

Maureen Tuthill, *Health and Sickness in the Early American Novel: Social Affection and Eighteenth-Century Medicine*

Maureen Tuthill, *Health and Sickness in the Early American Novel: Social Affection and Eighteenth-Century Medicine* (London: Palgrave Macmillan 2016) 253pp. £45.99 PDF, EPUB, £58.00 Hb. ISBN: 978-1-137-59714-4

What makes a person healthy or sick? What makes a person worthy of healing? Does the responsibility for healing lie with the individual or with the community to which he or she belongs? Who has the authority and the knowledge to effectively heal? Maureen Tuthill's fascinating book demonstrates how American assumptions about healthcare have their roots in the eighteenth century and, in particular, the two decades following the USA's founding. It demonstrates the centrality of early American fiction for a twenty-first century audience seeking to understand the moment at which 'health in America becomes a personal, not a communal responsibility' and '[t]he body [becomes] private property to be safeguarded by the individual' (226).

Underpinning the discussion is the fact that '[e]ighteenth-century Americans viewed health as an expression of one's relation to the social and physical environment, a concept that could cause considerable consternation because sickness was rampant in eighteenth-century America' (3). Each of the chapters analyses a different aspect of how disease is represented in early American fiction, focusing on how the response to illness, both by the sick individual and by the community around them, tells us not only about the nature of medical knowledge and the practical treatment of the body, but also about changing attitudes towards social behaviour, compassion, and the connection of the individual to the nation.

Chapter Two offers a subtle rereading of one of the best-known novels of the period, Susanna Haswell Rowson's *Charlotte Temple* (1791), suggesting that Charlotte's death should be understood not as an inevitable consequence of her loss of virtue, but as an indictment of the early American community which denies her the social affection and access to healing which might have saved her. In Chapter Three, Tuthill further develops her analysis of the health of female protagonists in early American fiction, by focusing on works by Hannah Webster Foster and Tabitha Tenney. In contrast to *Charlotte Temple*, Eliza Wharton in Foster's *The Coquette* (1797) and Dorcasina Sheldon in Tenney's *Female Quixotism* (1801) retain access to their social networks and the healing practices offered by them, but choose to reject or resist the ministrations of their peers. The protagonists of these novels, Tuthill suggests, choose and even embrace illness as one of the few means of resistance to the limited models of conduct offered to them – and other women – by early American communities.

This focus on the individual's capacity to control and maintain their health is extended in the next chapter, which explores Charles Brockden Brown's novels *Arthur Mervyn* (1799-1800) and *Ormond; or The Secret Witness* (1799), both of which are set in Philadelphia during the yellow fever epidemic of 1793. Tuthill discusses Brown's novels in the context of contemporary debates about the nature of the disease and the appropriate means of managing and controlling its spread. The discussion here of how the novels draw on contemporary disagreements between 'contagionism' (rejected by Brown) and 'sanitationism' (which he endorses) is subtle and revealing, and results in intricate and original readings of the texts. In both novels, Tuthill argues, Brown depicts his protagonists taking steps to protect their own health in a rational manner; from this, she extrapolates Brown's vision of a rationally ordered state emerging from the self-discipline of individuals, even in the face of biological threats. But if Brown's novels suggest that a successful society requires its citizens to take responsibility for their own health, Tuthill argues in her next chapter that they also demonstrate the weakening of the bonds of social affection which had once

underpinned medical practice and healing in colonial America, to be replaced by motivations of self-interest. *Arthur Mervyn* and *Ormond*, she argues persuasively, dramatize the emergence of a world in which medical intervention is regulated by economic calculation. Selfless compassion for its own sake is depicted as irrational and futile, but characters are often willing to take gambles with their own health in pursuit of material gain. For some, an epidemic is a business opportunity too good to overlook. In particular, Tuthill demonstrates this early American moment to be the point at which poverty becomes not only fatal, but considered to be a marker of economic and social failure, and used as a justification for withholding healing from the poor.

Unsurprisingly, such a self-interested approach to sickness and healing led to the professionalization of medicine, and in the next chapter Tuthill focuses on the rising status of the physician in early America through a detailed analysis of Royall Tyler's *The Algerine Captive* (1797). Despite Tyler's extended satire of quack doctors, Tuthill convincingly demonstrates that the novel ultimately endorses the authority of the educated doctor, representing a post-Enlightenment turn away from folk remedies and communal healing practices and an investment in rational knowledge, which can be procured from the doctor for the right price. The advancement of the professional doctor, Tuthill notes, also marks a significant gender shift, as the social capital of medical knowledge in the new nation becomes commodified and invested in individual male healers, and removed from the largely female social networks which previously dealt with the sick.

Chapter Seven turns its attention to the section of early American society most fully excluded from participation in civic life, and hence from access to healing: African-Americans. Noting that black characters rarely feature in early American fiction (reflecting ideological efforts to render them invisible in accounts of the new nation), Tuthill nonetheless identifies how their incidental appearances perpetuate stereotypical white beliefs about African-American resistance to illness. Such beliefs helped to legitimise the exposure of black workers to disease (such as during the yellow fever outbreak of 1793) and the denial of medical assistance to those who succumbed to sickness. Brockden Brown's work, for instance, makes clear that black people perform roles which require exposure to infection, but implies that active intervention to heal black people is simply unnecessary – a sleight of hand that masks the moral failings of American society to intervene on their behalf. Tuthill maintains here, as she does throughout the book, that healing in early America was 'doled out along a hierarchy of privilege', and that African Americans were at the end of the queue. Moreover, as she notes in the Epilogue, Native Americans were even more completely excluded from 'a contemporary vision of American life' (219). Despite the willingness of many white physicians to learn from Native American healing practices, almost the only medical context in which Native Americans feature in the early American novel is as bringers of violence to the white body.

Health and Sickness in the Early American Novel is deeply researched, tightly structured and consistently well argued. Although Tuthill does not explicitly map the correlations between past and present, her analysis of health in the early American republic makes clear that health, disease, wealth and power have always been overlapping and interdependent. The book makes thought-provoking and sobering reading at a time when the questions it examines – of the relative responsibility of the state, the community and the individual for the health of US citizens – are at the forefront of ongoing debates over the fate of the Affordable Care Act and the provision of healthcare in America.

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