doctors operated (physically and ideologically) from the assumption that a woman's uterus was linked to her nervous system, a need arose to label the "illness" for the purpose of treatment. In selecting a term to "classify" this illness, doctors chose the Greek word for womb -- "hustera."

While doctors were developing a "scientific," secret, codifying system for classifying social subjects, some women, in the guise of hysterics, were rejecting the classification and challenging the system. "Hysteria put the doctors on the spot. It was essential to their professional self-esteem either to find an organic basis for the disease, and cure it, or to expose it as a clever charade." The problematic of this form of contestation is two-fold for feminists. First, hysterics risked the consequence of "failing" to break the language structure which constrained them, thus being transported from the "sick bed," only to be reincarcerated in the attic or asylum. In this scenario, hysteria functions as mimicries of the somatizations of the women patients whose historical performances were lost to themselves and recuperated into the medical science and medical discourse which maintain their oppressive hold on women.

In the second scenario, the hysterics creates an alternative space which exists despite the imbalance of social powers. In this situation, the female body is used as a distancing devise, to create distance between the oppressed and the oppressor. Luce Irigaray explains the process through which the hysterics contests and begins...


41 Ehrenreich, 40.
to invert the power structure: "To play with mimesis is thus, for a woman, to try to recover the place of her exploitation by discourse, without allowing herself simply to be reduced to it."43 According to Irigaray, hysteria functions as an "unveiling" of "a possible operation of the feminine in language."44 This same transition occurring in/through the body of the hysterical could be posited within a space described by Julia Kristeva as "a place where meaning collapses."45 While Kristeva qualifies this statement by describing this space as "the edge of non-existence and hallucination," it is important to clarify that the "non-existence" is a denial of existence as existence is constructed by the dominant language structure. With the female body as the site of the struggle, the body of the hysterical inhabits a space in which gender is inscribed vis-à-vis medical doctrine/discourse.

Although most women living in the latter half of the nineteenth century were exposed either directly or indirectly to medical discourse, it is important to understand that factors such as class and race, functioned differently for different women. It is not my intention to suggest that all women suffered equally under the changing medical system, or that all doctors accepted every assumption affecting the developing medical discourse. Instead, what I hope to establish is an understanding that from its inception the medical system, as organized by the original American Medical Association, functioned politically to oppress all marginal peoples—women, Native Americans, African Americans and Others—through differing systematic classification based on gender, as well as race and class distinctions.

43Irigaray, Luce. This Sex Which Is Not One. (Ithaca: Cornell U Press, 1985), 76.
44Irigaray, 76.
While I have no intention of producing a homogeneous “class” of “sick” women, I find it necessary to examine the developing language and theoretics of medicine for the purpose of differentiating between “responses” to various treatments. I use the word “responses” to focus not on a biological study of diagnoses and treatments, but on a socio-political study of responses to gender inscription. This is an important distinction to make because the conditions which affected white women were different conditions than those affecting other marginalized peoples, and were also different for upper-class women than for working-class women. For the purpose of this project, I will limit this discourse to the conditions of white women, as the texts I will examine in chapters two and three pertain to the social conditions of an upper-class white woman (Alice James), and a working-class white woman (Achsa Sprague.)
Gender Bi-products: “Sick” Autobiography as Art

As medicine became the Father of the Christian Virgin, the development of an alternative language was necessary to maintain the power differentials previously existent in religious discourse. This shifting of power from one language to another changed the identity of the woman from the Virgin Mother to the sick patient, but retained the women’s socio-political status as subservient and submissive. This power shift and re-codification of women’s roles from religious discourse to scientific discourse continued marginalizing women in language. Using Julia Kristeva’s theory of gender and language, Mary Jacobus describes women’s silence as “something extralinguistic and heterogeneous that tends to ‘re-establish what is non-verbal... a signifying disposition that is closer to the so-called primary processes’ or to the unconscious—in other words, a return of the repressed within the symbolic.”46 If the church created woman—in this case the Virgin-Mother—woman—to function silently within a signifying system, the goal of feminism has been to, first, expose the hierarchies of power which reduce woman to silence, second, to create spaces within which woman is able to begin writing and speaking her own language(s), and finally, to acknowledge silence as a means of resistance.

During the nineteenth century, as different scientific and religious theories developed, women, African Americans, Native Americans and working class Americans, began participating in the cult of autobiography. Noting that the histories of this genre have developed differently for each of these marginal groups, the diaries I will focus on in chapters two and three are distinct products of that revolution. In acknowledging the “sick room” as the site of production of the “sick woman,” it is important to examine theories

46 Jacobus, 21-22.
of body language which function to re-cognize the space where bodies reject/contest master narratives, re-producing alternative language(s). In her essay “Female Grotesques: Carnival and Theory,” Mary Russo incorporates details from the work of Russian theorist Mikhail Bakhtin, to develop a narrative on body language. The development of discourses of carnival, according to Russo, “translocate the issues of bodily exposure and containment, disguise and gender masquerade, abjection and marginality, parody and excess, to the field of the social constituted as a symbolic system.”47

By making the private public, carnival serves as a transport of agency from the domestic to the political, from passive to active, from patient to doctor. While carnival can be theorized to encompass almost any form of action by positing it within a political system of signification, for the purposes of this project I am going to narrow the use of carnival to discourses relevant to my thesis proposing illness as art.

Body, voice, gender, language, space and production are operative forms for this discourse. Hysteria, medicine, religion, and socio-political role playing operate in direct relation to the production and re-production of the texts of Alice James and Achsa Sprague. The signification of carnival can be deconstructed, understood and communicated for the purpose of freeing the suppressed voice(s)/language(s) of women. Yet it is important to note that these process(es) are also pluralistic, and that an understanding of risk must be articulated. As Russo writes so eloquently, “In the everyday indicative world, women and their bodies, certain bodies, in certain public framings, in certain public spaces, are always already transgressive--dangerous and in danger.”48

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47 Russo, 214.
48 Russo, 217.
whether posited in a “psychoanalytic” or “scientific” discourse. On the contrary, one of the central aims of this project is to examine how, on entering into discourse/language of a text which was not produced directly by the critic, the critic nonetheless becomes active in the process of re-production, thus vulnerable to participating in reifying the hegemony which inscribes different types of pain. It is with the understanding of the problematics of theorizing “gender(s),” that I will develop a discourse in chapters two and three which exposes re-productions of master narrative(s) as they operate in the editor-as-agent hierarchy established between critic, text, and author.

In Chapter One, part one, I focused on the goal of creating a theoretical structure which challenges Western philosophical hierarchies, exposing a process or series of processes which produce Western “woman.” As I begin to theorize more specifically about the production/re-production of gender, autobiography and illness, I will develop an understanding of the processes which re-produce body as product and autobiography as bi-product.

If we go back to Felman’s inquiry into authenticity, or voice (“who is speaking?”), we find that her question asks not only where the agency is located, but her question also creates spaces for the study of pluralities of voice. This space allows for an examination of the process of re-presentation as posited under a general conceptualization of “creation” as used in evaluations of aesthetics. Spaces emerge for different conceptualizations of “gender(s),” “art(s),” “illness(es),” “autobiography(s),” “production(s),” and “representation(s),” through an understanding of these spaces as non-neutral and interdisciplinary. The concept of pluralities--of voices, of spaces, of genders, of texts, etcetera--is essential to an understanding of production in/at the margin. Pluralities acknowledge not only diversity/difference, but they also offer spaces of discursivity which function to disrupt the
hegemony/patriarchy/center. Thus, in a socio-political order based on production and consumption, the production of pluralities might be understood as bi-products which can divide, duplicate, reject, and/or contest the product/gender. Pluralities of voice can function in the same manner that carnival can function: “The masks and voices of carnival resist, exaggerate, and destabilize the distinctions and boundaries that mark and maintain high culture and organized society.” With the disruption of “organized society,” space has been made for alternatives, for difference.

If carnival can function to disrupt social orders, then it is important to explore “how women have been able to enter discourses from which they have been initially excluded so as to begin to represent themselves,” and “how to read texts that mark the passage of women from objects of another’s discourse to women as subjects of their own.” To develop a discourse examining the processes of critical entry into and interpretation of texts, as well as the processes of self-representation in literature, we must develop a historical perspective of the politico-linguistics and semiotics informing "gender."

In her study of gender, Teresa de Lauretis uses the American Heritage Dictionary of the English Language to research the historical connotations of “genre.” What she notes is significant: 1) that only in the English language is “gender” categorized as a classification of sex (whereas Spanish, Italian and French do not carry connotations of a person’s gender), and 2) that the word “genre” was adopted from French to refer to the specific classification of artistic and literary forms. Using this information, de Lauretis conceptualizes gender as “the product and

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49 Russo, 218.
50 Poovey, 29.
process of a number of social technologies, of techno-social or biomedical apparatus.\textsuperscript{52}

De Lauretis accepts a theorization of subject and ideology as inseparable, but she emphasizes specific factors that must be acknowledged for an understanding of the differences inherent in the processes of “gendering,” as viewed through the English connotations of genre. By siting her theorization of gender within an English connotation, de Lauretis is able to adopt Michel Foucault’s theorization of the “technology of sex,” as defined in \textit{History of Sexuality}, Vol. 1. Specifically Foucault outlines the following technologies pertinent to a study of gender production:

* that the “technologies of sex” are “a set of techniques for maximizing life,”\textsuperscript{53}

* that these “techniques” were “developed and deployed by the bourgeoisie since the end of the eighteenth century in order to ensure its class survival and continued hegemony.”\textsuperscript{54}

* that these techniques “involved the elaboration of discourses (classification, measurements, evaluation, etc.) about four privileged ‘figures’ or objects of knowledge: the sexualization of children and of the female body, the control of procreation, and the psychiatrization of anomalous sexual behavior as perversion.”

* that these discourses were “implemented through pedagogy, medicine, demography, and economics,”

* that these discourses were “anchored or supported by the institutions of the state, and became especially focused on the family,”

* that these discourses served to “disseminate and to

\textsuperscript{52} de Lauretis, 3.


\textsuperscript{54} These are de Lauretis’s words, summarizing Foucault’s analysis of gender production.
‘implant’... those figures and modes of knowledge into each individual, family, and institution.”

Having outlined details of changing technologies of gender, it is now possible to ask, how do resistances to these constructs of illness and gender inform art? As I explore the art of Alice James and Achsa Sprague, I will emphasize the moments of tension and struggle which function to contest, invert, or dissolve hierarchies within socio-political institutions such as medicine.

To focus on the process and operatives informing art, illness, and gender, I return to the work of Kaja Silverman to question subjectivity and production, and explore the implications of agency, voice and medicine. “Subjectivity,” explains Silverman, “marks a radical departure from this philosophical tradition [of the individual] by giving a more central place to the unconscious and to cultural overdetermination than it does to consciousness.”

By positing the “subject” within the binaries of the unconscious and cultural overdetermination, Silverman is able to expose many problematics of “individualistic thinking.” First, the “individual” is no longer located outside a construct of society, thus the “doctor” can be “examined,” and the “patient” can “see.” Second, the unconscious is posited within the framework of overdetermination, thus freeing it from the confines of the oppressive “determination” of the “individual.” As overdetermination functions within an understanding of flux of agency, it creates spaces for questioning, resisting, acting, speaking, and writing. Most pertinent to Silverman’s deconstruction of “individual” is an understanding that “meaning emerges from the play of differences within a closed system.”

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55 de Lauretis, 12.
56 Silverman, 126.
57 Silverman, 128.
as the product of signifying activities which are both culturally specific and generally unconscious." Thus, the unconscious, as a collection of repressions, emerges somewhere within the binaries of sameness and difference.

If autobiographical texts written by women are products of a culmination of daily productivities and observations which exist due to socio-political interactions, then the body and the sickroom serve as ways and means for production—as vessels/inscribers of production, thus an alternative closed system. Autobiographies which are produced in the space of the sick room can be understood as products of a process within which the agency of the subject shifts between public/external control, and self/internal control. This process of production incorporates agency, body and text, thus creating a subversive body politic at work within a larger political structure.

In her book, *A Poetics of Women’s Autobiography: Marginality and the Fictions of Self-Representation*, Sidonie Smith distinguishes between a theoretics which critiques autobiography within a “normative, historical” perspective, and a feminist critique of autobiography which challenges that patriarchal notions of women’s inherent nature and consequent social role have denied or severely proscribed her access to the public space; and male distrust and consequent repression of female speech have either condemned her to public silence or profoundly contaminated her relationship to the pen as an instrument of power.59

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58 Silverman, 130.

Also in opposition to a “historical” theorization of autobiography, Shari Benstock, in the introduction to *The Private Self: Theory and Practice of Women’s Autobiographical Writing*, defends a premise of theorizing autobiography which proposes that “Writing that works the borders of definitional boundaries bears witness both to repressive inscription under the law of genre and to the freedom and dispossession of existence outside the law.”\(^{60}\) A theoretics of autobiography, then, must acknowledge that “womens’ texts lie outside the dominant culture’s boundaries in a spatial, experiential, and metaphysical ‘no-man’s land.’”\(^{61}\)

Yet the conflict between oppression and expression, between feminine in-visibility and masculine visibility, is a “rebellious pursuit” which is potentially catastrophic. “To call attention to her distinctiveness is to become ‘unfeminine.’ To take a voice and to authorize a public life are to risk loss of reputation.”\(^{62}\) Yet as we dance through the minefield, we must develop an understanding of “reputation” which would function as ammunition for self-defense. A “loss of reputation,” as constructed within a patriarchal language is the loss of a “self” quite different somatically and psychologically from the loss of a “self” constructed by a series of unconscious/conscious revolutions exerted against a proscribed identity. While both “losses” posit their respective “selves” in theoretically real spaces of vulnerability or danger, the self, constructed unconsciously or consciously, will have acquired during the revolution, a unique/specific structure of defenses. This “different” defense structure will serve to delineate the two selves from each other, thus separating two ideologies from each other. By deconstructing a monolithic ideology subjugating women (as well


\(^{61}\) Smith, 9.

\(^{62}\) Smith, 10.
as various other Others), the autobiographies written by women occupying the space of the sick bed exist as bi-products of the dominant ideology.

The diaries and journals of Alice James and Achsa Sprague, function within the socio-political culture of nineteenth-century America as distinct texts documenting important cultural phenomenon pertinent to American studies. These diaries and journals serve as a distinct chronicle of the institutionalization of medicine and its participation in the production of woman-as-patient. Yet the sick room as the cite of production functions specifically as space at the margin of social order, a space produced by, yet removed from the center. A space for distance and observation, for reporting and documenting. Although I chose the diaries/journals of James and Sprague for this project due to their “autobiographical” “genre,” I also chose these specific autobiographies because they exhibited an additional criterion: the texts originated in the space of the “sick room,” enabling/inducing the authors to construct discourses central to the theoretics of medicine and gender. The results, in the autobiographies of Alice James and Achsa Sprague, are texts which document struggles against oppression, revealing the strategies and resources, wars and peaces of each woman as she actively participated in the production of gender.
CHAPTER TWO

Alice James: Conning the Masters

In literary analyses of The Diary of Alice James, critics have consistently evaluated the text through an understanding of the sick-bed as an always already failed site of production. Although many critics have contested specific assumptions of health/illness in nineteenth-century politics, critics of the Alice James text have failed to challenge the construction of “health” to a degree which illuminates the voice of Alice James. This is not to say that critics have not progressed significantly against an ideology that marginalizes women. But rather than summarize these progressions, the focus of this chapter will be on specific literary analyses that participate in silencing woman’s subjectivity, thus the voice of Alice James.

In their introduction to De/Colonizing the Subject: The Politics of Gender in Women’s Autobiography, Sidonie Smith and Julie Watson propose that autobiography by women functions as “a medium of resistance and counter discourse, the legitimate space for producing that excess which throws doubt on the coherence and power of an exclusive historiography.”63 It is from this premise that I will critique the editor-as-agent, the editor’s participation in silencing the voice of Alice James.

Before I begin to inform my reading of “voice” in Alice James diary, I will critique her opening diary entry by examining points of tension within the passage. I focus on these tensions for the purpose of challenging assumptions held by critics/editors, that Alice James was in an eternal state of bereavement, or that she was obsessed with self-immolation. Alice James begins her diary by

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stating that she intends to develop a “habit of writing” about “what happens,” but then she re-writes the thought to focus on “what doesn’t happen.” This first of many re-writes directs the work toward a space/place which seems at first both vague and lacking, yet results in a re-sounding of Alice’s voice. By evaluating the progression of tensions in the entry as a whole, a dialogic dance can be revealed, in which Alice disguises her strategy for liberation/authority through in-visibility of the author/agent. In so doing, she disappears in order to say what she could not say if she were socially visible.

Alice opens the passage, thus the diary, with a reference to the “circumstances” which inform the “style” (the ejaculation of one-syllabled reflections) of the diary.64 Yet the author’s reference to these unlisted circumstances serves to inform the agency of the text: “a written monologue by that most interesting of beings, myself.” A vague reference to a plot follows: [a written monologue, by that most interesting of beings, myself,] “may have its yet to be discovered consolations.”65 This vagueness in describing circumstances and plot creates space for difference without reifying a dominant narrative.

The narrator, “I,” is authoring itself or re-creating itself within the space of the subjective, protective diary. The subversiveness of the “plot” can be recognized through an analysis of the author’s terms, “discovered” and “consolations.” In the Random House College Dictionary, “consolation” is defined as “the attempt to lessen grief, sorrow, or disappointment.”66 Although

64 James, Alice. IN Edel, Leon, ed. The Diary of Alice James. (New York: Penguin Books Ltd., 1987). All spelling, punctuation and emphasis in quotations are reproduced as they are in the 1987 edition of The Diary of Alice James, unless otherwise noted.

65 Alice James, May 31, 1889.

the diary has been critiqued from this perspective, it is essential to look more closely at connotations that go beyond a psychoanalytical reading of suppressed grief and sorrow. "Consolation" is linguistically related to the word, "consolidate," which is defined as "to bring together (separate parts) into a single whole." Yet used within the context of legal dialogue, it can mean "the union of two or more claims or actions at law for trial or appeal." The theme of transgressing legalities--written or unwritten--dominates the diary. It is this theme that structures the content, style, tone, and voice in Alice's diary.

While the definition of "consolation" emphasizes the "solace" of comforting misfortune or sorrow, the "con" can be understood as a signifier of opposition. This "conning" may take the form of a private investigator (carefully examining boundaries between public and private), a Captain (to con a ship), an attorney (intent on convicting), or a doctor (able to diagnose illnesses and prescribe means for wellness). These subversive linguistic forces at play in "consolation" function throughout the text to reveal, contest, and invert the yet to be dis-covered con-solace-tions, as Alice re-writes the mem-wars of her life. Consciously or not, Alice James has established the tone of the diary through a plurality of voices--sometimes in conflict with each other, sometimes in conflict with visible and invisible Others. This tone allows her to consistently claim a subjective privilege under social/political/psychological condition[ing]s that attempted to negate feminine authority. I will use this tone and agency to establish what I feel is the "voice" of Alice James, and to challenge the assumptions of Leon Edel, Jean Strouse and Ruth Yeazell in their critiques of The Diary of Alice James.

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this dictionary.
Edel-as-Agent

Although the diary, as published, begins May 31st, 1889, Alice began journaling in 1887. In the introduction to the diary, Leon Edel mentions these journals as "commonbooks" which were "filled with the words of famous writers," which "seem to speak for Alice." A closer analysis of the significance of the commonbooks documents Alice's search for literary models... a search which traces the author's pre-diary readings and acknowledges her efforts to shape public and private identities against social constructs that attempted to negate or eclipse feminine subjectivity. Alice's critique of literature as documented in two years of commonbooks would offer significant insight for understanding what informs the "margins," or the "space-off" of what has been critiqued as the only literary text produced by Alice James. This omission of pre-diary text is disturbing for two reasons: first, it diminishes key indicators of the process of self-affirmation/self-determination. As Alice critiqued texts, she analyzed assumptions informing these texts. This process of textual analysis informs the developing voice of Alice James. The second reason this omission of the commonbooks in the publication of the diary is disturbing, is that the lines drawn by Edel between the diary, as publishable, and the commonbooks as unpublished, reify patriarchal assumptions informing public and private. This analysis would turn Alice James's book into a strictly private affair. While men's diaries have often been used to collaborate "historical truths," women's diaries have not only been omitted from the process of historiography, they

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67 This information is extracted from Edel's introductory biography prefacing the published manuscripts of Alice James.

68 Ruth Yeazell's The Death and Letters of Alice James begins to bring more of Alice's writings into publication, yet only one third of James's extant letters are included in the book.
have also been denied an acknowledgment of comprehensive cognition.

As Edel's intervention in the literature of Alice James produces an over-sight, the eclipse progresses as he begins juxtaposing Alice and her work to her relationship with her family and their work. At one point in his critique, Edel emphasizes the emotional, physical and political effect of the Civil War on the James brothers. Yet while he details the boys' sufferings within the context of the political/public/masculine tensions of a country in crisis, Edel describes the corresponding years of Alice's life as simply her "early years of adolescence," and fails to connect the unsettled silences in the passage he quotes, with the political dividing of the country. Instead, Edel attributes Alice's silencing to nineteenth-century social standards for women, and not to a conflict between her capacity for understanding the socio-political circumstances of the war and her politically marginalized restriction from being overtly active in the same Civil War tensions.

Neither, in Edel's introduction, is there any specific reference to what might have constituted a rejection of traditional female roles, rather than an acceptance of them. In Kaja Silverman's analysis of Oedipal formations, she examines the rites of passage informing gender identity during the adolescent years of social development. According to Silverman, the "feminine" functions in a social order which demands a transformation from maternal to paternal authority. In nineteenth-century America, this transition often involved a very intense battle over the female body. Among other spoils, the stakes of these battles included control of reproductive issues such as birth control, a woman's right to choose the father of her children, and abortion rights. While Edel's reference to woman's place in the "genteel society of her time"
notes a factor of gender differential, he neither details the social restrictions of women, nor postulates a theory evaluating gender determinants and political binaries. Instead, Edel focuses on Alice’s “need to assert herself,” a need, according to Edel, which created a split between body and mind due to “emotional,” rather than political chaos.

A reading which includes the assumption of divisions between body and mind necessitates specific detailed analyses of external political conditions—social, religious, gender, race and class factors. While Edel’s essay progresses toward an understanding that Alice’s need to articulate her silences were related to her attacks of “neuralgia,” there is no acknowledgment of “moments of being,” or instances of inversions or rejections of patriarchal theories. In Edel’s critique, Alice James remains either a victim or a slave to her mind or body.

Another weakness in Edel’s critique is that he avoids naming names, or making a direct link between Alice’s specific “fainting,” and specific individuals (brothers, doctors, nurses, etc.), or specific events (Parnell, English marriage/divorce traditions) that contextualize the faintings. Edel analyzes Alice’s 1868 breakdown by opposing the violence of her breakdown to a stifling of violent feelings directed against her father. The tensions at play between Alice and her father during this time are read by Edel as a struggle for the privileged space of the sick-bed: “by being ill, she rendered herself powerless to execute the violence. At the same time she could hold those around her in bondage.”  

As I interpret Edel's conclusion, he is referring to a psychoanalytic understanding of neglect of emotional bonding during childhood as a "cause" of nervous disorders. This assumption leads to an Oedipal reading of the text which situates Alice always already in opposition to the paternal. Entries from the diary, such as the benignant pater passage, acknowledge suppressed emotions, yet to generalize the emotions as being confined to a paternal opposition diminishes the complexity of the tensions involved. With Alice's mother's death being less than a year behind her, Alice finds herself projected into the space of female caretaker. The father's "complacent" dying, as postulated by Edel, functioned within a gender and agency exclusivity which situated Alice in the space of the dead mother/wife. Whether overcome with grief from the loss of his wife, or evading a future as caretaker of a "nervous" daughter, Alice's father's waning health constricted Alice in the horrific familial space her mother had previously occupied. Consequently, rather than reading the violence of the passage as a grieving for unrequited love, I propose that the tensions of the passage culminate from a rejection, by Alice, of the operative assumption that Alice -- rather than any of her brothers or a professional medical practitioner -- would be the person to sacrifice an indeterminate amount of her life in exchange for the servitude inherent in a non-realized nursing occupation. Alice's diary, like her body, is composed of rejections of always already assumptions. Alice's voice rings clear in the diary in consolation, that is, operating in opposition to psychoanalytic assumptions of grieving and sorrow. The tone I hear in the diary, instead of the wailing of grief, is a cry of defiance.

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Edel, 7.
In Jean Strouse’s comprehensive biography of Alice James, Alice’s voice is both illuminated and negated. While Strouse acknowledges and details Alice’s participation throughout the diary in both national and international politics, the biographer privileges “public” critique over “private” discourse. Strouse does this by assuming that the authorial efforts of Alice James are somehow less productive because they were created in the space of the sick bed. According to Strouse, Alice’s intelligence and energy “went into the intricate work of being sick.”\(^72\) As Strouse couples the space of the sick bed with non-productivity, her assessment diminishes the intricate inversions and contestations which evolved through Alice’s writings.

In Chapter One, I theorized that autobiography might be understood as a type of bi-product of the hegemony. In formulating this analogy, I wanted to emphasize a transformative process at work in the autobiographical voice, but I also wanted to acknowledge a plurality of voices—speaking now in opposition to each other, now in harmony with one another. Strouse, defending the notion of illness as non-productive, suggests that, although Alice is neither as “deliberate” as Henry, nor as “assertive” as William, her diary functioned to convert the “waste of her life into something more lasting than private unhappiness.”\(^73\) Strouse’s uses of “assertive” and deliberate” to juxtapose the brothers against the sister serves to diminish the worth of Alice’s “conversions.” Strouse’s assessment of Alice’s life as “private unhappiness” begs a definition of “happiness” and a closer critique of the dynamics of public and private. A clarification of terms within contexts of


\(^73\)Strouse, 292.
gender formation is necessary if Strouse chooses to posit public and private as she does. To focus on gender differentials, I question Strouse’s assumption that Alice’s process of finding voice is somehow less authorial than the processes her brothers participated in for voice realization. I feel, on the contrary, that as Alice’s energy (assertiveness) was consistently consumed by efforts to resist dominant social and medical prescriptions based on gender, her diary was a product of a massive conversion of energy, not merely a utilization of energy. The processing of Alice’s voice necessitated a penetration through specific restrictive details of patriarchal ideology. In sum, a smaller, more condensed product may have emerged instead of and/or because of a more intricate and covert authorial procedure.

As Strouse evaluates Alice’s voice, she uses an analysis based on pitch, or a highness and lowness of tone frequency. The high, or “arid, preaching tone” Strouse attributes to “a willed transcendence of pain, a mimicking of literary heroism, a moral superiority used as self-justification.” This “high” voice functions, according to Strouse, as a type of falsetto through which Alice “attempts to define the inner life.” Yet, in this supposed inner struggle, Strouse contends that Alice has failed to make her “self” heard. “Her sense of triumph seems false, as if she were talking herself into something she doesn’t quite feel...”

Strouse’s analysis of Alice’s voice as cited above, is based on the October 10th, 1890 entry from the diary. The passage Strouse quotes functions within the context of the entire entry not only to justify Alice’s “disability,” but also to communicate Alice’s imagining an alternative to organized religion. The passage begins with Alice exposing weak theological explanations used by Catholic clergy as justification for their existence. In these revelations,

74 Strouse, 292.
75 Strouse, 292.
Alice notes two incongruities: the wealth of the Catholic church against the want of the masses of English people, and the absurdities inherent in the rituals of confirmation. This second revelation transitions the narrative from the subject of the Catholic Church to the subject of her brother, William. The second paragraph in the October 10th, 1890 passage retells a story of William's son, Harry, and Harry's analogy that "Jehovah" must be a skunk, given William's explanation that "God isn't a thing He is a spirit, He is everywhere about us, He pervades."

The last half of this entry is dedicated to juxtaposing these "irreconcilables" to her own life-style:

If the irreconcilables only knew it they would find it more cleanly and amusing to wait serenely for the doomed moment when the extinct survival dances gayly to his own destruction and by some grotesque inevitable act of folly strips himself for even the animal intelligence.76

Consistent with Alice's stratagem of critiquing faulty assumptions, she satires the subject(s) under question, revealing her own alternative. Here is where the passage quoted from Strouse fits in:

How it fills one with wonder to see people old eno' to have stored experience never apparently suspecting that of all the arts the art of living is the most exquisite and rewarding and that it is not brought to perfection by wallowing in disabilities, ceaseless plaints of the machinery of life and the especial tasks fallen to their lot. The paralytic on his couch can have if he wants them wider experiences than Stanley slaughtering savages, the two roomed cottage may enclose an infinitely richer, sweeter domestic harmony than the palace; and the peaceful cotton-spinner win victories beside which

76 Alice James, October 10th, 1890.
those of the reverberating general are dust and ashes—let us not waste then the sacred fire and wear away the tissues in the vulgar pursuit of what others have and we have not; admitting defeat isn't the way to conquer and from every failure imperishable experience survives.  

In this passage, as well as others, Alice's voice speaks in defense of the space of observation and the art of “silent” speech; “the peaceful cotton-spinner” opposed to “the reverberating general.” This entry functions not so much as an endorsement of passivity, but rather to question assumptions of passivity and to assert an alternative reading of master narrative(s). By defending the space of the sick-bed, Alice has redefined the rules of battle and proposed strategies for exerting “free will.” Rather than conveying a “false sense of triumph,” as Strouse asserts, I feel Alice’s voice reverberates “what doesn’t happen” with a tone of such purity as to break a crystal glass.

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77 Alice James, October 10th, 1890.
Yeazell-as-Agent

Ruth Yeazell's *The Death and Letters of Alice James* is primarily a collection of letters written by Alice James, and not a critique of the diary. Yet Yeazell's opening essays are informed by an understanding that the diary is the primary text of Alice's authorization. Because the diary informs Yeazell's analysis of the letters, it is important to critique Yeazell's introductory essay for its participation in negating Alice's voice.

Yeazell's assessment of the "case" (as she calls it) of Alice James is an evaluation based on the assumptions that "dying had become Alice James's chief vocation," and that her cancerous breast tumor found in the last year of her life, was "a solid emblem of a perverse kind of achievement."78 The biographical essays constructed by Yeazell approach the subject of Alice James from a psychoanalytic perspective, turning her biography into a case study. The materials printed, reportedly one-third of the extant letters written by Alice James, were chosen, according to Yeazell, "for their inherent appeal and for their representativeness, to help the reader sense the range of her concerns and the shape of her 'mortal character'" (from, "A Note On The Text"). I will critique the operative assumptions affecting both the letter selection process and the thesis of the introduction to Yeazell's text.

Yeazell's work assumes that Alice's occupation of the sick-bed was both "self-destructive," and "perverse."79 As she interprets Alice's "case" through elaborating a diary entry from February 21, 1890, Yeazell extracts the sentence, "Owing to muscular circumstances my youth was not of the most ardent, but I had to peg away pretty hard between 12 and 24 'killing myself,' as some one

79 Yeazell, 13.
calls it--absorbing into the bone that the better part is to clothe oneself in neutral tints, walk by still waters and possess one's soul in silence." The tone of this passage, as well as its "representational" value, is, according to Yeazell, "a kind of grim energy" which mediates between the allusion of metaphorical dying and "the sort attended by physicians."\(^{80}\) When looking at this entry in its entirety, the sentence extracted by Yeazell forms the crux of a passage which ultimately conveys the joys of middle life. The sentence cited by Yeazell refers to a conflict remembered from Alice's adolescence... adolescence being viewed by Alice at age 41 as "the most difficult [period] of life."\(^{81}\)

To understand how Yeazell lifts the quoted paragraph, and her subsequent re-production of the passage, out of the context of the entire entry, it is necessary to re-create the entry. Alice opens this entry with a letter which was printed in the "Standard."\(^{82}\) The letter is a written request for a Chaplain's job. In the letter, the author describes his qualifications and his suggestions for the conditions of pay. These conditions include "four pence per head for every addition to the present number regularly attending the chapel, with an extra penny per head for each case in which I bring a Roman Catholic to the Established Faith." It is with reference to this statement that Alice begins her own writing in this entry: "'Tis surely a moment of Religious pallor when the rescue of a soul from Rome has the modest value of five pence!" Rather than having a sort of "grim energy," as Yeazell suggests, the voice of Alice James, as

\(^{80}\)Yeazell, 13.

\(^{81}\)Alice James, February 21, 1890.

\(^{82}\)The structure of this entry is problematic because the reader doesn't know if the letter from the newspaper was re-printed directly into the diary, or if it was a clipping found loose in the diary. For the purposes of my critique, the point is moot. As long as Alice's own writing on this date is understood as opening with reference to the letter from the "Standard," the editorial ordering is insignificant.
it begins this entry, has a clarity which cuts through the rhetoric of spiritual commerce. To challenge Yeazell’s assessment, I propose that the “grim energy” she attributes to Alice’s voice is an assertion of an intellect conducting the intricate, exhausting, isolating work of socio-political analysis.

As Alice builds toward the “killing myself,” as someone calls it” statement, she first cuts through “the ancient superstition” of “spring and youth being the joyous periods,” explaining that

as the one is the most depressing moment of the year, so is the other the most difficult of life. Spring not only depresses us physically, but in proportion to the revelation of natural beauty... overwhelms us and fills us with despair.83

Note in this last sentence, Alice’s reference to natural beauty. I highlight this rejection of natural beauty as a pivotal point for tone and logic in the narrative, but it can also be understood as a means of rejecting the myths of gender production by reviewing adolescence through the eyes of “middle life.” It is through this reviewing that Alice breaks through gendered, familial, religious and medical forms (laws) by masquerading as patient which enables her to produce her own art and voice through the medium of autobiography.

And what joys of youth equal this blessed moment of middle life, when serene and sure of our direction all the simple incidents of daily life and human complication explain and enrich themselves as they are linked and fitted to the wealth of past experience. Whilst the blank youthful mind, ignorant of catastrophe, stands crushed and bewildered before the perpetual postponement of its hopes, things promised in the dawn that the sunset ne’er fulfils. Owing to muscular circumstances my youth was

83 Alice James, February 21, 1890.
not of the most ardent, but I had to peg away pretty hard between 12 and 24, "killing myself," as some one calls it--absorbing into the bone that the better part is to clothe oneself in neutral tints, walk by still waters, and possess one's soul in silence.\textsuperscript{84}

As Yeazell extracts the last sentence of this entry to inform her analysis of the voice of Alice James, Yeazell's assumptions, that this specific tone is "grim," and that "grim" is representative of Alice's voice, are faulty.

This entry concludes with an expressed gratitude for "a steady flame which had illuminated my little journey, and which, altho' it may have burned low as the waters rose, has never flickered out... the only thing which survives is the resistance we bring to life and not the strain life brings to us." Viewed within the context of the whole of the entry, the sentence Yeazell quotes is not so much "a memory of her youth as an exercise in self-destruction," but rather, an example of a middle-aged woman's efforts to re-produce her adolescence within a context based on causes and effects which have propelled her to the time and place of her current existence.

The task of trying to locate the voice of Alice James, is a problem of trying to distinguish between denial and resistance. As Yeazell develops a complex argument through a psychoanalytic historiography which supports a reading based on "denial," she is able to select (and the argument is dependent on) specific data which informs her "case" for Alice James' struggle toward voice.

As I search for Alice's voice, I find the rhetoric and language of psychoanalytic theory participating in negating the voice. As I read the diary, I too, hear Alice's casual, detached tone in reporting the violences she experiences. Yet when Yeazell questions "the reality of this delicate creature," she overtly questions the voice

\textsuperscript{84}Alice James, February 21, 1890.
which *is* produced--no matter how elusive, no matter how removed from the body. To "read" and teach the text from the always already assumption that "sick" is a state which exists outside the interactions of language and gender politics, is to attempt to negate the voice of Alice James.
Alice-as-Agent

Alice struggled persistently and consistently to hone her intellect and produce a specific written text which she created on the margin of nineteenth-century social life. By entrusting the text to her friend and help-mate, Katharine Loring, and by keeping it a secret from her brothers, Alice literally worked the margin thereby suffering as a marginal laborer. If Alice had wanted to remain subservient to her family, she would not have needed to “suffer” as she did, but rather, accept a “traditional” role in life. Therefore, it is important that, as critics, we question not the voice as it exists in the text, but rather, by listening to Alice’s voice, we acknowledge and question the assumptions Alice challenges, including assumptions behind ideologies which inform “suffering” (medicine) and “tradition” (family and church.)

Alice James did suffer, and the diary records the circumstances surrounding these experiences. Yet her art comes not from a single statement. Rather, “art” as it informs Alice’s diary, results from a play between the confines of the public and the confines of the private. For Alice, art/life/health includes, but is not limited to suffering. In her October 26, 1890 entry, Alice writes in retrospect of her most severe breakdown, where the now-famous “benignant pater” clause appears. Although Yeazell describes the tensions of this passage as memories from “the drama of a fiercely divided self,” Yeazell infers that this division is directly limited to Alice’s relationship with her father. Yet this entry twice refers to vague authorial restrictions not identified directly with her father, showing broader cultural influences than those imposed by a single person:

conceive of never being without the sense that if you let yourself go for a moment your mechanism will fall into
pie and that at some given moment you must abandon all, let the dykes break and the flood sweep in acknowledging yourself abjectly impotent before the immutable laws (italics mine).

and in the concluding sentence:

So, with the rest, you abandon the pit of your stomach, the palms of your hands, the soles of your feet, and refuse to keep them sane when you find in turn one moral impression after another producing despair in the one, terror in the other anxiety in the third and so on until life becomes one long flight from remote suggestion and complicated eluding of the multifold traps set for your undoing (italics mine).

In her own analysis of the breakdown, Alice makes it clear that the battle fought was a struggle between her “consciousness” and the “immutable laws” or “multifold traps set for [her] undoing.” By positing aggression as being an external force acting on the body, this mem-war functions to establish the “pater” as an icon for patriarchy while moving beyond a conviction of the biological father.

Although this particular diary entry identifies the pater as the aggressor, it also participates in a complicated analysis of the assumption that “the nervous victim ‘abandons’ certain portions of his consciousness” (italics mine.) This statement was published in a medical paper written by her brother William. By entering into the battle concerning agency in body politics, Alice positions herself on a theoretical plane at least even with William, and perhaps even “higher,” considering she is not “healthy,” yet authoring health. This inclusion of William and a critique of his most recent work is an important dynamic of this passage.

The diary entry begins with Alice analyzing William’s paper entitled “The Hidden Self.” Alice extracts the word, “abandons,”
from the essay to critique William's uses of it within the context of body politics. "It may be the word used by his kind. It is just the right one at any rate, altho’ I have never unfortunately been able to abandon my consciousness and get five minutes’ rest." This statement functions, as does the entire diary entry, to re-formulate William's word, "abandon." A battle for control of language becomes a battle for control of body, with the diary chronicling the gains, losses, successes and defeats of Alice's army/body. While Alice admits to "abandoning" of some of her troops, she details the terms of surrender: "you abandon the pit of your stomach, the palms of your hands, the soles of your feet, and refuse to keep them sane...." Yet the surrender is conditional, as Alice reverses the operative "moral" assumptions of sanity: "you find in them one moral impression after another producing despair in the one, terror in the other, anxiety in the third...." To Alice, "morality" produces despair, terror and anxiety, rather than the assumed and theologically professed peace, calm and tranquility. Therefore, Alice's "abandonment" functions as a resistance to and rejection of "the multifold traps set for your undoing," including William's diagnostics of consciousness and nervous victims. By re-membering the tensions of the time spent with her father within the context of William's "abandonment," Alice reverses the agency(s) once held by both these men.

Perhaps one of the most direct statements written by Alice in her ongoing critique of nineteenth-century medicine comes in the first sentence of the first diary entry immediately following the "multi-fold traps" passage:

I must "abandon" the rhetorical part of me and forego the eloquent peroration with which I meant to embellish the above, on the ignorant asininity of the medical profession in its treatment of nervous disorders.85

85Alice James, November 7, 1890.
Again, Alice has used her past life experiences to reject the premise of current work/experimentation being done on nervous disorders and perhaps specifically that directed at Alice by her brother William. I read the “abandonment” of “rhetoric” as used by Alice in the context of this passage as a forced withdrawal from subjective voice, for Alice continues after the above statement, “The seething part of me has also given out and had to be abandoned.” The repression of anger is obvious in this passage, as is its “audience,” Alice’s brother, William.

I want to credit each of the critics mentioned above—Yeazell, Strouse, and Edel—for contributing to the re-production of the voice of Alice James. Without their participation, the text, as well as the voice contained therein, may have remained outside the realm of historiography. Yet to accept any analyses which reify the structures of oppression that Alice spoke/wrote against, is not only to reject the voice of Alice, but also to reject the possibility of reproducing the space of the sick bed in a non-sick, non-gendered non-diminutive context. To ignore the details of criticism which eclipse the voice of Alice James, is to reinforce the constraints which reproduce gendered tenure track patients, closing spaces for alternatives.

Alice’s diary contributes valuable insight into socio-political language differences informed by gender. Less than two weeks after she begins her diary Alice confronts the problem of language: “As the wise tell us that everything has been said, how curious it would be to know what will follow the present phase of preoccupation with the manner of re-saying it.”86 Raised by a father who worked with contemporary philosophers such as Emerson and Holmes, Alice was exposed to contemporary philosophy, yet, confined by gender expectations and restrictions, her contribution to socio-political

86Alice James, June 11, 1889.
ideology was a product of the margins.

In the introduction to *The Private Self: Theory and Practice of Women's Autobiographical Writings*, Shari Benstock discusses how such concepts as “diary,” “journal,” “autobiography,” “privacy,” “self,” “theory,” “gender” and “author” might be discussed through feminist analysis. As mentioned earlier in Chapter One, Benstock informs autobiography through gender by noting both the repressive inscription of genre under the law as well as the freedom/dispossession of existence outside the law. By reading Alice’s diary through Benstock’s construction of the margin and text, the diary can be posited contextually as a conviction to establish voice/self. Although Alice states that she will write “of what doesn’t happen,” she was aware of the power of language. Mid-way through the diary Alice writes, “Once in my innocency, before I had learned what not to say, lest the Empire totter...” This statement acknowledges that “the Empire” could totter at the sound of her voice, if she chose to use it in that manner.

Alice possessed a talent to reveal fallacies, inconsistencies and discrimination in social thought and language. Although she was confined to the sick bed, she had access to the world through newspapers, magazines, novels, poetry, social visitors, doctors, nurses, friends and family. The diary records her critiques of the different mediums and mediators which contextualized her communications. Her interaction with scientific discourse through a lifetime of medical mediaries gave her keen insight into the prejudices and fallacies inherent in scientific language and logic. When critiquing William’s *Principles of Psychology*, Alice writes, “William says in his *Psychology*: ‘Genius, in truth, is little more than the faculty of perceiving in an unhabitual way.’ This seems to the sisterly mind, or heart rather, more felicitous than the long-acustomed ‘infinite capacity for taking pains...’”

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87 Alice James, January 16, 1891.
Alice rejects an analysis of “genius” as being always already dependent on suffering. By restructuring “genius” as “perceiving in an unhabitual way,” Alice puts on the role of genius and creates her own definitions of the condition of genius. In literary terms, she has rejected the “custom” of coupling intelligence with illness.\(^8\) A rejection of this binary is the main premise of the diary—and the main stumbling block of critics. To formulate a “reading” of the diary becomes a task of trying to distinguish between denial and resistance. To better understand Alice’s use of resistance in the diary, it is helpful to note that the site of production of the document is an inversion of the marriage bed as controlled site of gender re-production. The sick bed, then as utilized by a single/virgin woman, challenged the hierarchies which oppressed women through sexual subservience. That Alice could not be recognized by doctors rendered her socially produced invisibility, invisible to the creator. And so in this space, Alice begins to topple the Empire by dissecting and examining the structures, institutions and ideologies contained therein, as situated in opposition to Alice-as-woman and agent.

Alice’s resistances function in opposition to “healthy” gendered rites of passage in nineteenth-century American society: Marriage, sex, childbirth, abortion, divorce. Also rejected were specific male-dependent roles: wife, mother, nurse, and even history teacher.\(^9\) Alice’s re-construction of “genius” through her rejection of the “long-accustomed infinite capacity for taking pains,” not only inverts the berthing bed, but also challenges the socio-political status of her brothers—William (as doctor/health agent), and Henry (as author/voice agent.)

\(^8\)See Susan Sontag’s \textit{Illness as Metaphor.} (New York: Random House, 1979.)

\(^9\)In her young adulthood, Alice taught history through correspondence classes, but the profession didn’t last long. A study of the materials used, juxtaposed to the political assertions in Alice’s diary would be interesting, indeed.
By understanding Alice’s use of denial as a creative force, the text and the significance of Alice’s life and story can be critiqued outside a psychoanalytic reading. Ruth Yeazell’s argument, as convincing as it is, comes up empty when searching for psychological motive: “when it comes to suggesting the direct causes of Alice’s breakdowns, the particular links of emotion and event to which her flesh had thus given expression, the record is generally blank.”\textsuperscript{90} Yeazell’s analysis re-positions the text within the binaries of patient/doctor, which Alice labored so hard to resist and break down. Was it Alice’s intention to “get herself dead,” or was this the suggestion of the “someone[s]” external to her self, that Alice refers to directly and indirectly throughout the text?

On March 23, 1891, about one year before her death, and halfway through the diary, Alice remarks on her situation: “every fibre protests against being taken simply as a sick carcass, as foolish friends so flatteringly insist.” And when she hears the news of the tumor on May 31, 1891, she summarizes her many experiences with doctors:

...I was always driven back to stagger alone under the monstrous mass of subjective sensations, which that sympathetic being, ‘the medical man’ had no higher inspiration than to assure me I was personally responsible for, washing his hands of me with a graceful complacency under my very nose. Dr. Torry was the only man who ever treated me like a rational being, who did not assume, because I was victim to many pains, that I was, of necessity, an arrested mental development too.

In these passages, Alice retains her right to own her pains and sufferings, yet she refers to herself as a ‘victim’ while rejecting the responsibility for \textit{inducing} the pains. At the end of this

\textsuperscript{90}Yeazell, 12.
passage, Alice summarizes her many diagnoses with the biting tone and grinding rhetoric of a patient tasting and spitting out hospital food... tray and all:

This [the tumor] with the most delicate embroidery of 'the most distressing case of nervous hyperaesthesia' added to a spinal neuroses that has taken me off my legs for seven years; with attacks of rheumatic gout in my stomach for the last twenty, ought to satisfy the most inflated pathologic vanity. It is decidedly indecent to catalogue oneself in this way, but I put it down in a scientific spirit, to show that though I have no productive worth, I have a certain value as an indestructible quantity.  

As she writes, Alice exposes the violence(s) caused by “cataloging” the body, and defends her identity/body/voice as “an indestructible quantity.” Likewise, Alice’s satirisation of “productive worth” not only challenges patriarchal assumptions of feminine reproductivity, but this subversive gesture also exposes the links between science, economics, and gender.

As medicine tried to claim the bodies of women for sites of scientific experimentation and economic reproduction (medical commodity), Alice James fought back with her pen and the intellect she so diligently defended. So, rather than adopting Yeazell’s analysis that “Alice’s was a case of physical effects out of all proportion to their apparent causes,” I join Alice in her revery, that

it does violence to a primordial instinct and fills one with a constant sense of shame and weakness to turn one’s back and not shape the accidents of nativity to one’s purpose, and extract from whatever barrenness the fullest and richest measure of development.  

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91 Alice James, May 31, 1891.
92 Alice James, December 31, 1890.
CHAPTER THREE

Achsa Sprague: Illness, The Editor, and Invisibility

The task of formulating this last chapter has been nothing less than trying to write the invisible. When I read *The Diary of Alice James*, I knew I wanted to develop a thesis from the text, so I began looking for a companion text which exhibited the conditions of illness and autobiography authored by a nineteenth-century woman. When I read an abstract on Achsa Sprague’s diary and journal indicating the conditions I had in mind, I thought the search was over.

But after locating a reproduction of the Sprague diary and journal in *Proceedings of the Vermont Historical Society*, I soon learned that the reproduction was a collection of excerpts from the diary and journal, and not a total reprint of the original texts. I decided to undertake a search for the original diaries, beginning at the Vermont Historical Society. Here I found a large collection of papers listed under the name of Achsa Sprague, yet with the exception of approximately a dozen letters and/or prose written by Sprague, the remaining 600+ documents were letters received by Sprague from people around the country.

Perhaps I would have been satisfied finding this rich selection of documents had I not read the preface to the published excerpts as printed in P.V.H.S. This preface states, “Few of her works have been published; her unpublished writings include poetry, essays, journals, a play, and a long autobiographical poem which was composed in six days.”93 This preface goes on to explain,

Mr. Twynham, who has made the following selections from the diary and journal in his possession, is the author of a sketch of Miss Sprague in the *Dictionary of American Biography*, and he is contemplating the publication of a volume which will include her prose and verse and a long biographical sketch."

Likewise, the biographical essay written as a follow-up to the publication of the diaries states,

It was left to others to publish her primary works. Magazines printed articles by her during her lifetime. The published books and articles include only a fraction of her writings. I have a vast quantity of manuscript material, verses and essays, which await publication.94

Through information in the Sprague file at the V.H.S., I was able to trace a nephew of Leonard Twynham, only to be told the biographer had no children, that this nephew knew nothing of Leonard Twynham's work, nor of his place or date of death. I next inquired at the University of Vermont, where, according to University Archivist Jeffrey Marshall, Twynham taught history courses in "the 1920's or 30's."95 Unfortunately, this search also failed to locate the missing Sprague texts and papers.

Despite these setbacks, and of course, the possibility that the desired documents have been destroyed, the search goes on. I was contacted in March of this year by an Episcopalian Minister who is searching for the diaries to use as reference to an essay she is writing about Sprague for *American National Biography*. And in 1987, Ann Braude used information concerning Achsa Sprague in her informative research on Spiritualism and women's voices.96

Although I have no way of knowing the fate of the elusive Sprague documents, I liken their absence to the ongoing struggle for voice which women experience today. This same struggle for voice is what informs my reading of the Sprague diary and journal as published in P.V.H.S., a reading which is subject to the winds blowing through the holes in this publication.

For several reasons which I will explain subsequently, I have chosen to analyze the text as two separate documents, with distinct, but overlapping voices. The first reason is fairly obvious: a 5 year, 4 month silence exists between the entries of July 26, 1850, and November 17, 1855. A single entry dated February 9, 1853, is inserted between the two main bodies of text. The second reason I separate these documents is to try to isolate probable determiners of voice in each text. To clarify this separation, I will refer to the earlier text dated June 1, 1849-July 26, 1850, as the diary, and the later text dated February 9, 1853-June 22, 1857, as the journal.

In this chapter I propose to show how Achsa Sprague used autobiography to transpose her self from the space of the sick bed, to the space of public lecturer. I will focus my analysis on the premise that the ill/healthy subject (Achsa Sprague) is informed by gender and class, and that through challenging the assumptions of nineteenth-century institutions such as medicine and religion, which proposed these ill/healthy demarcations, Achsa Sprague was able to heal her private self and serve as healer for others who suffered similar ills under similar systems of oppression.

Because this is a study of illness and gender, it is important to note that, like Alice James, Achsa Sprague remained unmarried throughout her life. The significance of this decision to the health and voice of Achsa Sprague might be better understood by reviewing how the nineteenth-century cult of Spiritualism critiqued marriage.

I turn to Spiritualism for this information because it was through the ideologies and languages of Spiritualism that Achsa Sprague eventually found health. According to Anne Braude, Spiritualism demanded a critique of marriage which included an insistence on frank and open discussions of assumptions informing connotations of private, public, economics, and sexuality. Spiritualism cited parental and social pressures to marry, a lack of economic alternatives for women, and male seducers or men who lusted after women as determinants of unhealthy marriages. For an alternative to these oppressive conditions, “spiritual affection” and “celestial harmony” were proposed as guidelines to marital happiness.

In her analysis of Achsa Sprague’s marital status, Braude concludes “One thing becomes abundantly clear from the extensive discussion of Achsa Sprague’s marital status in her correspondence: she remained single by choice, a choice she was required to assert repeatedly.”

Braude’s analysis offers insight into possible antecedents for understanding Sprague’s transformation from the socially invisible space of the sick bed to the publicly visible lecturer’s podium. Not only does Sprague align herself in opposition to economic and social restrictions informing nineteenth-century marriage, she also was one of the few Spiritualists who resisted marriage completely. Sprague defended her independence by asserting that not only would marriage weaken her public voice, it would also threaten her private health. To look more closely at some of the determinants reinforcing Sprague’s alliance of public voice with private health, I will examine how Achsa Sprague’s desire for health participates in transforming non-verbal inhabitants of the body to verbal mediators of socio-political events.

97 Braude, 118.
98 Braude, 111.
Illness and Desire, Seeing and Believing

Achsa Sprague was an expert in analyzing agency. By portraying herself in the diary as socially and politically blind, thus “sick,” Sprague was able to put on a mask which allowed her to observe obscured or coded medical and social laws that converged to inform the feminine.

On June 1st, 1850, the first anniversary after Achsa Sprague began her diary, the author makes the following entry in her diary:

One year ago today I commenced penning a few scattered thoughts here, because it served to pass away time and give vent to some feelings which would otherwise have corroded the place where they were crushed back to keep them from the eyes of the cold and careless whose pity would be but a mockery.99

Written through retrospection, Sprague is able to evaluate her relationship between language, the body, and the gaze. Within these signifiers, Achsa Sprague rejects and resists the patriarchal gazes which oppressively serves as an agency of authority to define social role(s) for women.

The creation of defenses against the power of the gaze, however, does not come easy for Sprague. From the first entry in the diary, the author searches for vision: “Once more I am unable to walk or do anything else; have not been a step without crutches since Sunday and see no prospect of being any better; see nothing before me but a life of miserable helplessness.”100

99 Achsa Sprague, June 1, 1850, IN “Proceedings of the Vermont Historical Society.” V. 9, No. 3 (1941), 139. In all my quotations from Sprague, I will use the spellings, punctuation, and emphases of the P.V.H.S. publication of Achsa Sprague’s diary and journal, unless otherwise noted. Also, in conjunction with this passage see Alice James’s first entry and the same references to the relationship between suppressed emotions/desires and the body.
early diary entries, evidence of Sprague’s struggle with sight, with keeping her eyes open, indicates a struggle between the inner will of Achsa Sprague, and the power of social, familial, and medical gazes.

I cannot look back upon the past, for the present seems more gloomy by contrast, neither can I look forward to the future for ‘tis shrouded still darker than the present, and I can but shut my eyes to everything in life and try to forget. In vain. Thought after thought of all I wish to be and to do, come back again and again, until I forget everything save that which I try to forget—my own misery. 101

Although Sprague never reveals what her wish for the future is, references to “a plan” appear consistently in the pages of the diary, as well as in the pages of the journal in a tone less strained. The connection between sight, private pain, and autobiography is intensely communicated in the following passage from April 17th, 1850, almost a year from the opening entry of the diary:

I hardly know what to do with myself for I have injured my eyes, so soon, studying for they never bear much, I can see but very little and my thumb will not let me write much and that by holding my pen loosely and letting it almost guide itself, I can do nothing but think, THINK.

The momentum of the diary, or that which seems to function as muse or hope, is Sprague’s repeated reference to an unknown plan for the future. These notations begin early in the diary, informing Sprague’s continuous transformation of pain into language. Early in the diary Sprague writes, “Wrote ‘Spells of Music’ and have been trying to amuse myself in some way, but still can only think of what

100 Achsa Sprague, June 1, 1849, 132.
101 Achsa Sprague, July 10, 1849, 133.
I had hoped and planned for the future.” On July 1st, she writes, “Thought after thought of all I wish to be and to do, come back again and again, until I forget everything save that which I try to forget—my own misery.” And on September 14th, 1849, “I have been thinking of a plan this week. Shall I ever carry it out?”

Each of these references to the future, repeated throughout both the diary and journal, comprise an intrical tool for the transformation of Achsa Sprague from the sick bed to the public podium. Bracketed by statements of frustration and pain, these yearnings for an active future function to distance the body of Achsa Sprague from the oppressive languages of medicine and related patriarchal narratives. This strategy of resistance develops from a concentration of vagaries on “the future,” into more specific details effecting the present. Although these transformations in language appear more concretely in the later journal, the same transformations occur in the diary albeit less apparently. On November 14th, 1849, Sprague again critiques her condition in opposition to the gaze:

Today has passed like all others to me, in an outward show of composure, sometimes of cheerfulness, but thought has been busy, busy with the past. With the past, did I say? With the present, with the future also. It seems as though every hour of my past life has come up in review before me, with its few lights and its many shadows, and again and again I have looked with gloomy eyes into the dark mysterious future as though I could search out its mysteries and learn my own destiny. Oh! that I could know my own future, no matter how dark, no matter how dreary it stood before me, twere better, far better, than this maddning suspense that haunts me continually; at time almost driving me wild with its vague shadows and mocking fancies. And yet they blame

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102 Achsa Sprague, June 11, 1849, 132.
me that I cannot bear it without a murmur, without a repining word. Perhaps I ought, but is it in poor human nature to do it? Have I not hoped for years without giving way to despair and has it not been worse than vain? Who knows the weary days and nights, the lonely hours, the burning thoughts, the maddening visions that come again and again to me in my waking and sleeping hours till my stern self control has given way and I have yielded to despair. If they could but know all I have suffered, they would not, could not blame me for I had planned, had hoped so much for the future, and now it is all passed and I am doomed forever to a life of inaction.

The conflict in this passage, is a conflict between a group of people (they) who possess the power of the gaze as well as the agency for, and the access to, the master narratives. Although such conflicts marginalize the subject (Achsa Sprague), they also offer/demand alternatives to the oppressions created in the binaries of the status quo.

Citing these passages as evidence of the power of the gaze as signifier of health, I challenge those statements in Braude’s analysis that suggest Sprague “never complained of being in pain,” or that suggest something Braude calls the “non-spiritual aspects of Sprague’s recovery” somehow exists in a separate analytical sphere from whatever analytical sphere “spiritual” aspects might exist. I emphasize the importance of challenging the assumption that Sprague’s illness and her Spiritualism is in any way separate, because, as stated above, after she gains her health, Sprague adamantly aligns her private health with her public voice as Spiritual Medium. This task then, of rejecting the gaze, also becomes one of re-directing it, away from the body, resisting the social technologies operating in the creation of woman-as-patient. By analyzing the gaze as a central means of signification in these

103 Braude, 104.
texts, then, indicators such as physical health, social settings, and ideology become contingent on who possesses the gaze.

In her book, *The Body In Pain: The Making and Unmaking of the World*, Elaine Scarry explains the importance of acknowledging alternative languages: “a particular constellation of sounds or words that make it possible to register alterations in the felt-experience of pain in one language may have no equivalent in a second language.”¹⁰⁴ As languages challenge each other, they are vying for the authority or power of subjectivity—the power of signifier over signified. With the female body as the site of the struggle, the body becomes also the space in which gender is produced vis-à-vis medical doctrine.¹⁰⁵ Pain, in this instance functions in direct opposition to “the medical man” whose job it is to “master” the subject within illness and wellness binaries. In a struggle between codified systems of authority, language function as the tool or weapon to reflect or inscribe pain. As Scarry writes,

>a state of consciousness other than pain will, if deprived of its object, begin to approach the neighborhood of physical pain; conversely, when physical pain is transformed into an objectified state, it (or at least some of its aversiveness) is eliminated. A great deal, then is at stake in the attempt to invent linguistic structures that will reach and accommodate this area of experience normally so inaccessible to language.¹⁰⁶

What a reader must ask, then, is how Achsa Sprague was denied access to language, or why and/or how she chose to reject the master narratives. In a feminist reading of the diary, the

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¹⁰⁵ “Gender,” in this context, refers to a political and/or economic manipulation of biological differences.

¹⁰⁶ Scarry, 5-6. 

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assumptions which informed Sprague’s body as ill, can be understood as assumptions based on gender and class status as signifiers in socio-political productivity. These passages of pain, usually informed by frustrations with doctors and medicine, or anger against economic inequalities, are points of climactic tensions within which reversals of agency begin to take place. By writing her own pain, Sprague contests the authority of doctor(s), reserving for herself the agency to reject or accept assumptions of health.

Within the first month, Sprague’s diary entries communicate her interactions with doctors, as well as her reactions to these experiences. In her first recorded meeting with a doctor, Sprague writes, “He has examined my case, and thinks he can cure me. I shall take his medicine but scarce expect to receive any benefit.”107 As the month comes to a close, she notes,

I do not begin to improve any yet and fear I shan’t, am not able to sew or write but very little my only amusement being reading and riding horseback. I am thankful I can even have those and doubly thankful for the ability to enjoy myself in the world of books when the works of action seem shut from me.108

Not unlike the “multifold traps” set for the “undoing” of Alice James, Achsa Sprague’s removal from the world of action is posited grammatically in the passive voice, leaving the agent anonymous and unnamed.109 This allusiveness of agency functions to encase the female body in a state of “incoherent energy,” thus denying a productive use of this energy.110 Language, or in this specific

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107 Achsa Sprague, June 6th, 1849, 132.
108 Achsa Sprague, June 24th, 1849, 133.
109 This phrase appears in the October 26, 1890 entry of The Diary of Alice James.
110 Silverman, 155-56.
instance, autobiography, functions as a means of resistance to the prescribed anonymity of the objectified woman. Language is also the operative through which these energies can be refined, reproduced and released. In this process, reading, writing and speaking become the tools of health and activity, which culminate in political reform.

In the opening passage I quoted from Sprague's June 1st, 1850 diary entry, the author demonstrates how she has used the diary as a space for retreat from the gaze. Sprague's utilization of this space to develop a critique of the gaze functions to reverse the authority of the doctor, or the prescriber of inactivity. For example, on August 1st, 1849, the author writes, “The Dr. says I am better. I shall believe it when I begin to walk,” and on October 24th, 1849, “Saw Dr. Gwitchell who said he could see nothing to prevent me from getting as well as ever, prescribed for me and said he thought I should be well in the course of a year.” Sprague's reply communicates her growing skepticism,

Just as every other Dr. has said to me and I have about the same faith... This morning just began to take my medicine which the Dr. said he thought I should perceive helped me some in two or three weeks. I am more afraid it will be two or three years.

What is interesting about this passage is that Sprague's pessimistic attitude--her lack of faith in the efficacy of the medicine man--has situated her in a position of authority in which she half jokingly, half out of despair, makes a prediction for the course of her recovery. Although this prediction, taken literally, would place her in the years not chronicled in the Sprague texts, it does affirm a confidence in a future recovery that would allow enough time for a transformation (of body, of mind, of voice,) through language, and not a treatment dependent on an acceptance of the diagnoses and
treatments of “sickness.”

In the text of the diary, the space of the sick bed and the occupation of the female-as-patient work antithetically not only to doctor-as-signifier, but also against the myth of woman-as-passive. “Is this feeling of helplessness,” writes Sprague, “this consciousness of being a burden to everyone, enough to crush the proudest spirit and can mine be proof against it?”¹¹¹ In this passage, Sprague links this state of helplessness directly to class status: “Why is not my heart dead to the bitterness of my lot? Why must I feel when the hand of charity is stretched forth to my assistance? What right have the poor to feel?”¹¹² This passage functions to name, or give language to, that which Scarry described as “a state of consciousness other than pain.”

As her subjective voice develops, Sprague begins to incorporate a critique of wealth with her critique of medicine, thus revealing a disempowerment suffered through poverty. The tension and anger of occupying the political position of the impoverished appears again when Achsa writes on her twenty-second birthday:

Twenty-two years ago today, a new life sprung into existence; the earth received a new inhabitant; a spirit clothed in the garments of mortality. There was nothing bright or beautiful that met its gaze as it looked for the first time from its clay prison house upon its earthly home, there were no luxuries of wealth scattered around it, no tones of mirth or music met its ear, but its inheritance was poverty instead and the wild November winds sang its first sad lullaby. Its lot was dreary, very dreary, for it was cradled among the storms of Adversity and nurtured amid a mother’s fear and midnight vigils. Years passed on and it began to thirst to drink of the waters of knowledge, but the fountain was far away, so

¹¹¹ Achsa Sprague, October 29, 1849, 136.
¹¹² Achsa Sprague, November 13, 1849, 137.
far that the child of poverty may scarcely reach it, unless possessed of a stern spirit that no difficulty can overcome and no hardship subdue. As it pressed on, the children of wealth passed gaily by, in their golden paths and were soon far away in the distance, and when it saw those who had already reached their destination drinking large draughts from the inexhaustible spring; while it was fain to content itself with a moistening its lips with the spray that fell far off from the dashing waters which was no more to its thirsty soul than a drop of water to the parched earth, it felt lonely and dispirited, but yet it pressed on. 113

In the language of this passage, Achsa Sprague’s pain is articulated within the social constructs of privilege and want. Words or phrases such as “possess” and “stern spirit,” emerge as criterion for health, as alternative to bed rest or prescription treatments, and as early indicators of the language and ideologies which later inform Sprague’s public mediumship. The need for developing a subjective perspective, or gaze, as defenses against the powerful nineteenth-century assumptions of medicine, church, and society was especially great for women. This is evident in Spiritualist’s critiques of Christianity such as the following by Anne Denton Cridge: “What we believed was on the authority of someone else, and hence could not possibly effect us as a faith does based on what we know and have seen.” 114 This need to express subjective experiences and observations is filled, in part, by the diary writings of Achsa Sprague.

As Sprague’s birthday passage continues, she moves directly from her critique of class status, into a critique of her illness:

And then came disease and laid its hand upon its earthly

113 Achsa Sprague, November 17, 1849, 137.
114 Braude, ?. 

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frame, which grew palsied beneath its touch and it was forced to sit down by the wayside in bitterness and sorrow. Week after week, months after month, nay, year after year passed on and yet it hoped, faintly tis true, but yet twas hope; till the hand was lain still more heavily upon its form, and then it laid it full in the dust and gave way to despair. Twas passed, all passed, every dream of youth; and it mourned in such bitterness of spirit as none may know save those who have watched the last light of hope go out, and feel that tis forever. And this is my destiny, mine. My own sad history.

In this section of the birthday passage, written as part of a catharsis, Sprague reveals how “disease” incurred through adverse relationships to wealth, has functioned to eclipse “every dream of youth.” Yet read within the context of the passage in its entirety, both disease and poverty are juxtaposed with “the children of wealth,” who, after having “reached their destination,” continued “drinking large draughts from the inexhaustible spring” [of the waters of knowledge].

Throughout the diary, the author continues evaluating her own condition within the different contexts of medicine, economics and other dominant ideologies such as the rhetoric of progress. For example, on Thanksgiving Day, November 29th, 1849, Sprague critiques a cultural tradition which celebrates a nationality she cannot be a part of in her occupation as impoverished invalid.

If Thanksgiving consists (as I have heard some people talk as though they thought it did) in rich food, then I truly had little reason for feeling thankful, for my food for the last five weeks has been only such as contained no butter, grease or sugar, which usually form so large a part in a Thanksgiving Supper or therefore my share was small.
On July 4th, 1850, Achsa retains her same perspective as relative to connotations of “Independence”:

Independence day, so they term it. It may be so to some but it certainly is not to me. I only feel more deeply my own dependence my own misery. What a strange creature is man! How many among those who celebrate this day with feasting and with the firing of cannon and martial music and give themselves wholly up to mirth and rejoicing, how many think or realize their entire dependence upon each other and upon their Creator? Why then dedicate a day to Independence when there is no such thing on earth?

At this point in the passage, Sprague connects the myth of independence with “our father’s glorious deeds,” thus shifting the traditional connotative meanings of the holiday as a symbol representing independence from foreign domination and “just” domestic society, to a forced acknowledgement of oppressive dependence and perhaps her own desire for a liberating interdependence.

But they will say, ‘tis in honor of our fathers glorious deeds, for the victory they gained over their foes which made us an Independent Nation, and should their memory be forgotten? No, it should never be forgotten but let each as he devoted this day to a remembrance of their struggles, their trials and their victory, think well of the duty he owes his country, his fellow men and his God, and in the solemnity of the thought he will feel his own dependence and grow wiser and better.

This shift shows political reform at work as Sprague has again tied her “dependence” and “misery” into a master narrative that has functioned to create the systemic binaries that produce the poor-woman-as-patient.
As the author moves toward the five year caesura between the diary and the journal, she continues her narration of pain in general, yet Sprague continues writing of the effects of pain on her developing language and vision:

...I must fain content myself as I am. Content myself? As well may the prisoner bound in his cold dark dungeon, feel content when he hears the glad songs of the birds echoing in melody through the air he longs once more to breathe, and feels that the bright shine is resting on the damp, dark walls that close him in forever. Am I not a prisoner in every sense of the word? Is not my mind cramped up in its clay prison house, bound with the strong fetters of disease, which keeps it chained down, when it longs to go forth once more into the world of action, for without action of what worth is life?115

The metaphor for the invalid as “a mind cramped up in its clay prison house,” is a powerful image that is repeated throughout the diary and transformed into literal power for prison reform during her political activism as chronicled in the journal. Although Sprague often compares her sick bed to a prison as she writes, in the above passage she specifically states that it is her mind which is being held prisoner, and that it is a life of cognitive action which she seeks. This offers clarity to understanding the premise for Sprague’s “plan” for the future.

Her last four entries in the diary of 1850 elaborate and detail Sprague’s narrative of the subjects of life and death, freedom and captivity. In these final lines of the diary, Sprague also brings into consciousness her thoughts concerning spiritual guardians. Hints of these thoughts emerge

115 Achsa Sprague, July 7, 1850, 145.
earlier in the diary when the author describes a dying woman, Mary S. Willard, whose death Sprague apparently witnessed. “Oh! such pain, such agony as she was in a short time before her death, I, who had never seen the death of any one thought ‘What an awful thing to die.’”\textsuperscript{116} In the next entry the author contemplates the fate of her friend’s spirit:

How is it that the features wear such expression if the spirit has left the body? I have read some author who advocates the idea that the spirit remains in the body until decomposition commences and I was almost tempted to believe it, as I gazed upon her countenance...

If the spirit lingers not till its frail tenement of dust returns to dust, then must it have been a seal left upon the details of the departing spirit that we might know it could not die, as the setting sun though hid by the mountain still casts its light upon the eastern light as if unwilling to leave it in darkness.\textsuperscript{117}

Through gazing at her deceased friend, Sprague broadens the ideas and languages of spiritualism which she continues to convert to her own purposes.

What hope is there for me but in Death. And what will Death bring? ... Could I but know the future was, as has been represented, a Higher Sphere, and yet Higher Sphere wherein, leaving all pain and sorrow with our frail earthly bodies here, we should grow wiser, happier, better through all eternity, when the soul freed from its earthly felt like an uncaged bird, should stretch forth its Heaven-born pinions through all Immensity, behold the glorious mystery of Creation unfolded to its gaze, know and understand the beautiful Harmony that pervades the whole Universe of Nature and feel the wisdom, goodness and majesty of the Creator, could I but know this, how

\textsuperscript{116}\textsuperscript{116}Achsa Sprague, June 6, 1850, 144.
\textsuperscript{117}\textsuperscript{117}Achsa Sprague, June 7, 1850, 144.
earnestly would I long for the hour when this ‘mortal should put on Immortality.’

Achsa Sprague reveals her plan “Harmony,” a plan dependent on “leaving all pain and sorrow with our frail earthly bodies here”—a plan dependent on “the glorious mystery of Creation unfolded “ to Sprague’s “gaze.” These conditions of dependency which would reverse the site of conflict from the female body to a cognitive sphere of “Immortality.” This transcendence of pain, through a rejection of the body, places the author in the space of the signifier, rather than the signified. By focusing her yearnings on the “mystery of Creation,” and on the “majesty of the Creator,” Sprague approaches a socio-political discourse which reveals to her the power of the creator’s “gaze,” and the authority of the creator’s knowledge. Sprague’s yearning for such agency serves to bring her into a space which will provide the means necessary to confront and resist oppression within master narratives.

In the entry immediately following the above Sprague’s next entry directly asks whether spirit guides could exist:

Today wrote for Abby “To my Mother’s Spirit,” sugested by a discussion among us, as to whether spirits could communicate with mortals. ‘Tis a beautiful idea, that our departed friends are around us and with us, that they can come back to guard us from temptation, to soothe us in affliction and win us from sin. ‘Tis a beautiful idea, but if true, could the world be so sunk in wickedness? Yet if not true it might be still working and I am inclined to think it may be so. Is it not their influence when better thoughts to the heart come back which had almost yielded to sin?

\[118\text{Achsa Sprague, July 8, 1850, 146.}
\] \[119\text{Achsa Sprague, July 19, 1850, 146-7.}
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In this passage it is important to note that the author does not argue for “truth,” but rather for *possibility*, an argument *not* dependent on an assumed truth, but rather dependent on an assumption which will provide action/productivity through a mental/cognitive shift in perception. As she rejects a universal truth and embraces the possibilities created with an acceptance of power obtained through spiritual guides, the author asks, “Is it not their influence...”.

Linguistically, the words “influence” and “influenza” both contain the root word “fluere,” the Italian verb for, “to flow.” Although the illnesses/pains that have confined Achsa Sprague to the sick bed would today be diagnosed as arthritis and not influenza, through the use of language the author continues reversing the “flow” of agency, a reversal which gradually brings her into “health,” thus into the space of public speaking medium.

Following the above passage, Sprague writes, “Let me remember that, to help me cultivate a grateful disposition.” Again, the word “disposition” participates in Sprague’s evolving intellectual and political reversal of the “position”/space of subject as patient. Not only is she adopting a change in mental or emotional attitude, but the author is also adopting a cognitive change in agency that allows a dis-possessed/ill person to assume the position of the possessed/healthy person.

In the isolated 1853 entry situated between the 1849-50 diary and the 1855-56 journal, Achsa Sprague writes of her progress in terms less specifically designating the body:

Oh! how long I have lain bowed down by disease, shut up from the world in darkness and solitude like a prisoner chained down in his dungeon. But all this is now passing away. The chains of disease are falling off my limbs are once more resuming, or -- .

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120 Achsa Sprague, July 24, 1850, 147.
This lone paragraph symbolizes Sprague’s near-complete transition from illness to health, from occupation in the “clay prison house” of illness, to an advocate of prison reform. Braude describes this “coming out” as a successful reversal of the immune system.

Arthritis, especially among young women, has been associated by doctors with repressed anger turned inward. In arthritis, the immune system, designed to ward off threats from without, turns inward and attacks the lining of the joints. For Sprague, the return to health represents a turn outward: a shift from writing in her diary to speaking in public, a shift from the world of the home--deemed appropriate to women--to the outside world deemed appropriate to men.\(^{122}\)

On her 28th birthday, over six years after writing the first lines of the diary, Achsa Sprague writes the first words describing her new life:

> The pages, both bright & dark, of my former life are left unwritten, save in the great Life Book of Eternity. I came to Hartford one week ago to day to speak under Spirit Influence as I have been doing Publicly for the last year & a half. Having been raised from a bed of sickings, where I suffered the most extreme pain by Spirit Agency, I have felt it my duty to do that which has been pointed out to me by my Spirit Guides, & the result is, that I have felt constrained to take the position which I now occupy, that of a Public Speaking Medium...\(^{123}\)

\(^{121}\) Achsa Sprague, February 9, 1853, 147.  
\(^{122}\) Braude, 104.  
\(^{123}\) Achsa Sprague, November 17, 1855, 147.
The “new life” being chronicled in the journal is no longer a life informed by pain, but instead it is a life informed by an agency in the differing political constructs informing Sprague’s new vocation. The language of physical and mental pain which contextualized the diary is now replaced by the plurality of languages of a political ambassador.\textsuperscript{124} Details of her travelings and critiques of socio-political conditions that reduce the subject—man or woman, black or white—to slave, patient, criminal, or “butterfly,” fill the journal’s pages. Her authority for her new vocation/occupation is derived from her previous experiences as patient. One of Sprague’s ideologies at work behind the conversion of patient to lecturer is dependent on a premise which defends the human spirit against “bad social schemes.”\textsuperscript{125}

On November 21st, 1855, four days into the journal, Sprague’s new dis-position is revealed, an intellectual perspective which redefines “truth” using the same desire for action that permeated the diary.

Although this sometimes seems like a wandering life, & the office of a medium a thankless one, yet when my health & strength will but be increased, I think I can bear much of suffering, much of sorrow for the sake of Truth.

The reversals of agency in this statement occur with a new definition of “Truth” incorporating a mandate for the author’s subjective health and strength. Sprague clarifies this statement as she continues the passage:

\begin{quote}
I do not wish to be a Fanatic I shrink from the very idea,
\end{quote}

\textsuperscript{124}In this use of “languages” as plural, I refer to the specific languages or jargons of specific institutions.

\textsuperscript{125}This phrase is quoted from Sprague by Twynham in “Proceedings of the Vermont Historical Society,” V. 9, No. 4 (1941), 273.
but I do wish to act, to do to live an active life & have that life one of usefulness. If I can but see the way that is right for me to go, know positively the work for me to do, have physical strength for the purpose, I feel as though I could throw my whole soul into that work, & though I might sometimes wish to sit down by the wayside, I should ever have the voice within calling me to be up and doing & I could not linger long.

Sprague takes the yearning for action that penetrated the pain of the diary and uses it almost as a witching stick for guidance in decisions concerning her new vocation. Constantly converting her “illness” or inactivity to “health or productivity,” Achsa Sprague incorporates her spirit guides to give her strength as well as vision, authority as well as political security.

Sprague’s yearning to free women from the shackles of patriarchal ideology is a yearning that lifts a veil hiding a false independence. This false independence is criticized by Sprague when she admonishes a woman’s group for voting against a proposition for a woman to lecture in public.

It is bad enough to see men who assume the right to occupy the whole platform for Public Speaking, & the undisputable right as Public Teachers, telling & saying what woman shall or shall not do, limiting her sphere of action & shutting her not only from the Temple of Knowledge as a Public Teacher, but also from the Temple of God; but when woman herself, through a false education which has bound her mind in chains, or a want of independence through fear of public opinion, limits her own sphere, & cannot appreciate those who ask a wider field of labor, if not a higher; discountenance those of her own set who assume only to be followers & teachers of Jesus in whom they believe it is enough to bring the blush of shame upon every womans cheek who has soul enough or independence enough, to brave the
scorn of the world in order to act, to do something for humanity. Woman must either be a slave or a butterfly or at least she is so at the present time.\textsuperscript{126}

Sprague defends women's voice(s) against eclipsing factors which function to polarize women's voice(s) within binaries of inaction and servitude. After writing what she believes to be the social responsibilities of the mother, Sprague closes this passage by asking, “When will woman learn what it is to be true to herself?”

Achsa Sprague performed many amazing transformations during her abbreviated lifetime, including work with healing, prison reform, abolition, and women's suffrage. There is no doubt in my mind that her autobiographical writings played a major role in her socio-political transformations as well as her occupational transformation from sick bed to public podium. Each of these transformations, culminating from a yearning for action and an awareness of intense suffering, functioned consistently to promote peace and justice through negotiation of space—be it physical or cognitive. Her repeated use of the prison metaphor—whether in the context of body and illness, women and suffrage, poverty and privilege, or literal corporal restraint—created an alternative nineteenth-century cognitive landscape where Sprague could examine the social, economic, and political chains that bound her to the sick bed. In a journal entry written January 26th, 1857, Achsa Sprague eloquently summarizes one of her “healthy” speeches on social reform:

I spoke at Salisbury. ...Every foot of the floor was occupied by persons standing, one complete forest of human forms. I was afraid it might discommod me about speaking, but the room was well ventilated & I did not feel the inconvenience much. The subject was most beautifully chosen. It was almost like a test. Room,

\textsuperscript{126} Achsa Sprague, December 10, 1855, 156.
more room, was the motto & the idea was, room for the
human soul, more room.


