Racial Hysteria: Female Pathology and Race Politics in Frances Harper’s *Iola Leroy* and W. D. Howells’s *An Imperative Duty*

Race as Illness

"To be ill is a feminine verb," quipped Dr. S. Weir Mitchell in 1881, lightly putting his quite serious judgment that womanhood itself is a pathological condition (*Diseases of 3*). Indeed, according to both popular and scientific assessment in fin-de-siècle America, the hysterical typified modern womanhood; she was, as Carroll Smith-Rosenberg points out, "characteristically female... the embodiment of a perverse or hyper-femininity" (198). Although hysteria has been the subject of much feminist interrogation, it is a defining model of womanhood whose racial politics have yet to be explored. If, as Hazel Carby argues, race and gender collaborate in antebellum definitions of womanhood—specifically in the "cult of true womanhood"—how must they in the era of Jim Crow? How do turn-of-the-century scientific and literary narratives newly contour *racial* as well as feminine norms? In short, with what effect does the rhetoric of female pathology converge with that of race politics in the 1890s? This essay explores the consanguinity of the "Race Problem" and the "Woman Question" in the "mixed blood" hysterics, represented in both Frances E. W. Harper’s *Iola Leroy* and William Dean Howells’s *An Imperative Duty*.

Contemporary critics have only in passing paired Howells, editor and "father" of American realism, and Harper, author, activist, and founding member of the National Association of Colored Women. The only recognized points in common between their two "race" novels have been their shared date of publication (1892), and the general critical consensus that both are highly compromised works in terms of historical accuracy and/or political efficacy.

Such terms privilege a traditional realist aesthetic invested in mimesis, but as Amy Kaplan observes, literary realism is not about transparent representation—it is about the management of often competing representations, each *claiming* transparency. Rather than assess the novels as examples of failed realism, therefore, we need to consider the palimpsest of scientific and sentimental discourses in *Iola Leroy* and *An Imperative Duty*, wherein "transparent" narratives of race and gender are in fact writ over and against each other. *Hysteria*, a word borrowing from both discourses, becomes a key regulatory term in managing—indeed, merging—what might otherwise be realist languages in conflict. The realist coup of Harper and Howells, I argue, derives not from the faithful reflection of Jim Crow in the 1890s; it derives from the ingenious manipulation of the dominant languages of realism to

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create what Kaplan calls an “alternative reality” to Jim Crow. Both Howells and Harper explore the sexual politics of race through the “tragic mulatta,” but unlike mid-nineteenth-century sentimental narratives, An Imperative Duty and Iola Leroy narrate the young woman’s racial coming of age as a medical condition. Both the novels’ mulattas are attended by physicians who locate the etiology of neurasthenia in miscegenation, moving the mulatta from genre type to case study, from “tragic” to “hysterical” figure.6 Because diagnoses of hysteria represented, in part, a professional articulation of womanhood, it was a gendered—and gendering—discourse. Medical studies by Mitchell and George M. Beard suggested, further, that nervous diseases (on the continuum from dyspepsia to insanity) were also race- and class-specific: Women of color, they concluded, lacked the extreme feminine sensibility and degree of cultural refinement marking the developed neurasthenic.7 The racial coding of hysteria (and related disturbances of the nerves) as a middle-class white woman’s disease meant that it was not simply a condition of “modern” women, but also functioned as a condition for womanhood and modernity in Victorian America. Although Mitchell and Beard trafficked in similar racist assumptions, their arguments are particularly significant in their modification of earlier equations between white women and blacks based on putative similarities in brain size and intellectual capacity, which suggested that women’s “psychological and anthropological peculiarities ... seemed to relate [them] to the inferior races” (Haller and Haller 68). In contrast to these earlier homologies, hysteria increasingly operated as a clinical color-line between the more or less “civilized,” linked to the tendency toward juridical segregation of race and gender at the turn of century. As Anna Julia Cooper explained in 1892, restrooms labeled “For Coloureds” (read ‘for black men’) and “For Ladies” (read ‘for white women’) left women of color not only embarrassed but in an epistemological quandary: In both senses of the word, where were they to go?8 Such labels made African-American womanhood a legal oxymoron, just as hysteria rendered African-American womanhood a medical oddity. The “racial hysteria” in Howells’s An Imperative Duty and Harper’s Iola Leroy plays both with this racialized notion of hysteria (and womanhood) as white and more generally with public anxiety about racial contagion in women.9

The striking parallels between Howells’s only full-length treatment of race relations and Harper’s best known novel suggest the cultural authority of medical discourse across genre and color-line.10 Once the respective mulattas, Rhoda and Lola (who are raised white, look white, and act white—that is, racially privileged) discover their “one drop,” they are counseled by and later married to doctors. With this treatment (both narrative and medical) neither Rhoda nor Lola dies, as did so many of their literary predecessors. The authors’ revision of the tragic mulatta is predicated upon the shared investment in—if varied modification of—the newly professionalized “sciences” of philology, psychiatry, ethnology, and especially medicine. Out of the flux of contested orthodox and emergent theories, these often loosely bounded disciplines began institutionalizing a pathology of race which underwrote much of the literary and political language concerning interracial relations for the next century. As Sander L. Gilman has argued, medical theory and practice increasingly defined Jews, African Americans, and ethnic Others in terms of mental illness, physical disease, and criminal degeneracy. Indeed, scientific studies, military research, and medical data associated high morbidity and mortality, especially from tuberculosis and syphilis, among African Americans with an innate racial susceptibility to systemic weakness.11
In this imbrication of scientific and popular narratives, simultaneous accounts of feminine neurasthenia and racial disease rescript, as they partially obscure, each other. The effect in An Imperative Duty and Iola Leroy is that the double afflictions of race and gender in the novels’ neurasthenic mulattas, Iola Leroy and Rhoda Aldgate, are a function of each other: racial conflict becomes a crisis of gender, and female hysteria, a sign of racial dis-ease.

In Howells’s novel, for example, when Rhoda—raised white by her white Aunt Meredith—discovers she is “mixed,” Aunt Meredith is sedated for her violent neurasthenic response to Rhoda’s “ancestral infamy” (30) and her “hysterical haste” (37) to broadcast Rhoda’s bloodlines. Rhoda, herself, displays “hysterical weakness” (87) over her “nigger descent” (31). Similarly, in Iola Leroy, Iola—raised white by her mother—“breaks into peals of hysterical laughter” (106) upon discovering her racial identity when her white Southern father dies. Her mother, Marie (also a “nervous” mulatta [80]) suffers from “brain fever and nervous prostration” (107) when remanded into slavery upon her husband’s death, and Iola’s sister Gracie dies of the “nervous shock,” just like two other “poor girls,” we are told, who are similarly struck dead “as surely as if from a blow” (100). Iola survives what is for others a fatal verdict of race, yet she inherits not only the “condition of the mother”—the historical euphemism for slavery—but also her mother’s “nervous condition,” an analogous embodiment of racial anxiety about enslavement.12

Rhoda’s courtship by a white physician secretly informed (though Rhoda does not suspect it) of the girl’s “anomalous origin” (38) by Aunt Meredith. Thus, for Dr. Olney she becomes a figure who merges race and gender, the primitive and the civilized, the past and the present:

It was Rhoda’s elder world, the beauty of antiquity which appealed to him . . . the remote taint of her servile and savage origin gave her a kind of fascination which refuses to let itself be put into words: it was like the grace of a limp, the occult, indefinable loveliness of a deformity, but transcending those in infinite degree, and going for the reason of its effect deep in the mysterious places where the spirit and animal meet and part in us. (90)

Olney metamorphoses the tragic mulatta from aberration to archetypal woman through a kind of alchemic eroticism, transforming the physical disfigurement of race—Rhoda’s “limp,” her “deformity”—into the metaphysics of gender—the “occult” grace of a woman.13 In effect he translates stereotyped race traits into gender attributes, turning Rhoda’s “servile origin” (and the source of her hysteria) into the very basis of his desire. She is superior to the “tame, blonde, Northern type” (89) because her link with the primal places her before and, paradoxically, above the more “advanced” and domesticated Anglo woman.

Similarly, in Iola Leroy, Iola’s white father, Eugene, argues that it is precisely his wife’s lowly origins which make her near supra-feminine. He defends his desire to marry Marie, a “quadroon girl,” despite the insistence of his racist friend Lorraine that women of color have no “virtue” and are “willing victims” (70) of sexual violence, because she is so appealingly “helpless” (65), the subject of masculine “pity” (67). Her “defenselessness,” he says, is the “best defense” (65). By linking the “supremacy of her virtue” (70) with the racial potential for victimization, Eugene finds in Marie “something different from all [his] experience

Off-Color Patients

In An Imperative Duty and Iola Leroy, however, this conflation of infirmities becomes symptomatic of a new feminine ideal. The plot of An Imperative Duty revolves around
of womanhood. . . . It was something such as I have seen in old cathedrals, lighting up the beauty of a saintly face" (69). Like Olney in An Imperative Duty, Eugene is attracted to this union of "spirit and the animal" (Howells 90) because the union of high and low makes ex-slaves (or the descendants of slaves) exemplary wives. Within these "new" women inhere the most alluring characteristics of the "good ole" slave: faithfulness, loyalty, obedience. Eugene falls in love with Marie's service to him as a "faithful, devoted nurse" (72) during his Civil War service as a wounded soldier; Marie's daughter Iola acts so much like a "born nurse" that her white suitor or Dr. Gresham begins "talking like a lover" (56).

Although the notion that traces of the weaker race enhance those of the weaker sex appears simply to conflate stereotypes, it does complicate ideologies of the "angel of the house." In Harper's novel, for instance, images of nursing or teaching, and the desire for "labor [to be] more honored among women" (210), undermine the doctrine of separate spheres for the sexes. And both Iola Leroy and An Imperative Duty revise the racial exclusivity of angelism: Olney wishes to grant Rhoda feminine privilege, to make her "purely and merely a young lady, like any other" (38); she is a girl, as W. E. B. Du Bois writes in a review of An Imperative Duty, who "goes her way as thousands have done and are doing" (1147).

The feminization of race (and with it a limited refiguration of the terms of Whiteness) makes possible the mulatta's status as representative Woman—and simultaneously establishes her as model patient. Mitchell's feminine infinitive ("to be ill") linguistically grounds the female body as a site of unrest, and the American Medical Association increasingly intervened in such forms of physical and social dis-ease, legislating women's bodies in the 1890s and '90s by successfully working to ban abortion, restrict birth control, and require forced gynecological exams for prostitutes (see Smith-Rosenberg 24). As the AMA's involvement suggests, much of the "business of the physician," as Mitchell called it (Doctor 131), involved plotting the body to establish a position of cultural authority from which to narrate social change. In his own writings (both fictional and nonfictional), Mitchell diagnoses the social as well as physical body—dispensing medical judgments, literary advice (he was "offended" by the realism of Norris and Dreiser), and rules about public etiquette. Howells's literary correspondent and his daughter's erstwhile physician, Mitchell represented the vast cultural and moral arbitration of the doctor.

With what he called his "clinic in every book," Mitchell assumed the influence of the literary intellectual at the turn of the century. The physician becomes the literary realist, the "Editor's Study" now at bedside. In turn we witness the realist cum diagnostician in the extraordinary sketch of Howells which appeared in an 1886 edition of Tid-Bits (see Fig. 1). Howells may hold the surgical instrument like a butter knife, and stare off as if preoccupied, but the "Demonstrator of the American Girl" clearly illustrates the suturing of literary arena and medical theater. Posed as though in one of Eakins's clinics, scalpel in lieu of pen in hand, Howells prepares an incision/inscription on the woman prone and exposed beneath him.

Because their female, racial bodies are the most epistemologically contest-
ed, Rhoda and Iola become the patients most in need of such aid. All the physicians—Drs. Gresham, Latrobe, and Latimer in *Iola Leroy*, and Dr. Olney in *An Imperative Duty*—offer both medical intervention and a moral therapeutics to heal their off-color patients. Combining “the functions of the priest and the leech, especially in the case of nervous ladies” (24), Dr. Olney seeks to protect the sacred mysteries of Rhoda’s birth by keeping them within a decidedly genteel gynecological domain, explaining the “cross in her blood” (100) as a “woman’s problem.” When the doctor is consulted about Rhoda’s “future”—that is, her marital prospects—he “perceived as never before that there was an inherent outrage in the submission of such questions to one of the opposite sex; there should be women to deal with them” (31). Her racial past incites both desire and indignation in the doctor because of his unspoken association of miscegenation with interracial rape and illicit relations: Seeing Rhoda’s aunt’s desire to disclose the girl’s “anomalous origins” as “impertinent” and “squalid” (31), he reacts to her racial “stain” (30) as though he’d lifted her skirt—“getting red with shame at what he’s been told against his will” (38). As Hortense Spillers puts it, the mulatta allows white society “to say without parting its lips that ‘we have willed to sin’” (168). Thus, out of a stimulated, if embarrassed, sense of willing complicity in white sexual violation, Olney finds that it is “atrocious for Mrs. Meredith to have allowed her hypochondriacal anxieties to dabble with the mysteries of the young girl’s future in that way” (31). Professing superior discretion as a physician, Olney decides to keep in confidence what women like Mrs. Meredith will not.

Similarly drawing the bounds of good taste and the limits of medical practice, the white doctor in *Iola Leroy*, Dr. Gresham, also believes that, as, apparently, “a woman of fine culture and good breeding,” Iola should “bury” (60) her “secret” (57). The “complexion of affairs” (58) so distresses Iola that Gresham warns that she will “soon be our patient instead of our nurse” (60); and in fact the “continuous strain upon her nervous system” causes her “to suffer from general debility and nervous depression” (112), and so requires the assistance of Dr. Gresham—just as Rhoda turns to Dr. Olney (100).

The doctors’ diagnosis of racial hysteria carries with prescriptive force; as Mitchell puts it, physicians must tell the afflicted woman “what is real, what is unreal, what must be respected, what has to be overcome or fought” (*Doctor 131*). In both novels, the “real” is administered with a dose of professional sobriety meant to heal the mulatta of the sentimental hyperbole of her “tragedy.” Gresham thinks he can banish the “dread” “shadows” (231).
that he believes Lola fears, and Olney suggests that Rhoda’s race must be
examined “in no lurid twilight gloom, but in plain, simple, matter-of-fact
noonday” (94), echoing Howells’s
famous prescription for realism—the
“simple and honest truth . . . as unphi-
losophized as the light of common
day” (“Criticism” 14, 39).18 Both men
secure the boundaries of reality
through complete patient allegiance,
determining the significance of
the women’s racial status through a
process of confession. A distraught lola
tells Dr. Gresham the “secret of my
birth” (111), and Rhoda finally “gasps
hoarsely” that she is a “negress!” (94).
The centrality of the confession to both
novels, and the fact that the “nervous
specialist,” as Dr. Olney muses, “must
crush his patients before he begins
to prescribe for them” (20) is tied to the
bid for what Paul Rabinow calls the
“keys to interpretation.” The doctors
claim a racial literacy that the woman
herself is represented as lacking
because “of deep bodily opacities
which only a specialist [can] interpret”
(Rabinow 135). As confessor, the physi-
cian becomes the clearing-house for
patient self-disclosure, because the
mulatta’s racial “opacity”—her “nei-
ther/nor” status, her inner struggle
about racial alliances—seems to
require professional insight.

The act of racial confession, how-
ever, both gives the “keys” to special-
ists and reveals how easily the door
can close on white authority. Despite
the defensive insistence of scientists
like Dr. Latrobe in Iola Leroy, who
claim that “there are tricks of the blood
which always betray them” (229), con-
fessions are reminders of the constant
threat of passing. Because generational
miscegenation left physiognomy and
color unreliable markers of race, and
depite philologists’ attempt to find
linguistic litmus tests for race, volun-
tary revelation of the “one drop” was
the only reliable form of disclosure.19
In the novels, this anxiety is empha-
sized to the degree it is preempted:
Unbeknownst to the women, the doc-
tors are already privy to their racial
histories (Olney from Rhoda’s aunt,
Gresham from a friend) before they are
taken into the women’s confidence.
Their confessions, then, seem simply to
reiterate the doctors’ own knowledge
(Gresham never admits he had previously
known; Olney only belatedly
reveals it) and thereby confirm an
authority apparently never in question.
And should such actions ever appear
underhanded, Olney is careful to insist
that no physician misleads “against
[the] will” of the patient—that is, so
assures Mrs. Meredith, no doctor will
“cheat his patient” unless “he has some
sign, some petition for deception, from
the patient” (22).

Of course, doctors can be cheated
as well. As if to preclude the possibility
of patient deception, doctors mediate
racial identity by controlling the circuit
of information.20 But in Iola Leroy, the
black Dr. Latimer violates the medical
guardianship of white male authority
with his own confession of passing to
his white colleagues—most devastat-
ing because it comes from within the
profession. The white Dr. Latrobe (who
prides himself as “clear-sighted
enough to detect the presence of negro
blood when all physical traces had dis-
appeared” [239]) assumes that Latimer
is one of “us” until the latter reveals
himself as Other by declaring that he is
“one of them” (238). Latimer replaces
the white physicians’ racial brokering
with his own, coming to quite different
conclusions, as I will explain, about
Iola’s “race” and its social conse-
cuences (263).

Doctors in Love

With such high stakes for mas-
culinity (white and black), it
is almost predictable that the profes-
sional confession is transformed into
spousal covenant when the physician
becomes a practitioner of love. This
confusion of roles and pursuits imparts
a certain virility to doctors, whose vast authority is, in turn, made manly. Mitchell argued that physicians "make good husbands... due to... their knowledge of the difficulties of feminine life" (Doctor 99), and as the physician's scrutiny and the lover's gaze become one in these novels, Drs. Olney, Gresham, and Latimer claim intimate knowledge also of the women's racial life. All of them propose marriage as the cure for the mulatta's "crisis" (Howells 98). In Iola Leroy, for instance, Dr. Latimer offers a matrimonial tonic for the stress of racial uplift:

"As a teacher, you will need strong health and calm nerves. You had better let me prescribe for you. You need," he added, with a merry twinkle in his eyes, "change of air, change of scene, and change of name."

"Well, Doctor," said Iola, laughing, "that is the newest nostrum out. Had you not better apply for a patent?"

"Oh," replied Dr. Latimer, with affected gravity, "you know you must have unlimited faith in your physician."

"So you wish me to try to faith cure?" asked Iola, laughing.

Even after she has accepts his proposal, Iola continues to call him "Doctor" (272-73), just as she calls her earlier suitor, Gresham, "Doctor," after he, too, confesses his love. And Dr. Olney, in Howells's novel, cajoles Rhoda "as if she were his patient" (98) in order to convince her to marry him.

Despite the similarities between both novels' courtship rhetoric, however, only the black doctor argues for marrying within the race. Latimer's "faith cure" (270) weds racial "struggle" (Harper 271) to the "bonds of affection" (267), in contrast to Gresham and Olney, who pit conjugal fidelity against racial loyalty. Gresham's offer to Iola of maternal surrogacy ("having my mother be your mother" [116]) is directly at odds with her sister's injunction to "Stand by mamma!" (118)—that is, to stand by her mother's race. Latimer's proposed course of treatment runs directly counter to the miscegenetic resolution to the "race problem" suggested by the white Gresham, and in An Imperative Duty by Dr. Olney.

If for white physicians, matrimony attempts to domesticate racial angst in order to foreclose political desire, for the black physician, the idealization of marriage represents what Claudia Tate terms a "domestic allegory of political desire." Tate convincingly argues that intraracial marriage in Harper's novel is reformist in part because it "dramatizes the novelist's refusal to discredit African-American identity, solidarity, and racial equality" (99). And certainly Iola's acceptance of Latimer exposes the impotence of whites like Gresham, who is both dismembered (a war injury leaves him with a "sleeveless arm" [144]) and whose suit is twice rejected. But the historical terms of marriage themselves are also refused. The "peculiar institution" is represented as continuous with the "holiest institution": Eugene's friend Lorraine, for instance, unwittingly indict both marriage and slavery when he suggest they are redundant arrangements. As he points out, under the law of coverture, women are the legal possession of the white man; thus, according to Lorraine, slavery makes marriage redundant: Marie is already "your property, to have and to hold to all intents and purposes" (65). Gresham's proposal, too, resonates with the language of possession: "Consent to be mine, as nothing on earth is mine" (112, repeated verbatim on 230). And even those women who are willingly à coverture risk becoming mere commodities. Eugene's marriage contract with Marie—and her Pygmalian remaking from ignorant "ward" (73) to educated wife—for instance, does not protect her from reenslavement as chattel. Nor does it prevent Lorraine's insistence that women of color are not the victims but (referring to black mistresses) the "curse of our Southern homes," attributing to them white men's own culpability and destructive agency.
Indeed, the very language of wedlock enables this projection, whereby
white men recast themselves as “victims”: In *An Imperative Duty,* for
instance, Olney jests that Rhoda will keep him in “hopeless slavery as long
as [he] lives” (98). If Olney denies his
own power in such relationships, both
white doctors also seem oblivious to
what, in Iola’s words, “might result
from such a marriage” (117): Gresham
pauses at the mention of children who
show “signs of color,” and at the end of
the novel, Olney and Rhoda are living
childless in Italy. Only Dr. Latimer, it is
implied, is the “sort of man” (Howells
97) to not only marry a woman of color
but also father children by her.

Marriage, then, asserts the masculine
prerogative of the white doctors even
as it marks the absence of paternity, the
traditional marker of masculine pre-
rogative. The white doctors’ apparent
inability to conceive (or conceive of)
children is, however, balanced against
the implication that offspring represent
a sort of “health risk.” Since passing is
part of the cure, Olney and Gresham
agree the mulattas’ race should be kept
a secret from the public—and children
pose the threat of transmission. 22

Given its criminal status since the
early seventeenth century, interracial
marriage has often been considered a
progressive solution to racial strife. 23

But, like William Byrd’s comment in
1728 that a “sprightly Lover is the most
prevailing Missionary” since “a Moor
may be washt white in 3 Generations”
and “an Indian . . . blancht in two”
(4), 24 Dr. Gresham’s belief that “the
final solution of this question will be
the absorption of the negro into our
race” (228) and Dr. Olney’s argument
that “sooner or later our race must
absorb the colored race” (27) make
clear that the conjugal bed simply
offers a more intimate form of colo-
nization. The fact that both Drs.
Gresham and Olney advance this theory
without elaborating their own role
as progenitors of a “washt white” gen-
eration presumes that the “final solu-
tion” is cultural as well as physical,
that even a childless marriage is an act
of “absorption.”

By moving the question of social
protest to the bedroom, the white doc-
tors also reflect the political shift in Jim
Crow legislation from public concerns
about states’ rights to those concerning
private rights of association. Ironically,
when Gresham argues that “no one has
the right to interfere with our marriage
if we do not infringe on the rights of
others” (234), he is invoking the legal
prerogatives of personal contact (to
be—or not to be—with whomever one
chooses) undergirding the 1896 Plessy
v. Ferguson ruling on separate-but-
equal public accommodations. 25 Both
he and Olney believe that mutual
silence—a “don’t ask, don’t tell” policy—ensures that miscegenation will
“not infringe on the rights of others”
potentially offended by interracial cou-
pling. Olney actually argues that pri-
ivate contracts *fulfill* public responsibil-
ity, that their marriage is racial uplift.

In response to Rhoda’s “imperative
duty” to help her race, he insists that
“the way to elevate them is to elevate
us. . . . Begin with me” (96). The talis-
manic appeal of the couple crossing the
color-line derives in part, as Albert
Memmi suggests, from the naïve hope
that the interracial pair exists as an
“isolated entity, a forgotten oasis of
light in the middle of the world” (vii).
Both Gresham and Olney offer as poli-
tical solution the mythic inviolability of
interpersonal relations, of bonds which
would precede and transcend culture.

The Romance of Race

This “halo of romance” (Harper
110) and the “occult lovableness”
(Howells 89) surrounding the novels’
mulattas seem to remove *An
Imperative Duty* and *Iola Leroy* from
the “light of common day”—and thus
from most critical accounts of literary
realism. 26 Rather than the “matter-of-
fact noonday” light that Dr. Olney calls

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upon, Howells, argues Anna Julia Cooper, "attempts merely a sidelight in half-tones" (201). If Howells was criticized for painting with insufficient light, Harper’s novel, until most recently, has been neglected in part because her characters seemed too brilliantly lit, too idealized in the name of racial service. Yet just as romantic idealization, as Claudia Tate suggests, lays claim to reality, realist literature in turn makes, in Howells’s terms, "reality its Romance" (qtd. in Sundquist, "Country") 9. The medicalization of the mulatta and of her sentimental plot in both these novels puts the lie to any easy generic distinctions among realism, romance, and racial uplift fiction.

In An Imperative Duty, for instance, Dr. Olney’s medical expertise—his realist’s tools—calm Rhoda’s racial hysteria, but it is "love [which] performed the effect of common-sense for them...... V... in its purple light they saw the everyday duties of life plain before them" (99, emphasis mine). It is crepuscular rather than "noonday" light—the mixing rather than contrasting of light and dark—which sober up the couple. In fact, this mixing—of light and of "blood"—offers a kind of moral aesthetics for Olney, who resists seeing the world in conflictual black and white, as does Rhoda’s aunt. Mrs. Meredith is capable of "atrocious cruelty" because "right affected her as a body of positive color, sharply distinguished from wrong, and not shading into and out of it by gradations of tint, as we find it doing in reality" (24).

In a "purple light," then, Rhoda’s "tragic family mask" (14) is not so much discarded as it is trooped, becoming similar to what Howells, in The Years of My Youth, terms the "mask of fiction" necessary for self-realization: "No man, unless he puts on the mask of fiction, can show his real face or the will behind it" (57). As Eric Cheyfitz argues, Howells develops a "romance of realism" (42) whereby identity emerges through idealization, through narratives which make possible a "real" self of the "highest effect" (57).

Cheyfitz offers the example of Madison Woodburn and Fulkerson in Howells’s A Hazard of New Fortunes: "As soon as [Miss Woodburn] begins to conceive of Fulkerson in... 'chivalrous' terms, he begins 'to see [himself] in that light.'... [she] realizes Fulkerson through idealizing him" (56-57). Similarly, in An Imperative Duty, Olney listens to a potential suitor and rival, Bloomington, tell of how he could "almost wish for the direst misfortune, the deepest disgrace... to befall [Rhoda], if only that I might show her that it counted nothing against her, that it counted everything for her!" (81). Olney, in turn, is moved to behave in a similarly "generous" (80) and "noble" (81) fashion: He realizes that "such a lover could be told everything... knew this from his own thoughts as well as from the other’s words; he himself was like the spirit he conceived; ‘Du gleichst dem Geist den du begreifst!’" (81).

Through Bloomington’s tearful professions of love, Olney not only conceives of himself as "someone who can be told everything" (i.e., about Rhoda’s race), but also conceives of Rhoda’s "deepest disgrace" as something that "counted everything for her." She, too, becomes a "Geist den du begreifst," although in this case the Geist is a racial spirit, described as an "inherited mask," a "family face" (13).

An Imperative Duty is, finally, not interested in unmasking at all. Rhoda’s "classic mask"—which reminds Olney of the "Clytie head" (13)—is a kind of ideal racial pose, less Grecian than Southern. A mulatta, born in the South (19) but living in the North, Rhoda embodies Howells’s "national fantasy" of Reconstruction; her marriage to Olney, reconstructed as a union between North and South, recapitulates her own corporeal embrace of black and white. In her mourning black at her aunt’s funeral, Rhoda assumes a Southern aura: "Black singularly became her. It is the color for the South, and for Southern beauty; like the inky shadow cast by the effulgence of tropical skies. . . . The girl’s inky
splendor dazzled him from the sable cloud of her attire” (89). Here, ironically, black rather than white represents Southern womanhood, and, oddly enough, Rhoda’s “sable” clothing serves as a nostalgic reminder of her “sin-born” (54) origins in the Old South—its equatorial tropics linking it with an Adamic (pre-Civil War) past. The past Olney yearns for is expressed, as is his desire for Rhoda, through the sartorial: He longs for the older generation of blacks who resists the “barbaric taste” of the younger set in favor of darker clothing, “invariably delightful to him” because it “subdued itself to a sable which left no gleam of white about them but a point or rim of shirt collar” (7). Rhoda’s “sable” attire, at once emphasizing her blackness and “subduing” its effect, similarly signifies race in its proper place. Her marriage to Olney resolves the race question through a romantic circumvention of “social equality” (20).

In An Imperative Duty, this modern “solution” is also historical recompense, for it is the “father’s race” (23) which is to blame: “Shame to the man who called himself [her grandmother’s] master!” (94), Olney declares. In fact, it is Rhoda’s “white” blood, her paternal lineage, which is identified as the source of her nervous problem: “If Olney ever had any regret it was that the sunny-natured antitypes of her mother’s race had not endowed her with more of the heaven-born cheerfulness with which it meets contumely and injustice. [Rhoda’s] struggle was with that hypochondria of the soul into which the Puritanism of her father’s race had sickened her” (101). Rhoda’s hysteria, then, represents the curse of the sinning fathers, of the Anglo-Saxon men who first enslaved her ancestors—and in some sense of Howells himself, who feared his own daughter, Winifred, had inherited the neurasthenia with which he, and his wife Elinor, had struggled their entire lives.

In fact—most compelling in funereal black (89)—Rhoda darkly resur-
rects Winifred. An Imperative Duty was written only two years after Winny had died from “hysterical complications” under the care of S. Weir Mitchell. Like Rhoda, Winny’s entrance onto the social scene—her “coming out,” for which the Howellses had rented a Boston house—was disrupted, canceled by her morbid illness in the fall of her seventeenth year. Her death left Howells with feelings of intense guilt and the fear that she had succumbed to what John Crowley has called the Howellses’ “economy of pain,” in which each family member “took turns, as it were, breaking down” (90). Olney finally takes Rhoda to live in Italy, the same Italy for which he is at the outset of the novel—and Howells was as a youth—“very homesick” (8). Indeed, Howells’s frequent trips to Italy were a “return to life” for his “nervous personality” (Cady, Road 95). But like Olney’s failed scheme of setting up practice where he might treat “the nervous Americans who [come] increasingly abroad every year” (9), Howells’s attempt to resolve domestic tragedies abroad—healing national and personal grief through expatriation—offered deprecating returns.31

Only Rhoda’s racial Geist seems to transcend both nation and grave. The defect of Puritan “hypochondria of the soul,” though “sickened” in Rhoda, is muffled by her African “cheerfulness”—the “cross in her blood” (100) apparently the “cure” Howells never found for Winny. Indeed, Rhoda’s maternal “antitypes” (101) might possibly reinvigorate the national racial stock, just as the young Irish women whom Olney assesses “scientifically . . . might give us, with better conditions, a race as hale and handsome as the elder American race,” though he finds that “the transition from the Old World to the New, as represented in them, was painful” (4).32 If Rhoda’s “Old World” blood proves redemptive for a modern age, however, only Olney—dispelling Rhoda’s hysterical fears “as if he had literally rescued her from her own
thoughts of herself” (100)—can redeem her, becoming the savior that Howells could not be. Thus, in the end, the mulatta offers a remedy not only to Anglo-Saxon morbidity but also to paternal guilt.

There is no similar Great White Hope in Iola Leroy; the white doctor—like Lola’s white father—saves no one. But like Rhoda, Lola and her nerves represent racial and national futurity. Dr. Latimer assures Lola that—like her—all African Americans will “catch the fever and fret of the nineteenth century soon enough” (269), although, for that very reason, hysteria signals also postwar generational boundaries within the race. The ex-slave Aunt Linda, for instance, refuses to learn to read, insisting that “it would gib me hysterics if I war to git larnin’ fro my pore ole head” (156). Although she is spirited—giving licks to selfish white folks, to the intemperate, to the politically unscrupulous—she will not take advantage of the postwar benefit of education. All concerned in the novel recognize that, for better or worse, she does not fit into the new social order; the incongruous image of a hysterical Aunt Linda—of the salt of the earth gone witless—suggests an almost physiological breach between pre- and postwar epochs.

As a mark of modernity, then, neurasthenia heralds the cultural initiation of African Americans specifically through the refiguration of womanhood. Even the single instance of male hysteria in Iola Leroy demonstrates the way in which a “feminine” illness enables as well a recuperation of the racial masculine. Early in the novel, after discovering he is not all-white, Lola’s brother Harry experiences a womanly “swoon” (120), a psychic response even more marked than his sister’s. After months in a hospital, he recovers, however, because of his “excellent constitution” (123), and serves in a black Civil War regiment which does well because the “boys . . . possess greater breadth of physical organization and stronger power of endurance” (134) than others. If Harry is at first a “case that baffles” (121)—because both his racial and his gender status are unstable—his successful Civil War service retroactively confirms his masculinity by revising castrating notions of African Americans as effete and insensible. That is, Harry does not so much overcome his illness as he grafts modern sensibility to masculine exertion in the name of national service. Indeed, Harry’s “distinguished malady” (Lutz 4) seems to herald his wartime valor, for it establishes his participation in the modern national temper. As George Beard put it, “American nervousness is the product of American civilization,” and makes “necessary and possible a new and productive country” (qtd. in Lutz 4, 6).

Thus, because African Americans represent the potent salvation of white America in both novels, Iola Leroy and An Imperative Duty strikingly reverse orthodox theories of African-American physical and civic degeneracy at the turn of the century. Structured by the medical discourse it seeks to exploit, Harper’s racial uplift project and Howells’s realist work risk the circulation of canards of racial and feminine infirmity in order to rencieve them. If for Dr. Mitchell there is a “host of enemies” (Doctor 131) within nervous women, then for Howells’s and Harper’s white doctors, race is the enemy within—at least initially. But by both novels’ ends, the mulatta/o, in particular, is no longer the sign of racial entropy, but a medium for personal and national restoration. Further, if in Harper’s novel, Dr. Latimer cautions Lola that she is growing “morbid and nervous” (269) because of her mixed heritage, it is not her race which he describes as the “enemy within,” but the social consequences of racism without. The “best blood is African” (208), insists Latimer; thus Lola does not belong to an “effete and exhausted people, destined to die out before a stronger race” (247), as the Honorable Dugdale, describes it. Instead, in what Nancy Stepan and Gilman term “trans-
valuation" (92), the feminized "disabilities of color" (Harper 233) represent the legacy of slavery, not of blood. Despite these novels' very different racial agendas, finally, both suggest that racism, not race, is the "disease" (Harper 216), "plague" (86), "virus" (239)—the "deadly cancer eating into the life of a nation" and the "wound too deep to be lightly healed" (131).

Notes

1. S. Weir Mitchell's Diseases of the Nervous System, Especially in Women, Doctor and Patient, Fat and Blood and How to Make Them, Diseases, and "The Evolution of the Rest Cure" were all written at the turn of the century. See Kadan for an excellent review of Mitchell's fiction.

2. See also George M. Beard, M.D. For contemporary scholarship on medical literature in the United States, see also Rosenberg, Gosling, Haller and Haller, Ehrenreich and English, Sontag, Fallman and Fallman, Drinka, Poitier, Ofsen, Sicherman, Weiner, and Lears (esp. 47-58).

3. In Reconstructing Womanhood, Carby discusses the ways in which the tenets of the cult of true womanhood (piety, purity, domesticity, submissiveness) are set in contradistinction to stereotyped characteristics of black women (as libidinous, feral, aggressive, etc.). On the tenets of "true womanhood," see Welter.

4. See Warren (66-70), who briefly compares both novels in relation to each other, and Baker (Working Days 30-34), whose critique of Iola Leroy is representative. Iola Leroy is Harper's best known novel (along with her recently rediscovered Minnie's Sacrifice, Sowing and Reaping, and Trial and Triumph), and An Imperative Duty is one of Howells's least known (and most poorly received) novels. One reason for critics' resistance to comparing the two writers stems from the fact that Howells's racial agenda for literature, made explicit in his influential preface to Paul Laurence Dunbar's Lyrics of Lowly Life (1880), significantly differed from that of many black middle-class writers, including Harper. See Baker, Modernism for a reevaluation of what constitutes a black bourgeois aesthetics. See Neilsen on the (limited) role of Howells as a charter member of the N.A.A.C.P., his patronage of Paul Laurence Dunbar, Charles Chesnutt, and others, and on Howells's image of the mulatta.

5. Kaplan, Social. 11. Kaplan's excellent study of realism focuses primarily on class issues, though I would extend her reassessment of realism to novelists' treatment of race relations as well.

6. For one of the first critical discussions of the mulatta in Iola Leroy which notes Harper's revision of the type, see Carby's "Introduction" to the 1987 Beacon Press edition of the novel, esp. xxi-xxiii. The most reviews of Iola Leroy, including those by Alice Walker and Barbara Christian, have seen the mulatta as simply, in Deborah McDowell's words, a "static, disembodied, larger-than-life" (95) character whose physical appearance accommodates white ideals of femininity. My point here is to suggest that, far from being either "disembodied" or "accommodating," Harper's mulatta bodily enact the contradictions of race and gender. For further discussion of the traditional tragic mulatta, see Spillers, Berzon, Williamson, Sanchez-Eppler, and Yellin.

7. See George Beard's "tree of nervous illness" in American Nervousness, rpt. in Lutz. As Lutz points out, neurasthenia was first linked to Civil War amputees and later evolved into a "fashionable," peculiarly American disease. See especially Rosenberg, Haller and Haller, and Ehrenreich and English on the relationship between hysteria and middle-class white women's agitation for economic and political rights.

8. See Cooper 98.

9. The "hysterical" fear of "contamination"—specifically, of intimate interracial relations—inform not only Jim Crow but also became the public rationale for race riots, public lynchings, and immolations following Reconstruction. For a discussion of how the Southern white woman becomes a trope for the "violated" social body, see Woodward and Harris.

10. Other shorter pieces of Howells in which race (I am focusing here on African-American rather than Irish) figures in more than a passing way include Howells's 1860 poem "Old Brown" (about the John Brown episode), published in the Ashland Sentinel, "The Pilot's Story," printed in the Atlantic Monthly, the sketch "Mrs. Johnson" (1868), and A Chance Acquaintance (1873).

11. See Gilman on Jews and racial disease, as well as his work with Nancy Leys Stepan. The rhetoric of racial illness was rendered all the more alarming in the context of government speculation about black troops' racial "uniformity" for military duty during the Spanish American War, as well as Theodore Roosevelt's warnings of "race suicide"—the fear that epidemic black and immigrant birthrates would outpace white fertility, resulting in a racial eclipse of the "healthier" white population. See Kaplan, "Black" and Lutz (10) on the link between Roosevelt's theories of race and neurasthe-
nia. For accounts written specifically about blacks and nervous illness in the U.S., see Vol. 11 of The Index Catalogue of the Library of the Surgeon General's Office, U.S. Army, 2nd series, esp. McKie and Mays. Many of Thomas Dixon's novels—and W. D. Griffith's film Birth of A Nation, based on Dixon's The Clansman—represent the mulatto mongrel as a sign of racial and political decay. For a sense of the international discussions about race and hysteria, see Pilcz.

12. In both cases, the traditional assumption that women are the bearers of race is turned on its head, for in these novels mulattas—as a generational index of the rape and bondage of their maternal ancestors—bear physical testimony to racism. For further discussion of the sexual politics informing this trope, see Spillers.

13. For an interesting discussion of the relationship between the occult and race, see Gillman, who argues that Hopkins invokes the language of blood “in the service of her Ethniasism” by shifting “blood” not only from the “literal passing down of inheritance theorized by the biological sciences, as well as . . . the biblical inheritance of spirit or culture . . . . [but also] to hereditary theories of psychic identity that endure over time and space” and which result in a “process of transculturation” (63-64).

This essay argues that Howells and Harper, neither as interested in pan-Africanism as Hopkins, similarly revise the terms of scientific racism, but find blood peculiarly acculturating. Howells is interested in Rhoda’s “geist,” her “elder world,” for instance, because it allows him to imagine changes in the culture of the everyday.

14. On black labor, see Giddings who, among others, has noted that nineteenth-century black women’s novels which represent nurses, stenographers, shopgirls, and similar images of working African-American women represents a critique of antebellum models of femininity. On white women’s activities resisting the conventions of the cult of true womanhood, see Rosenberg 20-22.

15. The traditional equation between the female body and the social corpus is linked, of course, to social dawinism, eugenics, sexology, “all parts of the metaphoric discourse in which the physical body symbolized the social body, and physical and social disorder stood for social discord and danger” (Smith-Rosenberg 49). In this paper, the crisis of gender is inextricable from the crisis of race, both foregrounded by the epistemological ambiguity of the mulatta.

16. “Editor’s Study” refers to the title of Howells’s regular column for Harper’s Weekly from 1886 to 1892. For a discussion of Howells’s literary relationship to business enterprises, see Kaplan. The status of patrician spokesman-editors such as Howells was in part eroded, as Amy Kaplan argues, by the rise of influential businessmen. Howells was a transitional figure between the “gentlemen literary editors of The Century, North American Review, and Atlantic Monthly, and a younger generation of professional businessmen who edited such magazines as McClure’s, Cosmopolitan, and Ladies Home Journal” (16). But the powerful conflation of medical and commercial interests underwriting the popularity of physician-writers such as Mitchell suggests that the medical industry created a competitive caste of its own. This “business,” as Mitchell’s novels suggest, turned what Howells called “idle” romance into a realist’s labor, validating literary realism “within the producer’s ethos of the middle-class” (18). For a discussion of the broader debates in the late nineteenth century about manhood, see Rotundo and Connell.

17. Doctors are established as the norm against which the deviance of the mulatta is measured, which is the reason that Rhoda’s white father—also a physician—lost his practice after making public his marriage to an “octoconon” (32). As Mrs. Meredith describes it, people must “make a familiar of” the “confidante” because they “don’t like to think there is anything strange about their doctor” (33).

18. Dr. Olney is also critical of Rhoda’s aunt for her “romantic coloring” of race: Mrs. Meredith, he observes, “had often imagined herself telling Rhoda what she had to tell, and with the romantic coloring from the novels she had read, she had painted herself in the heroic discharge of her duty at the instant when the girl was radiant in the possession of accepted love, and had helped her to renounce, to suffer, and to triumph” (48). Meredith’s fatal unwillingness to part with this sentimental script leads her to overdose on sleeping pills.

19. As William Dwight Whitney argued, language is “capable of application to ethnological purposes far beyond any others. . . . Hence, when the ethnological relations of a community are to be settled, the first question is as to the affinities of speech” (274-75). On discussions about the relationship between language and race from the period, see Müller and Whitney, Max. For recent criticism of nineteenth-century experiments with the notion that language is “thicker than blood,” as Max Müller put it, see Birnbaum.

20. Dr. Olney exploits his positions as well in his exchanges with a potential suitor of Rhoda’s who first approaches Olney because of his position as de facto family physician for Rhoda and her aunt, and later when Olney uses his position to seek out Rhoda herself after the funeral.

21. See Tate’s excellent reassessment of black domestic fiction, in which she convincingly argues that black women used the marriage plot of nineteenth-century white women’s sentimental fiction to
critique theories of sexual and racial "retrogressionism," gendered discourses of political protest, traditional spousal roles, and the politics of genre. Tate's argument clearly explains how the conventions of marriage are reformed as they reform political and domestic culture, though she does not comment on Harper's association of marriage and slavery in the marriage of Lola's mother, Marie. For a discussion of the "politicization of domesticity" in the nineteenth century, see also Brown.

22. One is reminded of Clare Kendry's comment in Nella Larsen's Passing (1928) that she nearly "died of terror the whole nine months" before her child was born "for fear that she might be dark" (168).

23. For a discussion of the early laws concerning miscegenation, see Kinney.

24. Many black and white writers, in the nineteenth century particularly, have forwarded the notion of interracial unions as a resolution for race relations, including Lydia Maria Child, Catharine Sedgwick, George Washington Cable, Charles W. Chesnut, and others.

25. On the Plessy debates and Mark Twain, see Sundquist, Wake 225-70.

26. Anon. reviewer from The Critic (16 Jan. 1892), qtd. in Banta ix. Indeed, criticism of the novels has centered on the failure of representation: A reviewer for the Critic panned An Imperative Duty because of Howells's "ignorance of the subject...[Howells] likes the race...in theory and at a distance." Past and more recent critical assessments of both novels offer conflicting criteria for "realist" fiction, though the arguments reveal the high racial stakes involved in such definitions. For instance, on the face of it, the didactic imperative in Lola Leroy—and in racial uplift fiction, generally—can be set against Howells's explicit denial that realist art moralizes or offers social programs. Indeed, the obligation to racial service encouraged by Lola Leroy, and voiced by Rhoda in An Imperative Duty, is criticized in Howells's novel as, ironically, the fault of "Puritan civilization" carrying "the cult of personal conscience into mere dutifulness" (89). For Anna Julia Cooper, on the other hand, racial duty is set apart from what seems to be a lack of conscience. She criticizes An Imperative Duty, for instance, because the realist's approach only aestheticizes. Howells's "study of a morbidly sensitive conscience hectoring over a weak and vacillating will," Cooper argues, is like the "kodak," which, she assumes, fails to "preach or solve problems" (202). Her criticism points to, in her mind, the limitation of realism, both its representative subject—the hysteric—and its most commercial form—the photo still. See also Robert Leitz's remarks pointing out that, in a letter to his father, Howells mentions his own experience visiting the "lowly and kind people" at a black church, which later became the basis for the questionable scene in the novel (Howells, Selected Letters 264). Howells experienced similar resistance to his representations of the Irish (see his 1891 letter to his sister Aurelia, qtd. in Banta ix).

27. Mary Helen Washington, in her "Introduction" to Cooper's A Voice From the South, for example, argues that "representative women" such as Harper and Cooper spoke "for ordinary black women...[they] rarely spoke to them" (xxx). For similar criticism of Harper, see also Deborah McDowell. This essay attempts to join with Carby and Tate in more recent considerations of Harper which diverge from the criticism of Harper's work—beginning most vocally with the Black Arts Movement—as too removed from the "real" lives of blacks.

28. No doubt drawing on some of these same associations, Faulkner would also give Clay (Clytemnestra) as the name of a mulatta in Absalom! Absalom! (1936).

29. See Berlant. For the link between the national corpus and the individual body, see also Scarry, esp. 108-09.

30. See also Cady, "Neuroticism." Howells had been a literary correspondent with Mitchell for years, but their relationship changed markedly after Winney's death. Mitchell reputedly performed an autopsy and determined that she had suffered from an incurable organic rather than mental illness, and thus had been beyond his help. Nevertheless, in a letter to Mitchell, Howells hints at his own anger and guilt: "[W]e are almost happy to be assured that [her death] was not through any error or want of skill; though this was what we believed from the first. The torment that remains is that perhaps the poor child's pain was all along as great as fancied, if she was so diseased, as she apparently was" (Howells, Selected Letters 247).

31. In fact, Olney originally returns to Boston to find that Dr. Wingate, "a nervous specialist of his popularity must, of course, have followed nervous suffering somewhere out of town...[and had] only promised himself to...be suitably settled to receive the nervous sufferers when they began to get back in the fall" (10). Olney's decision to return to Italy with Rhoda ironically echoes the hope of the hysterical aunt so dismissive treats: Mrs. Meredith concludes that Rhoda's only chance for matrimony might be in Italy (35). The equation is set up early in the novel when Olney waxes nostalgic about Boston blacks and the "domestic foreign": "The brilliant complications" and "public spectacle" of "negroes in Boston somehow brought back to Olney's homesick heart a sense of Italy, where he had never seen one of their race" (8).
32. Wonham's excellent analysis also compares, with Lutz, Du Bois's notion of "double-consciousness" to neurasthenia, and notes that Howells "appropriates black health as an antidote to nervous suffering" (156).

33. To the degree that Harper's term disabilities of color invokes the medical idiom of race-as-disease in order to indict racism as the social ill, it is, in Stepan and Gilman's words, "couch[ed] in terms similar to the dominant discourse . . . [but moves] further away from total acceptance or accommodation to the dominant discourse of difference" (76).

—. "Neurasthenia, or Nervous Exhaustion." Boston Medical and Surgical Journal 3 (1889).

RACIAL HYSTERIA


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