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"Dying, in other words": Discourses of dis-ease and cure in the last works of Jane Austen and Barbara Pym

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June 1997

A thesis submitted to the Faculty of Graduate Studies and Research in partial fulfilment of the requirements of the degree of Master of Arts

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0-612-37237-5

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Abstract

The last works of Jane Austen and Barbara Pym, written while each was knowingly dying, both continue and transform a discourse of illness and cure traceable through their canon. Illness figures both literally and metaphorically in their narratives; in Austen as failures in wholeness and in Pym as failures in love. After undergoing the metaphorically medical treatments of purging and vivifying in Austen and inoculating in Pym, their female protagonists achieve conditions of health and wholeness by closure of the narrative. In the dying works, individual metaphorical illnesses become a general societal condition of fragmentation, and cure becomes more elusive. The shared use of a village undergoing profound change reflects each writer's own bodily transformation as certain death approaches, and the restoration of health to the village-as-body becomes one of achieving balance or homeostasis. This is effected in the narrative by the hinted-at curative powers of nature in Sanditon and of restored faith in A Few Green Leaves. On a theoretical level, both texts reflect their narratives of dis-ease and cure. Pym's last text remained unpublished before her death and therefore "ill" because not functioning, but second opinions and faith in her reputation confirmed its public health. Austen's Sanditon as a fragment embodies its own discourse of dis-ease, or failure of wholeness, and requires a curative act on the part of the reader to restore it to some sense of ideal wholeness or health.

Résumé

Les dernières œuvres de Jane Austen et Barbara Pym, toutes deux écrites pendant que l'auteure se savait à l'agonie, s'inscrivent dans la continuité et la transformation d'un discours sur la maladie et la guérison, décelable dans leurs principes directeurs. La maladie figure à la fois littéralement et métaphoriquement dans leurs récits. Chez Austen, à titre de fragmentation de l'entièreté et chez Pym, comme un échec amoureux. Après des traitements médicaux métaphoriques de purification et de revivification chez Austen et d'inoculation chez Pym, les personnages principaux féminins recouvrent l'état de santé et d'entièreté en conclusion du récit. Dans les œuvres des mourants, les maladies métaphoriques individuelles deviennent un état de société général de fragmentation, et la guérison devient plus insaisissable. L'évocation commune d'un village connaissant de profonds changements reflète la propre transformation physique des deux écrivaines, dont la mort certaine approche, et la restauration de la santé du village-corps se manifeste comme l'atteinte de l'équilibre, de l'homéostasie. Cette atteinte est transposée dans le récit par l'allusion aux pouvoirs curatifs de la nature dans Sanditon et par la foi retrouvée dans A Few Green Leaves. Sur le plan théorique, les deux textes participent du récit de la maladie et de la guérison. Non publié avant sa mort, le dernier texte de Pym est « malade » puisqu'il ne « fonctionne » pas, mais la foi en la réputation de l'auteure en confirme la santé publique. Fragmentaire, le Sanditon d'Austen incorpore son propre discours de maladie, ou de manque d'entièreté, exigeant un acte curatif de la part du lecteur qui doit le remettre dans un tout idéal, lui redonner la santé.

Acknowledgments

I wish to acknowledge the unfailing support and helpful suggestions of my thesis supervisor, Professor C. Abbott Conway of the English Department of McGill University, whose intellect and insight always challenged me to push my work to higher levels.

I also wish to thank McGill Psychology graduate student, Marc Fournier, for locating the Suedfeld study for me and for recognizing its relevance to my study of dying works; and his mother, Jean, for the gift of the Miller and Tanner texts and her constant support and interest.

To my family, I say thank you for bearing with me.

Chapter 1

Introduction

I live in a constant endeavour to fence against the infirmities of ill health, and other evils of life, by mirth; being firmly persuaded that every time a man smiles, - but much more so when he laughs, that it adds something to this Fragment of Life.

- Laurence Sterne, 1760

Laurence Sterne wrote out this personal prescription of mirth in his dedication to Tristram Shandy. There is little doubt that he intended it to apply not only to living well in this "Fragment of Life," but also to the state of health of those other "Fragments of Life," his novels. Aptly, the quoted words also define a certain comic view of life which links one chain of the many strands connecting the English novel from Sterne to the present day. This particular chain takes in the greatest mistress of the comic-ironic novel, Jane Austen, and continues on, with loops and knots through the perhaps more dour and moralizing nineteenth century, to join up with a twentieth-century writer of similar comedic gifts, Barbara Pym.

The common link these two writers share with Sterne is the use of mirth as an effective defence against the "infirmities of ill health, and other evils of life." One does not initially think of either Austen or Pym as primarily concerned with illness per se, but both writers deal with various types of "illness" in all of their works. Illness as the absence of health and soundness figures literally and metaphorically in the individuals and in the small closed societies they both depict. And while both authors "treat" or "cure" this condition in differing thematic ways, it is always, stylistically, with their characteristic intelligent and ironic humour. In fact, their last works, Sanditon and A Few Green Leaves, respectively, were written while each was knowingly dying, yet neither "dying" work lacks Sterne's healthful mirth.

Prescriptive mirth aside, the conjunction of medicine and literature can be a fruitful

one, yielding metaphorical resonations of enormous repercussionary potential for the study of each. The conviction that "medicine protects life and literature interprets it, that both are in some sense diagnostic and therapeutic" (Roberts, 1) is *raison d'être* enough for exploring their special affinity; but as many writers have discovered, Tolstoy and Thomas Mann paramount among them, "medicine's accounts of the mechanisms of sickness and the process of health constitute...the ideal natural language for exploring emotion, personality and social intercourse" (Roberts, 1).

Virginia Woolf concurs in her essay "On Being Ill," and adds:

Considering how common illness is, how tremendous the spiritual change that it brings, how astonishing, when the lights of health go down, the undiscovered countries that are then disclosed..., it becomes strange indeed that illness has not taken its place with love and battle and jealousy among the prime themes of literature (Woolf, 14).

I plan to demonstrate that illness is indeed a "prime theme" in the works of Jane Austen and Barbara Pym, but illness linked always in a dialectic with cure. In fact, critic D.A. Miller has called Austen's novels "stories of recovery" and that, when ill himself, the cures implicit in them "...nursed me as effectively...as Miss Taylor nursed little Emma, who grew up into "the complete picture of grown up health" " (Miller, 55). Writer Jilly Cooper also remarks on the cheering effect of Pym's novels: "I pick up her books with joy, as though I were meeting an old friend who comforts me, extends my vision and makes me roar with laughter" (GB, cover).

However, when a writer becomes ill herself--and, most particularly, terminally ill--is this altered state reflected in her narratives? A partial answer is provided by Miller's continuing words that when ill himself he "never dreamt at such times of reading Sanditon, the novel that Jane Austen, unfeignedly ill, died before completing" The disturbing and fragmentary Sanditon remains in too ill a condition itself to be a story of

recovery. Is this an effect of or a reflection of Austen's own final incurable illness? Barbara Pym also write a last work while knowingly dying. Does A Few Green Leaves also reflect the altered state of its dying author? Gian-Paolo Biasin suggests that this is possible. He notes, albeit in an essay on the language of the madman in literature, that, "At times the symptoms of a disease may become the signs of a language" (Biasin, 171).

Another critic and writer who thought deeply about the effect of illness and death on artistic vision is Anatole Broyard. In his dying memoirs, Intoxicated by My Illness, he writes of the clarity afforded by terminal illness: "In this phase I'm infatuated by my cancer. It stinks of revelation" (Broyard, 7). He suggests that all his previous works were merely preparation for this final vision.

Is there a revelatory quality to Austen and Pym's final works? This is one question I shall be addressing in this study of two very similar female writers who both wrote a last work while facing certain death. Loosely using the language of medicine, I shall trace and interpret signs of an ongoing discourse of illness and cure through Austen and Pym's narratives in order to attempt, finally, to locate and identify the symptoms of instability or dis-ease in their "dying" works. I am suggesting that the altered state of each dying author is reflected not only in the very different thematic "cures" suggested in these last works, Sanditon and A Few Green Leaves, but also in the condition of the texts themselves; a fragment and a text unpublished before death, which also require "curing."

Illness as metaphor

As mentioned, the illnesses in both writers' works are both figurative and metaphorical. Austen's female characters suffer periodically from various ailments such as fevers, putrid throats, colds, and differing manifestations of hysterical response; and her novels abound in hypochondriacs, valetudinarians and invalids.

When the illnesses are figurative they often function as narrative strategies to thicken, clarify or further the plot. One thinks of Jane Bennett's fever in Pride and Prejudice which is the necessary ingredient to further the plot through Elizabeth's protracted visit to Netherfield. The illness both clarifies Jane and Bingley's affections and thickens the relationship between Elizabeth and Darcy with complications. Marianne's sprained ankle, a form of illness in Sense and Sensibility, serves to introduce the dubious rescuer, Willoughby, to the plot. Later, her more serious fever brings the true lover, Colonel Brandon, to her rescue.

But the metaphorical resonations of these and other illnesses permit a level of interpretation beyond the literal and have a function in the narrative beyond strategies of plot development. Not for the first time in literature, the illness becomes a metaphor. The form an illness takes--for example, in the two cases I have mentioned--indicates a particular psychological condition of the female body or, more precisely, the female mind. Fevers usually bespeak a state of uncontrollable heightened emotion; slips and falls a lack of self-control and sureness of purpose.

Needless to say though, the metaphorical illnesses present in Austen are not bound by the female body and mind: they reach beyond gender, soma and psyche into society itself. When closely examined, Austen's depictions of her contemporary England are far from the picture of blooming health many readers see. They actually contain many of the symptoms of the somatic ailments of her characters; for example, fevered activity, putrid thinking, valetudinarian laissez-faire economy; and in-valid discourses. At least some, and often many, of these metaphorical symptoms of an ill society can be found in each of her works; and "clearing them up" becomes the moral and political imperative behind or beside the personal narrative--and, until fairly recently in critical studies of Austen, overshadowed by it.

Illness plays a subtly different role in Pym than it does in Austen. Because a

traditional linear plot is virtually non-existent in Pym, she does not often use illness as Austen does; that is, as a narrative strategy to further, thicken or clarify it. But illness is abundantly present in similarly linked literal and metaphorical symptoms which speak, as they do in Austen, to an illness beyond the somatic. The linked couplings of heartache and depression; fatigue and loss of purpose; rashes and existential discomfort; madness and isolation; anorexia and marginality provide the sustaining metaphor of illness for the psychic condition of the majority of Pym's female characters. In spite of being labelled "excellent women" by the small societies in which they live and work, they are largely discontent, uneasy, disconnected, fragmented or marginalized. Most are lonely and unfulfilled and seek something to love. And, very simply put, the characteristic plot of Pym's novels consists of this search for something or someone to love in order to cure the dis-ease. But--unlike Austen, and until Pym's final work written during her dying months--the quest is usually a futile one; for the movement of a Pym narrative is circular, returning to its point of departure at its conclusion, where the dis-ease is wryly accepted, uncured, as a fact of life.

And further, while marriage is the sign of good health by which Austen marks the successful conclusion of both the cure and the narrative, Pym's narratives of illness do not usually conclude in this fashion. Marriages in Pym are as much the source of dis-ease for the female protagonists as they are the sign of restored health (or arguably, death, as will be discussed) in Austen. And, indeed, men in Pym, far from being the physician-figures who often effect the cure of the "unsound" female heroine in Austen, are usually depicted as self-centred, petty, pitiable or pathetic, and in need themselves of being "cured" by Pym's "excellent women." In fact, one can detect a subversive anti-male subtext in Pym that is similar in many ways to Austen's "regulated hatred."

And like Austen again, the metaphorical illnesses in Pym also reach beyond soma, psyche and gender. Her depictions of England, particularly in her last two novels, are

as replete with signs of ill health when closely examined as is the "England" of Austen.

Cure as metaphor

Fittingly, the cures in Austen and Pym are as metaphorically resonant as are the illnesses. The cures they employ within their narratives reflect three of the evolving methods of medical (and quack) treatment from the eighteenth century to the twentieth: purging of ill humours; vivifying and strengthening with regimes of doses, diets and activity; and inoculating to resist infection.

The ill females in Austen's early works are "purged of ill humours" before pronounced healthy and fit for marriage. In her later works, they are "vivified and strengthened" before the closure of marriage. Often a male physician-figure effects the cure by either purging or vivifying his "patient." One thinks of Henry Tilney who clears up Catherine Morland's fevered Gothic ailment in *Northanger Abbey*, and John Knightley in *Emma* who both strengthens Emma's good qualities by endorsement and purges her of her faulty thinking.

The metaphorical cure in Pym reflects a medical treatment just as Austen's use of "purging" and "vivifying" do. Her female characters are "inoculated" against the invasive infection of dis-ease (the disruption caused by the possibility of love and romance) by brief exposure until the inevitable failure in love has no permanent ill effects. The metaphorical inoculation renders the circular form of Pym's narratives: at their conclusion, the female protagonists resume their former lives relatively content and not permanently damaged by the tiny dose of "infection." Pym's use of inoculation is similar in many ways to what Marvin Mudrick calls Austen's use of "irony as defence" (Mudrick, 7). Like irony, inoculation both exposes and resists.

Yet while the "healthful mirth" of Sterne remains the tone of both Austen and Pym's works, one detects an underlying discourse of cure beyond mirth and ironic inoculating defence. It is one whose implications overflow the narrative as do those of

the illnesses. The cures imply an ideal condition of health and soundness which hovers above, beyond, and behind the narrative and to which it yearns. By closure that condition, while not always reached, is at least approximated in the sense of things being resolved, cleared up, healed, or accepted. In both Austen and Pym, illness and cure comprise a dialectic in a narrative that identifies, or desires to identify, closure with health.

Death as Closure

But when death enters, as it does most forcefully, thematically, symbolically-- and biographically--in both Austen and Pym's dying works, the dialectic of illness and cure takes on further relative meaning; or, more appropriately, a complete lack of meaning. No cure, whether purging, vivifying or inoculating has efficacy in the face of death, that most ultimate of closures. The ideal condition to which the narrative yearns in the two writers' final works becomes death itself. Death replaces health as the condition hovering above, behind and beyond the narrative. Dying well, not living well, becomes the project which Austen and Pym address in their knowingly final works. I believe there is evidence in these "dying works" that they were re-evaluating the cures which they had previously implicitly endorsed, for in both Sanditon and A Few Green Leaves, a cure of a distinctly non-medical nature for the essential dis-ease of life is explicitly endorsed by Pym, and hinted-at in Austen.

Like Austen and Pym, the final works of many knowingly dying writers, composers and artists appear to express, consciously or unconsciously, a different vision from their previous works; one perhaps concerned more with universals and unity than with particulars. It is as if all their prior works were merely preparation for the ultimate, final creation. Anatole Broyard writes of this notion:

A dangerous illness fills you with adrenaline and makes you feel very smart. I can afford now to draw conclusions. All those grand generalizations

toward which I have been building for so many years are finally taking shape....I see everything with a summarizing eye. Nature is a terrific editor... (Broyard, 6).

The "summarizing eye," the editing propensities of death (nature), and Broyard's earlier-mentioned revelations of cancer are augmented by Virginia Woolf's musings on illness and literature. She writes that there is, "...let us confess it (and illness is the great confessional), a childish outspokenness in illness; things are said, truths blurted out, which the cautious respectability of health conceals" (Woolf, 17).

A psychological study carried out at the University of British Columbia (Suedfield, 1984) provides scientific evidence that may support the notion that dying works have a summary and "childish" (in the sense of "simplistic") quality to them. The authors compared letters written by well-known writers in their dying year to those written at previous stages for their level of difficulty or "integrative complexity." It was discovered that, whether death was expected or sudden, the level of integrative complexity of the letters dropped in the final year of life. (This study will be discussed further.)

While a lower level of integrative complexity means less difficult--or simpler--this need not be construed in negative terms. A simpler vision may well be a truer vision, and may comprise the very revelation of illness to which Broyard and Woolf refer. And as Broyard remarks, all previous works may be preparation for this simpler, summary, and transcendent vision. I hope to demonstrate that the dialectic of illness and cure which I shall be tracing through the works of Austen and Pym provides just such a preparation for both the vision of their final works and an analysis of them. Each writer responded to certain death in a different way. The fragmentary condition of Sanditon may be no accident; it may be a canny, supremely consciously ironic artist's Romantic expression of her body's own altered state. On the other hand, Pym responded to death by bringing her final work to a full and satisfying closure for the first time. This

may be the artistic reflection of Pym's own altered state which became healed by faith.

Let us look briefly at the dying works of Sanditon and A Few Green Leaves. The following encapsulation will repeat many of the notions already remarked.

The Dying Works

Sanditon was abandoned as a fragment four months before Austen died of what is now believed to have been Addison's disease, and A Few Green Leaves was completed but not published four months before Pym died of cancer. Both of these final "Fragment[s] of Life" contain themes of illness and cure. And, not surprisingly, concerns about the effects of time and change, from aging bodies to changing villages, underlie these themes. Yet what is often surprising is that neither "dying" work is as grave in tone as the novel immediately preceding it in the generally accepted chronology of their works; that is, the mature and often-called "autumnal" works of Austen's Persuasion and Pym's Quartet in Autumn. The themes of these two penultimate works may be said to be the coming to terms with and the healing of the effects of aging, loneliness, and isolation. In both Sanditon and A Few Green Leaves, written in the shadow of knowingly approaching death, these and other conditions of the human spirit are presented as metaphorical illnesses of society with corresponding metaphorical cures.

Foregrounding the themes of a metaphorically ill society or human condition are the many real or imagined somatic illnesses depicted in both novels. Indeed, these "dying" works represent the climax of a discernible trend in Austen and Pym's bodies of works, but particularly evident in their later novels, towards increasingly frequent references to illness. The putrid throats, fevers, colds, variously depicted hysterical responses, cases of valetudinarianism and clusters of metaphorical illnesses found throughout Austen reach their peak to become focussed, in Sanditon, on hypochondria. This illness which lacks an authentic somatic nexus is fittingly

disembodied to spread through an entire microcosm as speculation. The vague female ailments, restlessness, and heartache in Pym, and particularly the cancer, anorexia, and obsessive-compulsive madness in Quartet in Autumn, culminate in the anxieties, depression and fragmentation of A Few Green Leaves. And both writers specifically locate their final depiction of these diffused illnesses in a place which becomes the central image of the illness itself; a changing village.

Austen's seaside village of Sanditon is being transformed into a health resort. It is undergoing many of the cataclysmic changes of her own turn-of-the-eighteenth century world in the historical age of revolution (and, one notes, her own body in its final stages of illness). Previously firm and solid foundations are shaken and a new order is being constructed in an exciting, fevered frenzy of overturning activity. Indeed, Sanditon's symbolically resonant opening lines thrust the reader immediately into the action of an overturning carriage on an unmarked road. Pym's own contemporary "age of anxiety" in 1970s England is mirrored in her unnamed village which is fractured, unsure of its identity, and losing touch with its traditions.

How this "disease of activity" as Tony Tanner refers to the speculative condition of Sanditon might have been "cleared up" by Austen remains itself a matter of speculation because Sanditon is an unfinished fragment (Tanner, 250). What we do know is that Austen died four months after abandoning the work at its twelfth chapter; and what I am suggesting is that in this final "Fragment of Life" she hints at a cure for its essential instability.

In the unfinished Sanditon, the cure for the "ill village" is a hinted-at nostrum of a different sort from the medico-symbolic treatments of the preceding works. It is a cure that presages the historical response to the age of revolution as much as does the illness of a changing and "speculated" village. Austen's prescient endorsement in Sanditon of the via medicatrix naturae, the healing power of nature, will become the

underlying basis of the following Romantic movement. In A Few Green Leaves, Pym's explicitly endorsed "cure" of faith-healing, as opposed to science and medicine, also presciently foreshadows our own present age of spirituality.

While I am not concerned to focus exclusively on these historico-literary connections, I am concerned to demonstrate that a dialectic of illness and cure informs each writer's works and reaches a climax in her dying work. I intend to demonstrate that the dying works of Austen and Pym comprise discourses of dis-ease requiring cures of stability dispensed by nature and by faith.

The Illness of the Text

These discourses of dis-ease are reflected in the condition of the texts themselves of the dying works. As an unfinished fragment of a novel, Sanditon materially embodies its own dis-ease. The text itself is incomplete and unstable. Yet, like any fragment, literary or otherwise, it "posits an ideal integrity" (Levinson, 12) that one can liken to the ideal condition of health. The unfinished text seems to yearn toward or at least imply some sort of potential completion, in the same way that Austen's narratives move toward closure. Over the years various critical treatments of Sanditon have sought to restore some degree of "health" to this text, mimicking the very medico-symbolic treatments which Austen used herself to "cure" the illnesses within her narratives. Until 1925, when Chapman oversaw the first publication of Sanditon, it had been "purged" from Austen's canon, remaining both mute and ignored, much as Austen's own disabled brother George had been "purged" from her family. Chapman's action conferred onto the text its first sign of public legitimacy. Since then, attempts have been made to further recuperate the text and "vivify or strengthen" it as a text worthy of study in its own right. Some ambitious writers, Austen's grand-niece among them, have even sought to "cure" Sanditon literally, by completing the text with their own versions of its posited ideal integrity. What has not been done, however, is to consider

the possibility that Sanditon's fragmentary condition may have been intentional.

Although the lack of closure of Sanditon is believed to be due to an historical accident--the death of the author--many intentional poetic fragments, such as Byron's Don Juan and Wordsworth's The Recluse, were written during the following Romantic age of literature. But intentional and unintentional fragments alike seem to be subject to a particular receptionary treatment which attempts to impose a closure of meaning onto them. The reader desires to heal the broken-offness, the essential dis-ease of the text, and may attempt to bring to the unfinished piece as much of its potential as can be constructed from its posited ideal integrity in order to make it "work." The role of the reader as a physician seeking to make a text whole and healthy is one of several interpretations of the text-reader relationship which I shall make in my concluding chapter.

A Few Green Leaves was not published before Pym's death. From her journal entries, we learn that she had revised and readied it for publication, but at the time of her death, it remained a mute text. It required externally-imposed interventions and treatments before achieving textual soundness or health through a public voice and legitimacy as a text. A seminal interventionary treatment similar to Chapman's publication of Sanditon also occurred with Pym's works. In 1972, she was named twice, by Lord David Cecil and Poet-Laureate Philip Larkin, in a Times Literary Supplement article as one of the most overlooked writers of the twentieth century. This physician-like act served to recuperate both Pym's reputation and her previously unpublished (and deemed unpublishable) works and it certainly facilitated the speedy publication of her dying work.

These medico-symbolic notions of textual curing, recuperating, and restoration of health and stability will, with the discussion of treatments of a fragment, comprise the final chapter of this study of discourses of dis-ease.

Methodology

I plan to commence the study with a brief chapter outlining my rationale for aligning Jane Austen and Barbara Pym. I shall then proceed to definitions of health, illness and cure in order to set up the dialectic which informs this study. The fourth chapter will fairly rapidly apply these definitions to specific "cases" in the narratives of both writers' bodies of works in order to detect the discourses of cure which run through each writer's body of works. In Chapters 6 and 7, the dying works of Sanditon and A Few Green Leaves will be dissected in order to identify their essential instability and the "cures" which they seem to endorse. In conclusion, I shall be developing the dialectic of illness and cure in order to discuss, or at least raise some questions about, the condition of dying works and the treatment of ill and dis-eased texts, commencing with the recuperation of the texts of Austen and Pym's dying works--the fragment and the unpublished novel.

Chapter 2

Austen and "Mini Austen"

My reasons for aligning Austen and Pym in this study of discourses of dis-ease are several. The fact that Austen and Pym are common links in the chain of comic-ironic novels has been mentioned, as has the fact that each wrote a last work while knowingly dying. Their shared metaphorical use of illness and cure to speak about disembodied dis-ease and ideal conditions of health and death I have of course already highlighted as the primary reason for my linking of their names. And the rich opportunity their discourses of dis-ease afford us to explore notions of textual reception is the ideal condition of dialogue to which this study yearns. But the two writers are quite regularly compared for many and other reasons. It might be helpful at this point to briefly review some of them.

The similarities of Austen and Pym's style and subject matter are readily apparent. Most simply put, they both write comic tales of the pursuit of love and marriage from a detached and ironic narratorial stance. Pym is frequently referred to as the natural twentieth-century descendant of Jane Austen. Articles such as Frederick Keener's, "Barbara Pym Herself and Jane Austen" and A.L. Rowse's "Austen Mini?," as well as countless introductions to Pym's novels make the link between the two writers.

Pym was aware of the comparisons made between herself and Austen, and "regarded this as mildly blasphemous" (Holt, xv). After a visit to Jane Austen's house in 1979, Pym wrote in her journal, "I put my hand down on Jane's desk and bring it up covered with dust. Oh that some of her genius might rub off on me!" (Holt, 250). Certainly Pym looked to Austen as inspiration and model. For example, in 1952, she reminded herself in her journal to "Read some of Jane Austen's last chapters and find out how she manages all the loose ends" (Holt, 188). (Indeed, how they both manage

"all the loose ends" is the subject of this study.)

In addition, their lives, separated as they were by over one hundred years of unprecedented world change, bear many remarkable similarities. Both women were single, solidly middle-class, apparently staunchly conservative, and both were practising Church of England members. (This last fact is not an insignificant detail as will be shown in the discussion of Pym's faith-healing "cure" in A Few Green Leaves.) Neither writer was made financially independent by her writing. Both women depended upon their immediate families for economic support, although Pym did hold a long-term, poorly-paid editorship with the International African Institute.

Both writers experienced a significant period of silence; Jane Austen during her purportedly unhappy years at Bath where she began but did not complete The Watsons, and Pym during the years from 1960 to 1977 when her works were considered unmarketable. Both writers resumed writing after this period of "authorial illness" with a distinct new voice--stronger, more mature, and more closely allied with the main female protagonist. This new voice is in large part responsible for the distinction between their later and earlier works. And, as has been mentioned and will be demonstrated, the later works display a greater emphasis on the illness-cure dialectic, possibly because each writer had suffered so greatly during her period of authorial silence yet had emerged whole and "cured."

Both women died at the height of their writing powers in the care and company of cherished sisters. In fact, each sister had become the intimate and confidante that a husband might have been if either writer had married. Neither did, but biographies inform us that possible opportunities to do so had presented themselves.

Biography aside, Austen and Pym's works share many common characteristics which make their alignment a fruitful one in a study such as this. At the relatively uncritical level which persists in seeing the two writers' England as a cosy and well-

ordered place, a "Janeite" is very often a "Pym fan." These readers find a reassuring solace in believing in the writers' fictional worlds as sound and accurate. The converse is also true. Many readers dislike both Austen and Pym and find their portrayals of English middle class society narrow and stultifying. What of course has been the subject of increasing critical study is that neither view is sufficient for a clear understanding of what Austen and Pym were each, in her own way, actually saying about "England." Upon close examination, as I have mentioned, the pictures of blooming health are misleading.

Their writing appears to stir up unseemingly intense feelings of passionate like or dislike; "unseemingly" because their writing is so very restrained itself, and virtually devoid of passion. There is a critical tradition to this aversion to Austen first promulgated by Charlotte Bronte and then D.H. Laurence and Virginia Woolf, who each, in similar ways, saw Austen's lack of passion as somehow limiting and devaluing her unique vision. Bronte's ringing Romantic indictment of Austen was worded this way:

What sees keenly, speaks aptly, moves flexibly, it suits her to study;
But what throbs fast and full, though hidden, what the blood rushes
through, what is the unseen heart of life and the sentient target of
death--this Miss Austen ignores (Quoted in Stonyk, 50).

The limiting and limited view of Austen as "Aunt Jane" might be said to have begun with the 1870 publication of her nephew's Memoir of his aunt. But it has since been countered often and successfully, her own Letters providing much evidence contrary to the respectability and primness which Austen-Leigh was at great pains to promulgate. Critical studies reveal that the world she depicts is less cosy and limited and prim than it is one she describes in subtly critical terms or even as Trilling suggests, with "regulated hatred." And, contrary to Bronte, I hope to demonstrate that Miss Austen

does not ignore "what is the unseen heart of life and the sentient target of death."

Barbara Pym's works are rapidly becoming the subject of increasing scholarly study. Recuperated from their period of unmarketability, having been judged old-fashioned and irrelevant--or handicapped, like Austen's were for decades, by her gender and domestic subject--her works now command closer attention for what they say about the female condition, particularly that of the aging single woman. Increasingly sophisticated criticism is now liberating her vision from that of "jolly Barbara", which her old friend Robert Liddell, for instance, seems to have vested interest in maintaining. Several critics, Anne Wyatt-Brown among them, find that a subversive subtext similar to Austen's strain of regulated hatred, but directed largely against men, is clearly detectable in Pym.

From a reader-response perspective, both Austen and Pym's works can be re-read countless times with their comic spirit remaining vitally intact. This is a mark of genius in comic writing, particularly when compared to "low" comedy where the humorous element of surprise can so often lose its effect after the first reading. In re-reading Austen and Pym, the anticipation of a known coming delight, like the "fort/da" of Freud's son, simply heightens the pleasure. This phenomenon can be attributed to the fact that both Austen and Pym are practitioners of "high" comedy.

As Henri Bergson states, the "higher" comedy rises, the closer it is to reality:

[I]t is only in its lower aspects, in light comedy and farce, that comedy is in striking contrast to reality; the higher it rises, the more it approximates to life; in fact there are scenes in real life so closely bordering on high-class comedy that the stage might adopt them without changing a single word (Bergson, 477).

Austen and Pym both depict "scenes in real life" as the site and source of their "high-class comedy." We know from Pym's extensive notes and private journals that she

regularly re-used snippets of conversation overheard in "real life" as the source of much of her humorous dialogue, and that she gladly recreated many of the amusing or oddly whimsical scenes she had witnessed. There is less biographical evidence that Austen drew her fictional material from her own life, but there are echoes to be heard in her works of particular phrases and wry observations in her letters. One particular letter to her niece Fanny Knight reveals how aware Austen was of the fictional possibilities of life:

Your trying to excite your own feelings by a visit to his room amused me excessively. The dirty Shaving Rag was exquisite! Such a circumstance ought to be in print. Much too good to be lost. (Letters, 18 Nov., 1814)

Even without clear-cut--and, let it be said, ultimately unnecessary--evidence of situations from life being transposed to the page, there is little debate about the fact that Pym and Austen's fictional worlds are realistically portrayed and that they function naturally without, for example, authorial tricks, intrusive frame-breaking, or self-consciousness.

Both writers employ a relatively small canvas for their art. Austen's ironically self-deprecating statement about her miniature work on a "little piece of ivory" is familiar to most readers, as is her comment to her niece that "3 or 4 families in a village makes just the right subject for writing." The latter comment one takes as sincerely meant and devoid of irony; and it is sincerely taken. Pym also limits her canvas--to family members, the parish, the village, or a small closed society such as anthropologists, clergymen, and academics. Yet in these purposefully small worlds, both writers' main female characters find ample room and opportunity to learn about life. In almost each of the combined total of sixteen novels, Austen and Pym's female protagonist gains insight and self-knowledge within that small world by the closure of the narrative. But

most importantly, the purposefully small worlds narrow the focus to clarify the vision. Like a biopsy of a single cell of a tissue, Austen and Pym's microcosms reveal all the symptoms, ill and healthy, of the larger host body.

Both Austen and Pym write from a detached observer-like position, in a mode stripped of the sentiment and emotion which are the enemies of comedy. In fact, Persuasion and Quartet in Autumn, their works exhibiting the most emotion are also their least comic. The role of the observer in comic writing is a particularly crucial one which Austen and Pym's narrators share. Richard Duprey writes:

Great comedy is the result of keen observation of the world. The comic writer, a sharp and perceptive man who stands on the sidelines and views the staggering gyrations of mankind, records in his detached and facile manner the errors of humanity. He sees all the silly, preposterous, utterly absurd things that his fellow man does. He takes note of the countless deviations from the norm in the lives of his colleagues in flesh. Not, in truth, feeling anything for them but a careful objectivity, he dispassionately compares them with what they ought to be...observing the violation of a standard - the shattering of an expected pattern of human action (Duprey, 244, italics mine).

While Virginia Woolf and D.H. Lawrence might concur with Duprey's view that great comedy requires "not... feeling anything," I disagree; for both Austen and Pym show and evince great sympathy for their main female protagonists and, in both writers' works, passionate emotions surge just below the tranquil surface of the narrative. But, notwithstanding that minor cavil I have with Duprey's description, here, at last, we arrive at the shared aspects of their works which bear most directly to this study.

Duprey's notions of "deviations from the norm," "violation of a standard," the "shattering of an expected pattern" and "what people ought to be" are most centrally

applicable to the particular comic art of Austen and Pym. They return us to the dialectic of illness and cure in their works with which this study is concerned.

An ideal condition hovers above the narratives of both writers. It is "what people ought to be" and this ideal condition exerts a contra-gravitational pull on the narratives which are grounded for much of their duration in what people usually are. What people ought to be is sound and healthy; what they often are is unsound or "ill." In Austen's case, what people "ought to be" is also the moral underpinning of her work. In spite of Austen's assertion to her sister that "pictures of perfection...make me sick and wicked," it is toward this ideal condition of soundness that Austen's narratives consistently yearn--and closely reach by their closure. With Pym, the ideal condition remains elusive and the contrast between "what people ought to be" and how they really are results in her characters' concluding wry acceptance of life with all its faults.

Finally, Austen and Pym each wrote a last novel--or fragment of a novel--that marked a departure in vision from all their preceding works; a "dying" work deeply informed by the "infirmities of ill health." It is with these works particularly that this study is concerned; not only in the detection of a discourse of dis-ease within the narrative and how both writers seek a cure for the infirmities of life in the face of death but also, and more theoretically, how this enables us to explore conditions of health and dis-ease of a text.

The following chapter will provide definitions of illness and health which will enable us to embark on this study's exploration of what "dying, in other words" might mean.

Chapter 3

"The Infirmities of Ill Health" and "Pictures of Perfection"

The condition of being ill is essentially an unstable situation. "Disease and illness are, broadly speaking, seen as episodes interrupting health, which is restored when the illness is past," write the authors of a philosophical manual for caregivers entitled Curing and Caring (Downie, 15). If health is regarded as the norm, physicians are especially concerned with putting right the aberrations and abnormalities that interrupt or destabilize it. This is accomplished with interventions of treatment aimed at restoring the normal condition of health; that is, returning the body to its condition of homeostasis or balance.

But what is health? Paradoxically more difficult to define than illness, its description usually consists of negatives; i.e., absence of illness, freedom from pain and suffering, and so on. However, "the condition of being sound in body, mind, or spirit," as Webster's defines health is more positive. But being "sound" brings its own problems of definition. What do we consider sound? Freedom from unsoundness is too tautological a definition to be helpful. But again, Webster's aids us by its definition of "sound" as, variously, "freedom from flaw, defect or decay;" "free from error, fallacy or misapprehension;" and, most succinctly of all, as "stable." These condensed and distilled definitions of illness and health as, respectively, "a period of instability" and "a condition of soundness and stability," form the dialectic with which I shall be examining and assessing the discourses of Austen and Pym and, finally, the texts themselves.

It should be noted, however, that these definitions are more metaphorical than they are reflective of an historical social reality. In Georgian England, health was not understood in these terms; that is, as "a normative concept implying a universal state

of being for all humans" (Rousseau, 26). Health was still defined negatively, as:

...the opposite of a wide repertoire of diseases, maladies, and conditions, and most poignantly, as the event that occurred to prevent one from working. Work was then the truest crucible of health. Like pain and suffering, work was itself the broad norm of life (Rousseau, 26).

But if one converges these two senses of a normative condition, one metaphorical and, possibly, revisionist and the other realistic and, possibly, more historically true, then health and work become neatly--and as will be shown, fruitfully--aligned as the ideal condition of wellness. This convergence of health and work is integral to my discussion of illness and cure .

To continue in the metaphorical language engendered by the medicine / literature affinity, the literary critic as "consulting physician" detects symptoms of health and, all too often, symptoms of illness in a narrative or discourse and, as diagnostician, attributes them to causes. These "healths" and "illnesses" might consist of such things as characterization (convincing, unconvincing); plot (well-developed, poorly developed); theme (clear, tangled); a sustaining vision (presence or lack thereof); language (rich or poor; imaginative, pedestrian) and so on; but they might also consist of theoretical and formal concerns to do with semiotics, structure, the "life" of a text and the "death" of its author, and so forth. But diagnosis and attribution is where the critic's work ceases; his or her role is not to "cure" the work except in the suggestions of treatments that might have taken place or by identifying treatments that were not successful. I shall be suggesting in my concluding chapter that it is the reader's role to "cure."

The economy of illness within a narrative discourse is a closed system: the cure of a narrative either occurs or does not occur within the narrative itself. It cannot be superimposed after its closure; that is after it has ended, or "died". If a narrative

remains "ill and uncured" at its conclusion, it might be defined as a certain type of discourse-- fragmentary, open-ended, modern or postmodern, for example. Its very "illness" --its state of "un-curedness" might be its point.

But if the illness of a narrative discourse is an episode within the work--perhaps the focus of the narrative in the sense of a period of instability--and the normal condition of health has been restored at its conclusion (that is, the period of instability has been resolved), we can call this type of narrative discourse several things--for example, comic, having narrative closure, or traditional.

Both Austen and Pym wrote comic traditional novels, with Austen's displaying a greater sense of closure achieved by the conclusion of the narrative. They both consider health and illness in terms of "soundness". The "errors, fallacies and misapprehensions" within the narrative which cause the episodes interrupting health are corrected or "cured" by various means. And with closure comes the restoration of "health" and "soundness", which might and does mean several things in their works besides the resolution of plot: for example, the soundness of the individual; the health of society and its institutions, and, by extension, the vigor of the state; the correctness of a proper marriage; the health and stability of language, and so on. These notions of metaphorical health shall unfold as we work through the case histories and the discussion of narrative health will evolve to one of discourses of cure.

The state of health and the health of the state in Jane Austen

It is not surprising that Austen's works contain a great number of references, direct and indirect, to ailments and illnesses, for in the late eighteenth century health was a tenuous state at the best of times and valued as a precious commodity if one were blessed with it. In this pre-antibiotic era, bacterial infections could and often did lead to death. Smallpox and typhoid fever were the most common diseases during most of the eighteenth century, with tuberculosis gaining the upper hand in the second half.

Indeed, so rampant were epidemics, so virulent and insidious, and so ever-present in threat, that it may be said by some that it is surprising that illness does not figure even more prominently in Austen. However, this is the same sort of argument proffered by those who state with dismay, and erroneously, that Austen was blithely unaware of the turbulent history, politics and revolutions that were occurring around her "3 or 4 country villages." To the careful and perspicacious reader, disease/dis-ease is as omnipresent in Austen as are contemporary politics.

Much of the cause of disease and its spread can be placed squarely in the domestic front. Social historian Christopher Hibbert writes:

The problems of disease in eighteenth-century England were greatly exacerbated by the dreadful housing conditions in which most people lived, by primitive systems of drainage and by inadequate or contaminated water supply....Nor were the houses of the rich much healthier than those of the poor; they were more spacious and less overcrowded to be sure, but their sanitary defects were quite as obnoxious....While houses remained so unwholesome it could not be a matter of surprise that typhoid and other mysterious fevers, 'those strange and fatal feavers' as Samuel Pepys had called them, raged from time to time all over the country (Hibbert, 436).

The concepts of the "unwholesome house" and "strange and fatal feavers" are most helpful in developing the dialectic of illness and cure. They also function, as will be shown, as signs of the essential dis-ease in and of the dying works of both Austen and Pym, pointing us to a conclusion that these works are more profound in nature than the return to the lighter and more sparkling "healthful" narratives of their earlier works which has been the dismayed opinion of many critics.

The Unwholesome House

The trope of the house has been employed often and in varying ways in Austen

criticism. The house as an architectural construction of ideology has been used by some critics to further the idea of Austen as an essentially conservative writer, concerned with maintaining the status quo and upholding the traditional patriarchal institutions of Regency England (for example, Marilyn Butler); while others detect in her depictions of houses undergoing change such as renovation and new ownership, or houses as subject of the "improvement of the estate" movement--in all its aesthetic, economic and political permutations--evidence to further the argument that Austen was essentially a liberal thinker (for example, Alistair Duckworth). The house as a metaphor for confinement and containment serves the same ideological ends in Mary Poovey's study of the "proper lady" and propriety. The house as the site of domesticity, marriage and family and the ultimate destination of Austen's heroines has been used by others to explain what they see as her limited feminist vision; that the gaining of husband and home is as befitting and desirable a goal and an end to a woman's life as it is to a narrative plot. In a similar fashion, the larger, more substantial and far "richer" house gained by Austen's female protagonists through an advantageous marriage match at the conclusion of her novels, indicates to other critics Austen's essentially market-driven economically-based view of personal politics. The house as a metaphor for attitudes inculcated through literature indicates to some critics Austen's sly and ironic role as an observer of both literary fashion and historical determinism. The houses of the sea--the navy and the ship--in which it would appear Anne Elliot will be living at the conclusion of Persuasion, indicate to some critics Austen's place in the canon as a precursor of Romanticism. And what is seen as a pre-Freudian depiction of houses and rooms as sites of feeling leads others to proclaim Austen's place as both a Romantic writer and the author of the first psychological novels.

In bald understatement, then, it can be said that the "house" is a potent metaphor in both Austen's works and in Austen criticism. Without particularly refuting or supporting

any one of these interpretations, because each has added immeasurably to our understanding of Austen, but by drawing on and being nourished by their richness, I wish to present the trope of the house in Austen's works as the site and the source of health or of illness, both in narrative theme and in discourse.

Illness takes its form in ways that are often culture-bound and change dramatically from epoch to epoch (Gross, 189). Gloria Sybil Gross writes:

The parameters of illness are now said to include any number of factors in community life, including power relations, bourgeois consumerism, self-expression, sexual prejudice, moral-punitive bias and so forth. Moreover, at least since Freud, clinicians have endeavoured to explain the aetiology of illness, when appropriate, no less in terms of psychogenesis than physiology and general pathology. Freud himself sharpened the focus on the 'motive' of certain illnesses, which he found to be deeply rooted in circumstance. Thus he introduced the formal concept of 'secondary gain', or the idea that peculiar brands of symptoms, generally levelled at someone or something, are intended to procure advantages like special attention or service, benefits owing to unfair disablement, release from intolerable responsibility, and the like (Gross, 189).

These broader parameters of illness and particularly its secondary gains shall inform the following fairly cursory discussions of the illnesses contained within Austen and Pym's "unwholesome houses." May I suggest that this necessary tracing through their works in order to arrive at an analysis of their dying works be excused by Broyard's suggestion that all works are preparation for an artist's final work.

Chapter 4

Illness and Cure in Jane Austen: Purging and Improving

Austen's earlier group of works--Northanger Abbey, Pride and Prejudice and Sense and Sensibility--is subtly different from those of her later grouping--Mansfield Park, Emma and Persuasion. While similar in style, subject matter, and theme, they differ in tone. The "light and bright and sparkling" of the earlier works becomes more shaded with variation and darkness in the later works. I shall attribute their essential differences to the relative health or illness of the houses depicted within, and then proceed to a discussion of Sanditon and its houses to show how the "unwholesome house" is both symbol and source of the "strange and fatal feavers" which lead to and comprise a discourse of dis-ease.

The houses of Northanger Abbey, Pride and Prejudice, and Sense and Sensibility are generally presented as stable and "wholesome" in the ideological sense of their being reflections of a patriarchal, strictly ordered society to which Austen appears to be paying obeisance and to which her heroines aspire...and to which some must adapt as will be shown. Yet within them can be found a set of related illnesses, allied through a particular and shared psycho-pathology. The "illnesses" of the females within these male houses may be described as illnesses whose secondary gain is escape.

Two lines from Cowper, one of Austen's favourite poets, evoke the sense of containment an eighteenth century woman might experience: "Prison'd in a parlour snug and small / Like wasps upon a southern wall, " and Gloria Sybil Gross calls the attempts to escape this condition, "flights into illness" (Gross, 188)

Northanger Abbey

Catherine Morland in Northanger Abbey is the youngest of Austen's female

protagonists, the most naive and, apart from Harriet Smith in Emma, the most impressionable. The opening paragraphs provide the signs whereby we can detect the form her particular "flight into illness" will take. It is not into somatic realms but into the world of a fevered imagination determined to see its owner become a "Heroine" in spite of her natural "healthy" drawbacks. Her parents are presented as sensible and ordinary; her mother "of useful plain sense, with a good temper, and what is more remarkable, with a good constitution" ; her father an ordinary clergyman, "without being neglected, or poor, and a very respectable man, though his name was Richard" (NA, 367). (The last reference has puzzled many readers, but may be an ironic reference to Richard III with whom the Reverend Mr. Morland shares no secrets, vices, or cruel streaks.)

In fact, as Gorman states, "The early emphasis on the health and ordinariness of the Morland household contrasts with Catherine's penchant for believing in the gothic and the melodramatic and stands in bold relief to Catherine's later misguided assumptions about the Tilney family, assumptions learned from the cult of sentiment" (Gorman, 46). But, nourished by gothic literary conventions, particularly contemporary author Anne Radcliffe's, Catherine is determined to bend life to reflect art.

The narrator ironically refers to Catherine's course of training as a gothic heroine as improvement: "So far her improvement was sufficient, and in many other points she came on exceedingly well" (NA, 369). But the ironic prognosis comically masks the reality of the condition. Catherine's program of self-treatment becomes an illness. It represents a period of instability and unsoundness--unstable signifiers, and unsound conclusions based on "error, flaw and misapprehension"--located in the "unwholesome houses" of Northanger Abbey and, by extension, Gothic literature.

Catherine comes to see Northanger Abbey as an ordinary renovated house only after her fevered Gothic literature-fed imagination is treated by Henry Tilney's

bemused intervention, "clear" (healthy) male vision, and instruction in the proper "nice" use of language. She then fits in well into the Tilney world, purged of her fevered vision which actually and ironically saw more of the reality and horror of General Tilney's "house" than she is "permitted" to retain. As Anita G. Gorman writes in her study of themes and images of illness and health in Austen's works ¹:

Normal though Catherine's family is, and preposterous though her suspicions of General Tilney may be, this early work evokes the ambiguous truth that evil does exist in the world, that the fears on which we focus obscure legitimate fears. General Tilney is, after all, a tyrant, and were John Thorpe somewhat more venal, Catherine's unchaperoned carriage excursion with him could be, for an eighteenth century virgin, calamitous (Gorman, 46).

This ambiguity feeds the underlying irony of the societally-imposed, yet essentially unhealthy, cure that becomes the dominant overlay in Austen's last work, Sanditon.

Pride and Prejudice

The "illnesses" of character of Elizabeth Bennet--her flights into pride and prejudice--have been unhealthily nourished in her entailed house by her bigoted father and hysterical mother. The Bennet household is an "unwholesome house" indeed--one which might be described as dysfunctional today. Elizabeth's illnesses are purged through submission to a greater male power and its more stable symbol, Darcy and Pemberly. Mary Poovey writes, "Elizabeth's vanity is humbled. Her 'liveliness' persists of course, but it is purified of its defensiveness and its egotism (Poovey, 201, italics mine). The purifying serves the same end as purging.

In the same work, the secondary gains of illness are evidenced in Mrs Bennett's hysterical recourse to "nerves" which enable her to receive a sort of displaced

attention that her husband is not willing to grant. Like the other hypochondriacs and valetudinarians in Austen, her symptoms are not "cured." This is an important point and one that shall be returned to in the discussion of Sanditon.

Sense and Sensibility

Marianne Dashwood's "flights into illness" in Sense and Sensibility also derive from the cult of sensibility as do Catherine Morland's. But unlike Northanger Abbey, this novel "posits the very real threat of emotion to both physical and psychic health" (Gorman, 50). To continue with the trope of the house, Marianne has a need for attention and romance impossible to attain in the "house" of harsh realism where feeling is ignored, sensibility of little currency, and in which she feels confined. Her excess of feeling makes her sick. The "violent oppression of spirits" (SS, 82) she suffers after she learns that Willoughby has rejected her lead to more manifestations of emotional illness: "lack of sleep, giddiness, extreme fatigue, lack of appetite..." (Gorman, 52).

Traditional cures of lavender water and hartshorn prove ineffective against these illnesses. Later Marianne contracts a cold from walking in wet grass and sitting in wet clothing, and this develops into a far more serious "real" illness. Layering a second physical illness on top of an emotional one seems to reinforce "Austen's point that mental suffering creates an environment in which physical sickness may erupt, that the consequence of refusing to actively participate in life is, finally, death (Gorman, 55). And Marianne's symptoms are cured less through the intervention of sense, as is the usual interpretation, than they are purged and absorbed by Colonel Brandon's corresponding need to be needed. Gloria Sybil Gross writes:

Marianne Dashwood gains the upper hand over the otherwise unrepentant libertine Willoughby and snags Colonel Brandon, himself something of a tuberculophilic, transfixed by wasting-away teenaged girls, when she

stages various and sundry hysterical fits, but then falls seriously ill....Nearly dying guarantees her place in the high holy feminine pantheon" (Gross, 195).

In the end, ironically, Marianne's illness does imbue her with an aura of romance.

The Later Works

The houses, and the illnesses contained therein, are of a subtly different sort in Austen's later mature works of Mansfield Park, Emma and Persuasion. (In one of those nice conjunctions of art and life, these novels are themselves frequently referred to by the name of a house, Chawton.)

The illnesses of the Chawton novels are of an "escape" psychogenesis signifying "flights of illness" from the metaphorical "houses" or sites of containment which are themselves changing and perhaps less stable than in the earlier works. So, too, are the actual houses as symbols of the received order changing. These illnesses are treated not by purging, as are those of the early novels, but by vivifying; and, significantly, this reflects a change in the methods of medical treatment during the eighteenth century. Roy Porter writes in his history of quack medicine from the seventeenth century to the mid-nineteenth century:

The allure of the typical late-Stuart quack medicine was that it would not merely vanquish disease, but by taking away all sordid humours... restore the metabolism to its pristine, natural efficiency....Such claims to restore the entire system to health continued to orientate the rhetoric of quack medicine throughout the eighteenth century. But a certain change in terminology and the accompanying image of disease can be seen. Mirroring shifts in regular medicine itself, Georgian quackery came to construe the roots of general indisposition as lying not so exclusively in a scorbutic constitution or in the explanatory framework of the humours, but rather in the nervous sensibility, determined by the nervous system.

Thus it increasingly appeared that remedy lay less in the traditional hydraulics of purging and flushing, but instead in operations such as strengthening, vivifying, renewing tensility, and energising (Porter, 140).

Metaphorical parallels with the concurrent "improvement of the estate" movement begun by the Enclosure Act are easily drawn--which movement, of course, has more to do with "strengthening, vivifying, renewing tensility, and energising" England's agrarian economy, and less with what many people tend to focus on, landscape gardening. The new treatment of illness is one of improvement. Strict regimes of diet and activity were, like the Enclosure Act, intended to strengthen the body. The symptoms are embodied (enclosed), with the whole enhanced (improved) rather than diminished through the purging or removal of unwanted elements. In Sanditon, we shall see the notion of "improvement" gone crashingly wild and causing illness of the very thing it purports to cure.

In the Chawton novels, the reader, like an astute clinician, can discern unseen, unheard illness--the solitary, unvoiced misery of the three heroines, Fanny Price, Emma Woodhouse and Anne Elliott. Austen herself was "unvoiced" during her sojourn at Bath which preceded the writing of the Chawton novels. The reasons for this authorial silence are unclear for she was further "unvoiced" by her sister Cassandra's destruction of her letters. We do know, though, that the time at Bath was marked by great instability: dislocation, death, bankruptcy, and disruption. There are hints that it was also marked by an unhappy love affair and a flirtation with Evangelicism. This period of "interrupted health," painful as it must have been for Austen, resulted in a new voice emerging from the silence: stronger, firmer, more mature, and one which was to narrate stories of loneliness, unhappiness, and marginality.

Emma Woodhouse's episode of intense misery after the Box Hill scene in Emma is brief, to be sure, but it is pivotal; while Fanny and Anne's silent misery in Mansfield

Park and Persuasion respectively, is virtually constant from the opening scenes until it is relieved at the closure of the narrative. There is indeed an unheard cry at the heart of these novels, as has been remarked by several critics. And it appears that the cries are caused by injuries to the mind or the heart, chambers of illness fittingly invisible to the eye but permitting reverberating echoes of almost audible pain. The following brief encapsulations, like those in the discussion of the illnesses of the earlier works, also place these "flights of illness" in the context of a changing "house." All of these escapes through illness provide discourses of illness that are cured in various ways, but primarily as has been mentioned by vivifying and "improving the estate" so that flight is no longer psychologically necessary. And in almost all cases a physician figure--an improver--effects the cure. (Anne Elliot is the exception; her "illness" and cure will be addressed below.)

Mansfield Park

In Mansfield Park, Fanny Price is displaced at various times and suffers the emotional consequences. On a literal level, she is wrenched from her family and removed to a new home at an early age. She understandably experiences periods of intense and solitary misery and "...the despondence that sunk her little heart was severe" (MP, 12). The narrator explains the nature of Fanny's illness:

The grandeur of the house astonished, but could not console her.

The rooms were too large for her to move in with ease; whatever she touched she expected to injure, and she crept about in constant terror of something or other; often retreating towards her own chamber to cry; and the little girl who was spoken of in the drawing room when she left it at night, as seeming so desirably sensible of her peculiar good fortune, ended every day's sorrows by sobbing herself to sleep (MP, 12).

Fanny's escape from the cold and exclusionary house she finds herself in --"man's

field"--is to her attic room, small, white, and unwarmed by a fire, or to the staircase, a midway point between the public rooms downstairs and her inner world of the attic. It is here, on the staircase, where Edmund Bertram functions as the intermediary "curer" who will eventually lead her into the drawing rooms of man's field.

Later, Fanny experiences a different sort of illness, caused by another sort of displacement, that of sexual feeling. Her restless sleep broken by periods of intense heat and fever after being confronted by Edmund Bertram and Maria Crawford's mutual and overtly sexual attraction is a somewhat conventional literary depiction--and an historically accurate depiction in the history of female hysteria--of an illness of escape from repressed sexuality. The Freudian aspects of Fanny's "illness" and her places of retreat and escape lead one to see Mansfield Park as a masterpiece of pre-psychological literature.

Later again in the novel, the noise and confusion of the Price household in Portsmouth, another unstable or "unwholesome" house, make Fanny "sick" in a similar way to the effects of her initial displacement to Mansfield Park. After a particularly noisy and fractious first morning in the Portsmouth household, this is how the narrator describes Fanny's reaction:

Fanny was almost stunned. The smallness of the house, and thinness of the walls, brought everything so close to her, that, added to the fatigue of her journey, and all her recent agitation, she hardly knew how to bear it....The solitary candle was held between [her father] and the paper, without any reference to her possible convenience; but she had nothing to do, and was glad to have the light screened from her aching head, as she sat in bewildered, broken, sorrowful contemplation (MP, 290).

The striking similarities between these reactions and those Fanny had upon

entering the house of Mansfield Park--absence of light or warmth and rooms too big or too small--emphasize the essential indisposition Fanny is experiencing. The resultant "agitation" underscores these "periods of instability" which comprise Fanny's particular form of illness proceeding from an "unwholesome house."

Fanny Price's position--or rather in-disposition--from early childhood on, has always been improved by Edmund Bertram's interventions and their relationship becomes one of transference or, at least, of patient-doctor dependency. Indeed, "patient" and "silent" are the overwhelming descriptors of Fanny's personality and characteristic situational responses. Her underlying strength of right moral conviction is further strengthened and vivified by Edmund's eventual validation, which is why a marriage to Henry Crawford, so potentially close through the sheer wearing away rather than the strengthening of her resolve, would have been a moral disaster: her patience and silence would have been simply talked through.

In fact, Henry saw Fanny as the physician-figure, which is, ironically, further testament to Henry's modernity, which is itself another unwholesome element to be purged from the house of Mansfield Park at this stage of Austen's writing. And, in further non-authorial irony, it is the three other negatively-depicted characters (Sir Bertram, Lady Bertram and Mary Crawford) who regard Fanny as the healer or physician-figure. Austen is to return to this concept of modernity and the female healer, but here pays obeisance to received (male) authority in the form of Edmund Bertram, as she has already done with Henry Tilney and Frank Knightley.

Emma

Emma Woodhouse is presented from the opening lines as a young woman seemingly possessing all the attributes of health:

Emma Woodhouse, handsome, clever, and rich, with a comfortable home and happy disposition, seemed to unite some of the best

blessings of existence; and had lived nearly twenty-one years in the world with very little to distress or vex her.

So frequent are references to Emma's blooming health and well-being that any reader attuned to Austen's ironic pitch will recognize that an illness of sorts must soon befall the heroine. A few paragraphs later comes the truth of Emma's condition, so bloomingly healthy on the surface:

The real evils indeed of Emma's situation were the power of having rather too much her own way, and a disposition to think rather too well of herself...(Emma, 1).

Emma's inordinate degree of self-love bodes ill in an Austen world where balance equates with health. And the "flaws, fallacies and misapprehensions" that have already been offered as a definition of unsoundness--or lack of health--are indeed the symptoms of Emma's illness. Emma's vision, refracted as it is through egoism, becomes as distorted as Catherine Morland's in Northanger Abbey, and with equally disastrous results. Like Catherine, Emma mis-reads signs, sees proofs where there are none, and then inscribes an unsuitable text which she proceeds to "read."

Seen from the perspective of illness and cure, these two novels are actually more alike than any other two Austen works. Both contain parallel narratives; one valid, the other invalid and caused by distorted vision. Recognizing the symptoms, identifying the cause, and then clearing it up propels the narrative like an unfolding mystery novel. And both novels employ a physician-figure who intervenes by "treating and curing" the female protagonist.

Knightley is the physician-figure who effects the cure of Emma, using both treatments of cure we have been discussing. He both encourages the purging of the unsound through his intervention after the Box Hill incident and the clearing up of the fallacies of the in-valid narrative, and he strengthens through his authoritarian

endorsement the delightfully many, already healthy characteristics of Emma.

Besides Emma's faulty vision, her intense period of sick misery and self-loathing after the Box Hill episode may be seen as another illness of sorts. It is a brief but pivotal period of instability in the continuum of her life. During this emotional crisis and prompted by Knightley, she finally faces her egoism squarely and gains the measure of self-knowledge required to "cure" her. From this point on to the closure of the narrative, her faulty vision is stripped, like a cloudy cataract, of its distorting influences, and clear and healthy sight is gained. That it is a vision which coincides with Mr Knightley's should not greatly trouble the feminist reader, as does Henry Tilney's paternalistic intervention with Catherine Morland, for we have come to trust Knightley and his sound liberal democratic judgments in a way that we sometimes do not quite trust Henry Tilney, for all his charm. This perhaps marks the greatest difference between the two novels; a more mature Austen has created a more mature, sound and trustworthy physician-figure to effect the cure. Knightley will, in fact, be the last of the physician-figures.

One last word about faulty vision. Sometimes a refraction reveals truths. Like Catherine's vision, which was, ironically, partly correct--for General Tilney is a monster of sorts and emotional danger and harm did lie in the Abbey--Emma's distorted vision also ironically sees some truths. She sometimes gets the correct message from the misread signs. After all, Jane Fairfax is a deceiver, the pianoforte is a gift from a secret lover, Frank Churchill is flirting with Emma. And the truth about Miss Bates--after all, she is a bore--must simply just not be said aloud because good manners, human kindness and empathetic understanding preclude it. One hopes that Knightley's cure does not eradicate all of Emma's intuition.

Persuasion

Anne Elliot of Persuasion represents a different sort of illness from all other Austen

heroines, except perhaps Elinor Dashwood. She is older than the preceding female protagonists; lonely, demeaned and marginalized by her own family; and silently suffering from regret of a love lost through the intervention (persuasion) of a false physician, Lady Russell. Anne has determined to seek her own counsel now, be the physician of her own soul, and heal herself. This is a marked departure from the previous examples of the need for male intervention or treatment to effect cure of the ailing female. In addition, Austen's conventional use of marriage as the reward or prize for the cured woman seems for much of the course of this novel to be in doubt.

Persuasion is often cited as marking the commencement of a departure in style for Austen. As a mature pre-Romantic vision, a more serious autumnal work, it holds out promise to many critics of a new type of writing...if only Sanditon had not happened. I, too, see this novel as a departure, and for perhaps slightly different reasons, but more importantly as a departure that is indeed continued into the twelve chapters that we have of Sanditon.

Employing my dialectic of illness and cure, I see Persuasion as a celebration of the individual and self-determinism; of the validation of the slightly older, single woman (up to a hitherto unreached point in Austen's narratives...and more so if only marriage had not happened!); and of the shift of the nexus of illness from the domestic site (where the burden of guilt and responsibility for her illness is continually thrust back on the frail female shoulder--"if only you had not done that, thought that, said that, felt that, etcetera," say the men, "you would be fine") to that of society, where guilt or responsibility for unsoundness and instability is diffused, generally shared, not gender-specific, and its effects equally felt. These notions pave the way to Sanditon and to some degree are also its concerns, crystallized by Austen in its discourse of the effects of a general societal hypochondria.

Louisa Musgrove's fall from the Cobb at Lyme represents another illness of flight.

Her fall into romance leads to an illness which enables her for a time to escape from the unromantic marriage prospects to which she is assigned. And significantly, a fall also has the additional Freudian interpretation of an orgasm. Pre-Freudian, but equally perceptively, Austen-the-narrator is ironically and slyly allusive to the psychogenesis and effects of this "flight into illness": "Louisa's limbs had escaped. There was no injury but to the head" (p. 627).

Valetudinarianism and Hypochondria

The invalid narrative of Emma just mentioned signals an underlying theme of valetudinarianism which is to apotheosize in Sanditon. Invalids, valetudinarians, hypochondriacs and neurotics abound in Austen's works; to wit, Mrs Bennett, Mr Woodhouse, Isabella Woodhouse, Mrs Churchill, Mrs Bertram, Mary Musgrove, and to a certain degree Miss Bates and Mr Collins. They represent illnesses which yield the secondary gains of both escape and attention, but illnesses which do not progress or regress, and are not cured.

Each depiction of an invalid or hypochondriac represents a still small point of stasis in the ongoing linear narrative movement. These characters do not change or grow, nor do they become more ill or more healthy. They are neither improved nor vivified--and only Mrs Churchill, through her timely death, is literally purged. They remain static yet not stable; they are stagnant, stuttering, or stammering. They are signs of instability itself; of in-validity. And they provide the link we require in order to understand the disease of Sanditon.

Hypochondria is defined as "the extreme depression of mind or spirits often centred on imaginary physical ailments" (Webster). The hypochondriac has been the subject of much medical, psychological and psychoanalytical research: volumes and lifetimes have been devoted to its study. I shall perforce be limiting my discussion of hypochondria far less to its psychogenesis than to its effects, and with no attempt to

convey a scientific understanding of it as a neurotic condition. Rather, I shall and must assume a shared and intuitive general understanding of the hypochondriacal condition in order to continue my analysis of the illness/cure dialectic at work in these discourses of cure.

That being said, the following description of the essential circularity of neurosis, in which category I am placing the hypochondria and valetudinarianism of Austen, is helpful in the development of my argument.

Although in many ways superficial, the symptoms of the neurotic are the most obvious aspects of his problems. The phobias, inhibitions, avoidances, compulsions, rationalizations, and psychosomatic symptoms...cannot be integrated into the texture of sensible social relations....The symptoms do not solve the basic conflict in which the neurotic person is plunged, but they mitigate it. They are responses which tend to reduce the conflict, and in part they succeed. When a successful symptom occurs it is reinforced because it reduces neurotic misery. The symptom is thus learned as a habit. One very common function of symptoms is to keep the neurotic person away from those stimuli which would activate and intensify his neurotic conflict (Dollard and Miller, 387).

The inability to integrate into sensible social relations and the avoidance of stimuli typify the neurotics in Austen: they are the signs or symptoms of the condition with which I am concerned. Each invalid character keeps himself or herself away, for whatever psychogenetic reasons, from the action and conflict going on around them. Their particular "flight of illness" is into a nest wherein they couch themselves; a nest of imaginary ailments, "nerves," complicated diets—or, as we shall see, garbled language—from which they can survey but not partake in activity of any sort apart from

the ongoing coddling and eating of nursery foods which both serve to keep them in a metaphorical nursery state, or talking endlessly without reaching a point.

The hypochondriacs and valetudinarians depicted in Austen can be divided into two types: physical and verbal. The effect of a hypochondriacal condition is lack of movement or action, and the physically hypochondriacal character neither takes an active role in the action of the life around him or her, nor changes himself. He or she remains the same, displaying the same symptoms or characteristics throughout the narrative. One thinks of Mr. Woodhouse who cannot bear change of any sort, even the marriage and removal of half a mile of "poor Miss Taylor." She will always remain "Miss Taylor" to Mr Woodhouse because change is not admitted. Emma's gravest concern about her impending marriage to Mr. Knightley is how to avoid discommoding her father. The solution is to ship Mr. Knightley into the Woodhouse house, a place where he is already a semi-permanent fixture. It is also a rather intriguing use of the trope of the house, revealing as it does the power of the hypochondriac to affect context.

Mr Woodhouse's regime of nursery foods, "soft-boiled eggs" and "a nice dish of gruel," nourish his dysfunction. His symptoms are strengthened by the regime, an ironic overturning of the vivifying treatment. Indeed, there is much about hypochondria that is ironic; for example, despite Mr Woodhouse's frailty, helplessness and fears, he nevertheless successfully maintains his position of control and power in the family and community. While ironic, this is also an example of the secondary gain of a neurotic illness. One aspect of the masked power of a hypochondriac has just been pointed out in the solution to where Emma shall live after marriage—in her father's house. But because her father and his condition dominate, Emma is also not permitted the freedom to indulge herself even briefly in melancholy thoughts; as the following words of the narrator attest:

Emma could...wish for impossible things, till her father awoke, and made it necessary to be cheerful. His spirits required support. He was a nervous man, easily depressed; fond of every body that he was used to, and hating to part with them; hating change of every kind (E,3).

Proving the adage that the apple does not fall far from the tree, Isabella (Woodhouse) Knightley is as obsessed with change--even draughts constitute change--as her father, and has constructed around her a "wood house" of false security. Yet she, too, dictates the movements of her family from city to country to watering place.

Mrs Churchill in the same novel exerts a similar but far less subtle measure of control over the lives of her family as does Mr Woodhouse. Her sudden alarming declines which threaten imminent death are aimed to prevent any sort of peripheral activity to occur, namely Frank Churchill's independence.

In strikingly similar ways, Mrs Bennett of Pride and Prejudice and Mary Elliot of Persuasion both seek refuge in crises of nerves. During these crises, they can abdicate all responsibility for decision-making of any meaningful sort. Mary Elliot remains a powerless child rather than wife and mother. Even Lydia Bennett's incessant coughing (incipient tuberculosis?) takes second place to her mother's nerves rather than receiving a mother's concerned attention.

Lady Bertram in Mansfield Park represents a further extreme of valetudinarianism. She has utterly surrendered to it, seldom arising from her couch and depending on her husband and Fanny Price to inform her on even how to think or feel. The only time we see Lady Bertram rouse herself is upon the sight of Tom's illness; a case of one illness briefly superseding another yet at the same time reinforcing the hypochondriac's basic belief in the danger of living.

The "verbal" hypochondriacs use language in a way that is circular, unending, full of

stutters and pauses. Miss Bates of Emma provides a prime example of verbal hypochondriasis. She never gets to her point; she circles it, alludes to it, nears it, but seldom arrives. Her language is circular and continual, yet in spite of its ceaseless motion it is a static language. In Pride and Prejudice, Mr Collins's unending verbosity effectively reduces his ability to partake in any "sensible social relations."

Together, then, the physical and verbal hypochondriacs comprise a discourse of stasis. What are the implications of this and what is its relationship to the discourse of cure that runs through the works thus far discussed? As defined in Chapter 3, health is an ideal condition where soundness and work converge. The "cured" female protagonists have regained soundness in their thinking, vision, attitudes and behaviours; and they are fit for their "work" as wives. It is doubly ironic that Austen should say that "pictures of perfection...make me sick and wicked," for while the greater part of her narratives do indeed depict, and provide great delight in doing so, characters and situations that are unsound and not working well (that is, far from perfect), she has, by closure of the narrative, actually enacted cures that approximate that ideal condition of health in her female protagonists and their societies. The episodes of instability which make up the illness within the narrative have been cleared up.

Yet there are those still small points of stasis that remain, represented by the hypochondriacs who are not cured; those points in the narrative where things aren't sound and where things don't work well. These are not cleared up, they remain to disturb, and they provide us with a hint of what Austen was to say about England, about health and illness, about soundness and work, and about stability and instability in Sanditon, her dying work largely about hypochondria.

Interestingly, a closely related term to stasis--homeostasis--is the desired state of balance to which a body returns after a period of instability or illness when nature takes

its course. Time and an organism's own self-healing propensities comprise the treatment, or non-treatment, of the via medicatrix naturae. The word "return" is key here: it does not signify a purged state where the body is lessened. Neither does it signify an improved state, or a strengthened one effected by the self or another as we have seen in the examples of illness and cure just discussed. Returning to balance does not evince any "ongoing-ness" of the body.

How supremely ironic, then, that Austen depicts the on-goingness of speculation, development--improvement-- in Sanditon through the filter of hypochondria, that most static of illnesses. Whether or not the seaside town would have returned to its former state by the conclusion of the novel is a question whose answer we shall never know, but given the dynamics of illness and cure that we have been analysing, it would be, in my opinion, the most befitting of conclusions.

Let us now briefly trace our way through Barbara Pym's works in a similar way as we have done with Austen's, before finally examining Sanditon and A Few Green Leaves for their symptoms of dis-ease.

Chapter 5

Inoculation and resistance to invasion in Barbara Pym's worlds

Barbara Pym's body of works, like Jane Austen's, divides neatly into two groups; the early and the later. Between them also lies an aphasic gap. The silencing of Pym's authorial voice in what was to be mid-career was the result of publishers' opinions that her works were unmarketable. They were deemed too old-fashioned for the swinging post-war audience. Fittingly, it was two contemporary writers' opinions, and not those of publishers, which brought about the recuperation of her works and her writing career .

As mentioned in the Introduction, both Poet Laureate Philip Larkin and noted critic Lord David Cecil independently named Pym in a 1977 Times Literary Supplement article as one of the most under-rated writers of the twentieth century. She was the only writer so-named twice. As a consequence, interest in her early works revived. These were not only re-issued, but competing publishers actively vied for the opportunity to publish her new works. Pym responded to her recuperation with gratitude and renewed energy .

The first group of Pym works includes Some Tame Gazelle, Excellent Women, Jane and Prudence, Less than Angels, A Glass of Blessings, No Fond Return of Love and An Unsuitable Attachment. The latter work actually falls into the aphasic period and has been fingered as the cause of Pym's authorial "illness"—her unmarketability. It is an uncomfortable work in many ways precisely because it does not quite work. Nevertheless I see it as the important transitional work between Pym's youthful, yet paradoxically somewhat dated vision of her first six works, and her later more mature and more modern one. The later group is comprised of The Sweet Dove Died, Quartet in Autumn, and A Few Green Leaves. (A collection of short novels and stories from

Pym's early period was published posthumously, as was the previously rejected An Academic Question. These I shall not be specifically discussing except in the general terms of recuperation of the text in the final chapter.)

In the foregoing discussion of Austen, the trope of the containing house revealed the various "flights of illness" with which characters seek escape or attention. They range from fevers and faulty vision to valetudinarianism and hypochondria. But as has been noted, "Illness takes its form in ways that are often culture-bound and change dramatically from epoch to epoch" (Gross, 189). The forms of illness found in Pym's works are as dramatically different from those found in Austen as the mid-twentieth century was from the late eighteenth and early nineteenth.

The house and its layers of meaning as the site of various forms of metaphorical illness enlarges in Pym to become society itself; and the illnesses are less flights away from "containment" than they are retreats into it. This is reflected in the characteristic movement of a Pym narrative. Typically, it proceeds in a circular fashion, absorbing the period of instability, the illness, and closing over again. In contrast, the movement of Austen's narratives is horizontally linear with the period of instability cleared up or "cured." Both of these movements or forms change in the dying works: A Few Green Leaves displays an Austen-like linear narrative and Sanditon, because unfinished, has no narrative closure.

Before looking at Austen and Pym's "dying works," a brief survey of the illnesses to be found in Pym's canon follows. It will be similar to the one made of Austen's works; that is, less an in-depth analysis than a diagnostic examination to detect patterns of illness and cure.

The illnesses in Pym are less somatic than they are psychological, and do not take their form as metaphorical "flights" from containment, but rather as "returns home." As society and the world of post-war England underwent change so rapidly, the stability,

security and containment of the house that was being rebelled against in Austen becomes, in Pym, a refuge. Consequently, there is a pervasive melancholic air of homesickness in Pym which underlies the sparkle and wit and laugh-aloud comedy. Of course, as Eric Bentley explains, comedy is a way of trying to cope with despair, mental suffering, guilt and anxiety (Bentley, 286) and Pym had a "lifelong habit of converting unpleasant memories into funny stories, thus warding off distress" (Wyatt-Brown, 22). But without analysing Pym's comic art which has been ably done by Mason Cooley (1990), let us focus on the "illnesses" underneath it and how they are caused and treated.

Pym writes largely about single, aging women--marginalized by gender, lack of marital status and, by the end of her canon, their advanced age. Interestingly, her first published novel, Some Tame Gazelle although written in her early twenties, depicted two elderly sisters living together. Pym has readily agreed that the two sisters are projections of herself and her sister into the future, and, as things turned out, they are a prescient portrayal; her final years were spent living with her sister. Her few married female protagonists are either subsidiary to the plot or are trapped in generally dull, unfulfilling marriages, such as Ianthe Broome in A Glass of Blessings. It may be said that most of Pym's women are the Fanny Prices, the Anne Elliots, and the Elinor Dashwoods fast-forwarded to the twentieth century and "unrewarded" by marriage. Some are even the Miss Bateses taken seriously. For Pym, in contrast to Austen, rejects the traditional convention of the marriage plot--that is, the one that ends in a successful marriage of mutual love--to focus on the lives of the ordinary "excellent women" who turn back, with an almost audible sigh of relief, at the conclusion of her novels not to a marriage but to their briefly disrupted solitary, comforting, familiar, daily existence. It is as if Anne Elliot of Persuasion were to turn back to her life with a gentle sad sigh of remembrance of how things might have been.

Those female protagonists who do marry at the conclusion of a Pym novel do so more with resignation than gleeful anticipation. Her works are about the search for love, to be sure, but not necessarily the conventional love of marriage, for her men are almost without exception neither the prizes nor the physician figures of Austen. And although finding something to love, anything to love, as a cure for loneliness is the theme of the early works of Pym, love itself is a sort of illness, whose vicissitudes and inevitable failures must also be resisted or protected against. As the narrator of An Unsuitable Attachment says, "Ilanthe lets love sweep over her like a kind of illness; and no good can come of it" (AUA, 96)

In each of the Pym novels, this pattern of infection and resistance can be detected. The small closed world or society in which the female protagonist resides is invaded or infected by the destabilizing influence of possible love. These brief disruptions or "periods of instability" constitute the metaphorical illnesses in Pym. While Pym does not identify closure with attainment of health, she does provide provide a metaphorical cure of inoculation against the inevitable failure of love. Brief exposure to the disruptive infection renders her protagonists resistant to its permanent ill effects. At the closure of the narrative, they resume their briefly disrupted lives, wryly accepting the small scar left by the inoculation. The following brief summary will attempt to trace the pattern of infection and resistance in Pym's works.

The Early Works

In Some Tame Gazelle the infection is represented by the intruding males who claim the attention of each of the sisters and disrupt their quiet daily round with jealousy and possible separation. However, after a brief exposure to and dalliance with romantic possibilities, the infection is successfully repelled. One sister returns to the ongoing cycle of endless, uniformly alike, and harmless curates as replaceable objects of love and the other to her hopeless but familiar devotion to unattainable,

long-married Archbishop Hoccleve. The period of instability when jealousy and uncertainty briefly reigned is covered over with a type of inoculating emotional scar tissue and the sisters-- and the narrative--return to the state of health, or contented soundness, depicted at the beginning.

Again in Excellent Women, the invasion of disturbing romance is repelled. Mildred Lathbury is briefly seduced by the notion of romance personified by the dashing Rocky Napier who invades her quiet ordered world. But through the inoculation of exposure to romance, she resists its further temptations--or, more accurately, recognizes its unsuitability for her. She returns contentedly to her role as an "excellent woman," the helpful, self-effacing and staunch parish worker, and the acceptance of a job indexing the work of, and the very remote possibility of marriage to, the dull Everard Bone.

It may be thought that Pym's characteristic irony lies in the conclusion that being an excellent woman and having romance preclude each other. But while the reader may rebel against this notion, Pym appears to endorse it. Her celebration of the unromantic is a mark of Pym's modernity as a writer. In various forms it continues through all her novels until her dying work.

In Jane and Prudence the infection of yet another small world comprised of two sisters is represented this time by an invading female. When Prudence cedes victory to the invasion of this stronger female rival into the community, she is inoculated against future illnesses of jealousy and competition for love and marriage. And since men are interchangeable cyphers in her pursuit of love, Prudence contentedly returns, like the two sisters in Pym's first work, to the private thrill of the chase itself. The one possibly more exciting prospect is buried under scar tissue and forgotten.

In Less Than Angels, Pym's challenge to the importance of marriage reverses itself and for the first time, the predominant male figure, anthropologist Alaric Lydgate, is portrayed sympathetically, and marriage as desirable. However, the "illness" in this

novel becomes centred in the female protagonist rather than in the form of an unwanted invasion or infection of the community or disruption of the ongoing dailiness or routine. According to Janice Rossen, this is Pym's first story that "flaunts the convention of the happy ending in order to write about pain or, literally, reality." Aging, isolation, failure and death make their first appearance here and will continue on through the rest of Pym's works to culminate in her critically acclaimed Quartet in Autumn and, in different ways, in her dying work.

A Glass of Blessings shows ennui entering, invading and infecting and threatening to disturb the former tranquility of Wilmet Forsythe's life. Repeating the pattern of the previous works, this "illness" or brief period of instability is successfully absorbed to render her immune to future infections. Wilmet's inoculation takes the form of a futile, and possibly self-sabotaged, attempt to have an affair (she selects a homosexual as the object of her attention) and results in her acceptance of her dull but safe marriage. She can then return to the contentment she had previously derived from observation of others' lives--or safe attractive men in church--the point at which the novel commences. The contented observer, briefly disrupted, is a typical character in Pym's novels.

The last novel of the earlier group, No Fond Return of Love, enlarges the pattern of infection and inoculation from the individual, briefly disturbed or "ill" woman to the larger context of society. Here the infection which is successfully fought off by Dulcie Mainwaring is the societal notion that failure in love equates to failure in life. The notion of failure will inform the later group of novels to a remarkable degree and constitutes their particular discourse of illness.

But in all of these early works a similar sparkle shines, as if Pym the writer still believed personally that there was some hope in finding something to love herself, if not someone to love her. We know from biography and her journals that her own life

informed her works to a remarkable degree, and tracing the correlation is made possible by her extensive note-taking and comments on her writing. In short, she was repeatedly disappointed in love but still believed it was possible, and this belief is evident in her early works.

The Later Works

Pym the mature writer emerges, like Austen, after a period of authorial silence. In Pym's case it was a not self-imposed silence, but seventeen years when she had no audience to hear her. Dreadful, painful and gnawing as the experience was, to which we have her private journal's hurt words as testament--albeit masked in her typical bracing good humour--she became a finer writer for it. Caroline Heilbrum has recently argued that:

...creative people need a moratorium in order to become the special kind of writer they have the capacity to be. A female moratorium, in particular, represents "an unconscious decision to place one's life outside the bounds of society's restraints and ready-made narratives" (quoted in Wyatt-Brown, 38).

Pym indeed turns from the ready-made narrative of the love story / marriage plot, which, however subverted, reversed or questioned, still informs her early works, to write her next two works about a subject few pens have described--the aging single woman. As Anne Elliott, in Persuasion, remarks to Harville in that most important speech overheard by Wentworth, "Men have had every advantage of us in telling their own story...the pen has been in their hands" (P, 716). Pym has her pen firmly in hand as she writes about women remarkably like her and at a similar stage in their lives. One is tantalized to think whether Jane Austen would have done the same thing as she aged. It is society's view of old, single women; it is ageism; it is the shocking attitude of dispensability of the relict; it is the notion of failure that comprise the

discourse of illness in these later works.

Pym respectfully portrays the older lonely woman. She is not the buffoon, stock figure, or foil of much literature. She is not even the lovable grandmother or the trusted aunt. No stereotype invades Pym's work except one; the "excellent woman." The aging single women are realistically and centrally depicted, neither peripheral nor maternal figures, but as women who still think and feel, about sex, for one thing, but also about death, and their observations are taken seriously by their author. And with Pym, the single aging woman comes into her own in a way that demands the reader also take her seriously. Isolation, loneliness, and questions of mortality invade and infect these works and provide a discourse on the empathetic. The unheard cry at the heart of these novels is as equally pained as that in Austen's Chawton novels.

In The Sweet Dove Died, we are witness to Elinora Eyre's desperation to maintain control over what she sees as a last go-round at clasping the gold ring of love. Elinor is not particularly likeable, which is a departure in Pym for a central female character. It is a measure of Pym's adroitness as a writer that we nevertheless empathize with Elinor's situation. At the same time, we condemn her for selecting, like so many of Pym's women, the wrong "something to love." James is also a homosexual and is finally torn from Elinora's clutches by Ned, the hard-hearted American scholar. James had already been seduced by the young Phoebe, who Elinora believes is her only rival. Ultimately, Elinora returns to her perfectly-appointed house, her beautiful objets and the attentions of the appropriately-professioned antique collector, Geoffrey. She resumes the life she had before she met the indolent yet attractive James. But here, unlike Pym's earlier works where recovery was assured, we feel that there is no protective scar tissue to cover up the wound. Elinor's aging skin is too easily bruised to recover completely. We sense the pain continuing beyond the last page of the book.

The pain carries on into the pages of Quartet in Autumn, the work generally

regarded as Pym's masterpiece. It differs in structure from all her earlier works, having four main characters, two male and two female, whose stories are told concurrently. It also differs because death enters the work, its entrance insidious and prolonged. Any Pym characters of her earlier works who die, do so discreetly and off-stage, such as missionary Peter in Jane and Prudence. And perhaps not surprisingly, an element of humour is even derived from the reports of the death. But in Quartet in Autumn, death is centre-stage and distinctly non-humorous. It coincides with the retirement of the two female characters, Marcia and Letty, from their vaguely described filing and sorting work in an unnamed government office.

Retirement and death are conclusions to work and life. The ability to work has been cited in Chapter 2 as an historical definition of health. Certainly, once this ability is removed, Marcia falls ill. In another example of how "illness takes its form in ways that are often culture-bound" (Gross, 189), Marcia begins her descent into a madness of sorts that apes work. She compulsively sorts the tins on her shelves into pleasing order, she folds and files her plastic bags, she stores empty washed milk bottles in her garden shed. After her death, her co-workers are suitably impressed by her parodic work. "So beautifully arranged and classified," admires Letty (QA, 215). And about the bottles, "So spotlessly clean", remarks Edwin, to which Letty replies, "She must have had some plan in mind, keeping them all in the shed, so beautifully washed and arranged" (QA, 214). Similarly, Marcia's new nightdresses and underwear are found in a drawer, ready for the day when she shall face her beloved surgeon, Mr Strong, in the hospital.

Cancer and insanity are described by Susan Sontag as the twentieth-century diseases which have taken on the metaphorical attributes formerly reserved for tuberculosis--invasion and escape (Sontag, 36). These notions have been discussed in terms of Jane Austen's illnesses of escape and Barbara Pym's illnesses of invasion.

Today, eating disorders are rapidly becoming another metaphorical disease of transcendence. These three illnesses converge in Quartet, the most powerful work to have come from Pym's pen.

Although Marcia is generally regarded as the most important figure in the novel, I believe that more attention should be paid to Letty, the survivor. She too has been forced to retire, but does not fall ill as Marcia does. She maintains a steady optimistic outlook on life in spite of her diminished existence in single-room lodgings with little company. Together, the two women seem to be dark and light portrayals of Pym herself.

At the time of writing Quartet, Pym herself had just retired from her long career at the International African Institute and was also thinking more about her own health. Having had a mastectomy after writing The Sweet Dove Died, she had just suffered a small stroke and then had her parathyroid gland removed before beginning Quartet. Thoughts on illness and retirement suffuse this novel which she owns is "darker" than her others. Her own words about these themes, and the reference to her period of authorial silence or "illness," written to her old friend Bob Smith, are revealing and lead us to her last "dying" work, A Few Green Leaves:

I have had quite a lot of letters from various people, including several from people who say they have always liked my novels and thought I was dead! A very nice letter from Jock in Athens [Robert Liddell], who thinks Quartet very fine, even if 'darker' than my others.

Hilary and I went to see Beatrice Wyatt, former Secretary of the EAI...but she had obviously forgotten my connection with it... Really one feels that poor Marcia was the best off, seeing Mr Strong smile at her in her last moments. Luckily one doesn't brood too much about one's declining years, being blessed with an optimistic temperament, and realising that there is

nothing you can do about it. Also I have faith that I would be sustained--I felt that very much when I was in hospital and couldn't read or write properly.

Oh dear, I hadn't meant to write all this....I should never dare to write about *really* old people, only those in their sixties, and my next is ('hopefully') going to be about village life in the 1970s. I had already started it when this excitement of publication and endless letter-writing came upon me. But now it seems to be changing course (1977, VPE, 307).

What was changing course, as well, was her own state of health. It is almost unbearably poignant to be aware now that, at the time of writing this and unbeknownst to Pym, her cancer had returned. This final illness was to change the direction and style of her last work in ways already hinted at.

In this letter one can see how Pym's personal experiences become or reflect her narrative themes, a correlation already remarked upon. The question of the dispensability of the older women, in this case of being forgotten after retirement; the discourse of decline, and the mention of faith and the value of a sustaining optimistic temperament, are all worked through in Quartet in the person of Letty. These elements will surface again in A Few Green Leaves.

Marcia, the mad, dying, neglected woman, seems to represent some sort of alter-ego to Pym and one can sense an unconscious identification in the way that Marcia-the-character intrudes into Pym's own words in this letter. The reference to the smile Marcia received in her dying moments from her surgeon, Mr Strong, also moves Pym's narratives away from the search for "something to love" to the faith that she mentions and that will become central to her dying work. It is not too far a stretch to say that "Mr Strong" will become God in her last work, and not the unattainable perfect man Pym and her characters have thus far been seeking.

Chapter 6

The dying work of Sanditon

Austen and Pym wrote their last works during the penultimate months of their fatal illnesses. As previously mentioned, Sanditon was abandoned as a fragmentary work shortly before Addison's disease claimed the life of Austen. The date of March 15 is inscribed after the last section of the manuscript, and Austen died on July 18, 1817. A Few Green Leaves was completed but not quite readied for submission to publishers before Pym submitted to cancer's invasion. In late October she writes to Philip Larkin, "I've finished my country novel except for a few finishing touches..." (VPE, 333) and she died in mid-January 1980. The fact that both these works were being written while their authors were dying must surely have a demonstrable effect on them. Determining the nature of that effect is the focus of this chapter.

Various metaphorical illnesses of society are reflected in the themes and narratives of these works. It is as if Austen and Pym saw the England around them filtered through the lens of their own personal illnesses, and found it as rapidly changing and unstable as their own bodies. Yet although they were beyond cure personally, they both endorse (or at least, imply, in Austen's case) a method of healing for the ills of society that they depict.

The elements of instability in the worlds of these "dying" works are remarkably similar. They mimic yet enlarge the individual illnesses which we have traced thus far in both author's previous works. They are both the "flights of illness" for the secondary gains of escape or attention in Austen and the existential illnesses of loneliness and ageing in Pym. The common use by both authors of a traditional rural village undergoing rapid change provides both setting and metaphor for the ills of society and brings the aforementioned illnesses to an apotheosis. We find the elements of escape

and attention collected under the rubric of hypochondria in Sanditon, and we see the elements / ailments of isolation and aging evolve into depression and death in A Few Green Leaves.

The pattern of cures traced in the previous works of both authors are also present to some degree in the dying works; that is, "purging" and "vivifying" or strengthening, in Austen, and "resistance" through "innoculation" in Pym. And these treatments enlarge in scope, as do the individual illnesses, to apply to the village-as-society. But, ironically, these cures lack the efficacy they have for individuals when they are applied to society-as-the-patient. Further, when these cures are taken to an extreme, they actually produce the illnesses they are purported to cure. The cures that Austen and Pym, explicitly or implicitly, endorse in their dying works are pre- or extra-medical, and represent a return to more traditional, non-scientific methods of treatment: the via medicatrix naturae and faith healing. Let us turn to a discussion of Sanditon first.

Sanditon: Improvement gone mad

When Sanditon opens, the reader is immediately witness to a carriage overturning in a country lane. It is worthwhile quoting the entire first sentence of the novel because within it are many of the clues, signs or symptoms from which we can begin to diagnose the particular discourse of illness in Sanditon:

A gentleman and lady travelling from Tonbridge towards that part of the Sussex coast which lies between Hastings and Eastbourne, being induced by business to quit the high road, and attempt a very rough lane, were overturned in toiling up its long ascent half rock, half sand (LSW, S, 156).

This abrupt entry into action marks a departure from Austen's usual, leisurely beginnings. It also sounds much like a beginning to any one of Thomas Hardy's novels where unnamed travellers are depicted by a bird's-eye-positioned narrator as

traversing a route between specifically named locations. As we know, Hardy's novels continued from their first lines to emphasize the enduringness and strength of the landscape over the transience and powerlessness of the ant-like figures scurrying over it. Although Sanditon does not share the pessimism and fatalism of the Hardy world, it does, for the first and last time in Austen's body of works, display the celebration of place that will become Hardy's signature. As H. Abigail Bok writes, "What does stand out in Sanditon is a deeper sense of 'place' and a new awareness of social dislocation that prefigures the Victorian novel" (Bok, 341) And, as I hope to demonstrate, this also implies that a deeper sense of "place" will be the cure for this dislocation.

Complementing the specific locations yet generic people present in this opening sentence, there are other signs of departure from Austen's usual style and depictions of orderly life. The verb forms found in the sentence; "travelling," "lies," "induced," "quit," "attempt," "overturned," and "toiling," are predominantly negative in tone, or at least suggestive of failure. They hint already at the "unsoundness" which permeates Sanditon-the-village and Sanditon-the-novel. And just as Admiral and Mrs Croft's joint driving style in Persuasion--she steady on the reins, he a little bit heedless--is "no bad representation of the general guidance of their affairs", so, too, is this quitting of the high road and overturning on the rough country lane, half rock, half sand, no bad representation of the "business" of Sanditon.

The "business" of Sanditon which has induced the gentleman and lady to "quit the high road," is speculation in general and, specifically here, the pursuit of a surgeon to complement the health spa they are in the process of developing. Mr and Mrs Parker--we learn their names only at the bottom of the fourth page--are wild to discover the advertised surgeon of Willingden. That they they have made a mistake in the location of the surgeon through their faulty reading of an advertisement is pointed out to them

by the sensible, placid ("healthy") Mr Heywood who, significantly, rescues them after the accident: "if you were to show me all the newspapers in the kingdom, you would not persuade me of there being a surgeon in Willingden," he says with "a good humoured smile" (S,157). This short passage is indicative of several themes that will begin to be developed in the twelve chapters that we have of Sanditon; for example, a plenitude of mistakes in identity, the new "business" of health and curing, and the unstable language of advertising.

In fact, mistakes begin directly after the carriage overturns, when the still nameless Mr Parker discovers that he has a sprained ankle. It is a mistake that employs once again the trope of the house. He points to a cottage in the distance and says:

'There, I fancy lies my cure'—pointing to the neat-looking end of a cottage, which was seen romantically situated among wood on a high eminence at some little distance--'Does not that promise to be the very place?'

Herein lies the essential irony of the entire story; or, at least, to the extent that we have of it. The mistaken belief that the cottage contains the surgeon needed for the business of the spa is ironically counterpointed to an underlying healthy sub-text which hints that the neat-looking cottage in the romantic distance actually does hold the cure to the ills of the speculative village, Sanditon. This pattern of two parallel narratives, one mistaken and "unhealthy," the other a hidden and healthy subtext may be said to be hinted at in the description of the terrain--half rock, half sand--half solid, half shifting. It is similar in pattern to the parallel narratives in Emma: Emma's faulty narrative and Knightley's true one. In Emma, we see the curing of the unhealthy narrative, but in Sanditon, we can only surmise that this will occur. But the symbol of the cottage in the distance provides the clue or sign we require.

Although seen faultily, again, as "romantic" by Parker, the cottage actually is, as Mr Heywood says, "as indifferent a double tenement as any in the parish, and...my

shepherd lives at one end, and three old women at the other" (S, 157). And from this we can surmise that the "cure" which Parker mistakenly believes is in the cottage in the person of an advertising surgeon may actually have been intended by Austen to be the traditional, rooted life of the rural inhabitants. That is certainly the direction in which the unfinished Sanditon seems to be leading. In this brief scene, the new, the shifting, the speculative, the commercial, and the unstable begin to be counterpointed to the old, the solid, the reliable, the agrarian, and the stable. Not only does it continue through the few short chapters we have, it also continues the dialectic of illness and health we have seen traced through Austen's previous works.

There are many cases of "doubling" in Sanditon: for example, the two husbands of Lady Denham; the two homes of the Parkers; the two purported sets of potential clients. Even the town of Sanditon was "a second wife" to Mr. Parker. The confusion and "errors, fallacies and misapprehensions" that arise from these confused and blurred identities are extended into the realms of language and vision. These, too, are unstable and "ill."

The language of the verbal hypochondriacs that was discussed in Chapter 2--circular, pointless, and repetitive--becomes in Sanditon the language of speculation, commerce and advertising. Words have double meanings and are couched in economic terms or in short "sound-bytes." Mr. Parker's discourses are transcribed in short phrases interspersed with dashes. They are exclamatory, like advertising. And like advertising, his words are intended to persuade, encourage, and propel those who hear them into action.

Austen parodies her own predilection for the "nice" and proper in language in Northanger Abbey and again in Sanditon for similar reasons. Improperly-used language has ill effects and should be cured. Henry Tilney cleared up the Gothic fever of Catherine Morland's language, but who is to serve this physician role in Sanditon?

If Sanditon is a natural progression in Austen's writing from Persuasion, then it would seem from our tracing of the evolving methods of healing present in Austen's body of works that Persuasion's stress on the individual as a self-healer might receive at least equal stress if not more in Sanditon. And if Sanditon is a return to Austen's very early style, as many critics claim, then cure should derive from some authority figure and take the form of purging--as it does in Northanger Abbey, for example. Does it seem likely that the ill effects of speculation on the village of Sanditon can be purged? And, if so, who would effect it? In the twelve chapters we have, no one character clearly emerges as an authority- or physician- figure. Could it possibly be Charlotte Heywood who is invited to Sanditon as the guest of the Parkers "to bathe and be better if she could" (S, 164)?

Charlotte is, admittedly, the daughter of the rooted plain-speaking farmer, Mr Heywood, who sees the "romantic" cottage for what it really is. We certainly see all the goings-on at Sanditon through Charlotte's eyes. She minces no words herself and her views of the valetudinarian Arthur Parker are rooted in clear sight and common sense. She says, in indirect discourse through a closely identified narrator, after watching Arthur partake of much toast with lashings of butter:

Certainly Arthur Parker's enjoyments in invalidism were very different from his sisters'--by no means so spiritualized. A good deal of earthly dross hung about him. Charlotte could not but suspect him of adopting that line of life, principally for the indulgence of an indolent temper--and to be determined on having no disorders but such as called for warm rooms and good nourishment (S, 203).

Charlotte's clear-sighted and healthy impression of the speculative nature of Arthur's "illness" one hopes might have been extended in the unwritten chapters to the entire project of the health spa. But we are not to know. Charlotte is not yet developed

enough for the reader to judge whether she will see the project as based on shifting sand and unlikely to endure, let alone whether she can control a central healing role. She is, up to the point we are forced to leave her, merely an observer on the margin of the activity—and what an activity it is.

Tony Tanner has written a chapter on Sanditon titled, "The Disease of Activity : 'Sanditon.'" (Interestingly, he apostrophizes the title of the work rather than italicizes it, signifying a particular view of text-as-fragment that will be discussed in the concluding chapter.) He describes the activity of speculative development of Sanditon as, among other things, "specular" doubling (Tanner, 257).

The double vision of Sanditon is primarily embodied in the speculating consortium's distorted views. They see one vision--commerce and profit and futurity--superimposed on the other vision of a placid, traditional seaside village. Everything and everybody in Sanditon is seen by this group through the same double lens: real villagers are seen as props for the show; the sea as an exploitable resource; friends as clients or agents; cliff-top views as assets; illness as a commodity. There are even two Sanditons, the real village at the bottom of the hill and the new constructed village at the top. In the following short passage, in which the narrator describes Charlotte Heywood and Mr Parker's tour, can be found several of these specular images:

They were now approaching the church and the real village of Sanditon, which stood at the foot of the hill they were afterwards to ascend...and whose height ended in an open down where the new buildings might soon be looked for....The village contained little more than cottages, but the spirit of the day had been caught, as Mr Parker observed with delight to Charlotte, and two or three of the best of them were smartened up with a white curtain and 'Lodgings to let'-, and, farther on, in the little green court of an old farm house, two females in elegant white were actually to be

seen with their books and camp stools - and in turning the corner of the baker's shop, the sound of a harp might be heard through the upper casement (S, 172).

The ills of the village derive from the speculation. All that is solid, reliable, traditional and truly valuable is debased, distorted, or discarded. Earlier in Charlotte's tour, she had asked, "And whose very snug-looking place is this?" upon catching sight of "a moderate-sized house, well fenced and planted, and rich in garden, orchard and meadows which are the best embellishments of such a dwelling" (S, 169). This is Parker's former house, traded up for "a rather better situation," his new house on the windy hill. Parker says "You will not think I made a bad exchange, when you reach Trafalgar House-which by the bye, I almost wish I had not named Trafalgar - for Waterloo is more the thing now" (S, 169). Again the trope of the house is used to site this particular illness of speculation, exchange and shifting fads. And the wish to re-name it points up how unstable are the signifiers and the signified in this speculated world. New meanings can be, and are, imposed at random will on newly-constructed symbols.

In an ironically poignant moment, Parker's own wife thinks wistfully of her old home in its sheltered valley as she is swept along past it by Mr Parker in his pursuit of the new. She values its security, solidity and stability. In fact, Parker's discarded snug home, the un-"smartened" houses of the real village, and the shepherd's cottage on the hill provide a clue to the possible cure of the unstable Sanditon. This Sandy-town is built on the merits of a beach, the marketable and exploitable commodity in this business of health. It need not be emphasized that these foundations are unstable.

The business of spas and watering holes was to reach its zenith in the nineteenth century, but seaside towns had begun to be exploited as places of cure at least a century before and were certainly well known to Austen. She had spent several,

purportedly unhappy, years herself at a well-known and popular, albeit beachless, place of cure, Bath. The city of Bath and other seaside resorts of cure figure frequently in her novels, but never in a positive light as the sites of renewal and health-giving powers their promoters claim them to be. Catherine Morland spends a confusedly disturbing time in Bath in Northanger Abbey; Isabella Woodhouse Knightley in Emma ceaselessly plans trips to seaside spas to cure her imaginary ailments; and Anne Elliot in Persuasion finds the noise and tumult of Bath disagreeably affirming her own self-confusion. Several minor characters whom Austen shades with nuances of narratorial disapproval hail from Bath or places similar to it. The gauche and overbearing Mrs Elton of Emma is the former Miss Hawkins of Bath and Bristol (Bristol had aspirations at the time to be a well-attended spa); Lydia Bennet of Pride and Prejudice elopes with the duplicitous Wickham to Bath; and the modern destructive brother-sister duo, Henry and Mary Crawford of Mansfield Park, spend many riotous times in popular watering-holes.

Interestingly, Thomas Hardy, to whom I have already alluded in terms of the opening lines of Sanditon, was also to use a watering hole--his "Sandbourne"--as an image of dislocation rather than cure in Tess. So, given this brief review of Austen's portrayals of the predominantly negative influences of Bath and similar places, what does her use in her dying work of a newly-developed health resort within a traditional seaside village say about cure?

As mentioned, the counterpointing of the traditional and rooted with the shifting instability of the new provides the clue, I believe, in interpreting to what ideal condition of health Sanditon's dialectic of illness and cure might be leading. We do not sense that Austen is necessarily opposed to all that is new, for there is often a sense of approving excitement to be caught in her tone, and indeed Mr Parker is not depicted as a despicable character. There are many aspects of his personality that are

positively portrayed; he is kindly and caring, and often boyishly attractive in his enthusiasm. It is the object of his enthusiasm of which Austen seems to disapprove: the business of wholesale exchange of the old for the new; the new at all costs, and the concomitant expendability of the old.

The business of curing, Austen seems poised to say, does not exist in commerce and construction and feverish activity. The real business of curing is hinted at in the opening pages as being contained within the shepherd's simple cottage, in the solid rock foundations of the real village, and in the "sparkling" sea; and in fruitful activity, not in frousting by the fireside; in healthful walks, not mad careerings which overturn carriages. In other words, a return to the balance of health --to soundness and work-- is required to cure the "disease of activity" (Tanner) and the "strange and fatal fevers" of improvement gone mad and overturned.

Homeostasis is the term used to describe a body's return to its prior, normal state of balance before episodes of illness or instability. As discussed in the second chapter's focus on the eighteenth century cures which Austen metaphorically employs in the cures of her female protagonists, a body purged is a body lessened and diminished (for something is removed), and a body vivified is a body strengthened and augmented (something is added). Neither cure returns the body to its former state; it is either diminished or augmented. The only cure that actually restores homeostasis to the body is the healing power of nature--the via medicatrix naturae. The body heals itself, by itself, with no external interventions or agency apart from time. Let us explore the notion that Austen's dying work might have concluded in the restoration of balance to the speculated world through the healing power of nature.

Ironically, of course, it is the healing power of nature that is exploited and commercialized in the town of Sanditon, as it was in all the seaside spas and health resorts of the eighteenth and nineteenth centuries. Austen's parody of the nature cure

should not mislead us. Like her parody of Gothic literature which does not erase her passionate defense of the novel in Northanger Abbey, her parody of the nature cure in Sanditon should not negate or erase what I feel sure would have been an equally passionate defense of nature.

We know from biography and letters that Austen herself much preferred the country to the city. Her novels are all set in rural or semi-rural locations, with many of the "disturbing" actions taking place in larger towns and cities and the resolutions occurring back in the country again. A variation of this pattern occurs in Mansfield Park but it is a variation that prefigures Sanditon. Mr Rushworth's country seat, Sotherton, is being "improved," yet the most disturbing of actions occurs there, in the park by the ha-ha. This reinforces Austen's characteristic disapproval of the false, the merely decorative, and the over-designed and constructed.

In the twelve short chapters we have of Sanditon, the healthy sub-narrative of the solid, the stable, and the traditional represented by the "real" village and its ways seems poised to assert itself and overcome the dominant, overlaid narrative of shifting signifiers, doubled visions, and modern fads and activities represented by the speculated health resort of the new or "unreal" Sanditon. The ideal condition of health to which this narrative yearns appears to be balance. And what achieves balance or homeostasis but the healing power of nature?

Sanditon's ironic depiction of a health resort that actually causes dis-ease leads one to consider how the metaphorical cures of the previous works are reflected. They, too, are present in ironic form. The imposition of modern speculation upon the village has purged it of its traditional healthy working economy and caused a fundamental lack of balance; and the vivifying of the village by the same modern speculation has actually caused it to become unstable. Can one conclude that in Austen's dying work she might have been unconsciously re-evaluating the cures she had previously endorsed

as the way to health? For, as mentioned, in the face of imminent certain death no purging or vivifying is of value. When health becomes elusive but death certain, this knowledge alters the dialectic of illness and cure. The ideal condition of health cannot be achieved but perhaps balance can. If one can come to terms with and balance all aspects of one's life, the positive with the negative, one can attain a sense of closure that ensures dying well. In the discourse of dis-ease which most surely Sanditon is, I suggest that the restoration of balance to the speculated village and the disease of activity which marks the speculators would have provided the closure that is missing.

Let us turn to Barbara Pym and the cure for the discourse of dis-ease which comprises her dying work, A Few Green Leaves.

Chapter 7

Faith-healing and Other Last Resorts in Barbara Pym

If the business of curing is the subject of Sanditon, then the business of dying is the subject of Pym's last work, A Few Green Leaves. And where the health resort is the symbol of the cure-economy, with illness its currency for the misled, mistaken and myopic speculators of Sanditon, the mausoleum is the symbol of the business of dying, and science its currency for the equally misled and mistaken set of characters in Pym's unnamed village. And, finally, where the traditional healing power of nature for the ills of society is hinted at in Sanditon, another equally traditional cure--faith healing--is explicitly endorsed in A Few Green Leaves.

In a remarkably similar fashion to Austen, Pym also uses a village undergoing rapid and disturbing change as both the site of her discourse of dis-ease and the primary "character" of the work. The generic people of Sanditon's opening lines is mirrored in Pym's leaving her village unnamed; the implicit intention, perhaps, of both dying authors being that the reader regard these works as allegories or parables of sorts. It is conventional yet tempting to assume that a dying writer sees well and sees clearly; but what surely must be is that a dying writer does not take her last work lightly. Each dying word, one believes, must have been selected carefully in a last process of selection, and by "loading every rift with ore," as Pym describes the process of revision.

The signs and symptoms of dis-ease in Pym's village are clearly visible in the opening passage, as they are in Sanditon. A group of villagers has gathered to take part in an annual ceremony dating from the seventeenth century--the right to walk through the woods of the local squire's estate in order to collect faggots for their fireplaces. Immediately a sense of dissonance is felt. The local squire has been

replaced by a new, unknown, absentee owner; the need to collect firewood has long been superseded by central heating and electric fires; and the villagers on the walk are not the traditional villagers but the relative newcomers. In other words, the ceremony is adhered to but the context has changed. Indeed, as in Sanditon, there are actually two villages, but here it is presented with an ironic twentieth-century twist. The "real" village of original cottages is lived in by relocated urbanites and the modern outlying housing estates of bungalows by the descendents of the original villagers. And the two ways of life, the modern and the traditional, are similarly inverted by their proponents. Like Sanditon, a sort of speculation has also caused this fundamental shift in the order of things, and it, too, is a speculation of improvement.

Improvement in A Few Green Leaves takes its form in figurative and metaphorical versions of health and cure as it does in Sanditon. And the implicit question of the relative efficacy of the competing cures also underlies this novel. Here it is science and religion that are counterpointed, most particularly by their contrasting approaches to death. For death enters this novel as it never does in Austen--centre-stage. But first let us examine the "illnesses" of the village and how they are improved.

Illness takes several forms in A Few Green Leaves, but all are manifestations of a similar "condition." The opening passage indicates some of the changes that have come to the village itself, which could be said now to be suffering from a lack of "heart." The character most closely allied with the narrator, Emma Howick, is an anthropologist trained to observe and detail conditions and changes in society. She remains on the margin--detached, objective--taking mental notes on the condition of the village and its inhabitants. Ironically, she also lacks "heart," for she is lonely and searching for "something to love," like so many of Pym's observer-like "excellent women."

One could almost say, with tongue planted firmly in cheek, that this novel is about the problems of central heating (a phrase actually used by Pym several times in the

novel), for the other illnesses of individual characters all seem to reflect a similar metaphorical lack of heart. The rector, Tom Dagnall, is questioning the vitality of his faith; his sister, Daphne, is depressed with her lonely life in the cold rectory (lacking central heating) and longs for companionship and the warmth of Greece; the "young" doctor, Martin Shrubsole, lacks heart or compassion; and his mother-in-law, Avice, is disheartened by Martin's obsession with her "symptoms" of ageing which she has fully accepted as inevitable and not very troublesome. The former governess of the squire's family, Miss Vereker, has been dislocated and deprived of her former role as the "heart" of the family; the restaurant critic, Adam Prince, has lost his taste for food and life; the young florist, Terry Skate, abandons his work tending the mausoleum because he has lost his faith; and, as the novel ends, a young woman with a broken heart from an unsatisfactory love affair has been offered Emma's cottage in which to recover. That she cannot take up the offer, because Emma decides to stay in the village, abandon her "scientific" work, write a novel, and commence a love affair with Tom--in other words because there is no place for a broken heart in the village--comprises much of the impetus behind the plot.

The cures are as varied as the manifestations of the illnesses of the heart, but they align themselves between science and religion. The twentieth-century faith in science as holding the key to cure represents yet another stage in the evolution of healing approaches I have been tracing in this paper. In Pym's previous works, we have seen how illness is depicted in terms of warfare; that is, as an invasion for which tactics of resistance are necessary. Pym's characters resist the ill effects of the invasion largely through the defenses of inoculation, by arming themselves from the effects of the invasion or isolating themselves and thus avoiding the invasion.

Susan Sontag describes, in Illness as Metaphor, how cancer is metaphorically perceived in terms of warfare such as invasion, resistance, fighting, battle, and

attacks. Pym had cancer of the breast and a mastectomy in 1971, and eight years later succumbed to its second lethal invasion. It is surely not too much to believe that this metaphorical way of comprehending cancer, reinforced by current societal and medical language while speaking about cancer, should have unconsciously permeated her works? I think not. And when she was dying from her second battle with cancer and feeling life ebb from her, is it again too much to think that her unnamed village invaded by cancerous changes which threaten its traditional life could be the cancer-invaded body facing death? If one accepts this premise, then one is led to view Pym's discourse on cure in A Few Green Leaves in a different light. That is, not as a healing method which will rid the body of its illness and return it to stability, for it is too late for that, but as one that will embrace the body and its illness--accept the totality of the invaded body--and provide comfort.

The healing and comforting of a totality of good and bad, an integrated health and illness, is not the work of the metaphorically medical or quack approaches we have traced thus far in either Pym or Austen's previous works. But each of their dying works seems to propound a more traditional, extra-medical, approach. I have suggested that the purging and vivifying methods of cure in Austen's body of works might well have become in Sanditon the via medicatrix naturae which "heals" and balances. Likewise, but more surely in A Few Green Leaves, another traditional extra- or pre-medical approach is endorsed--faith-healing. How does Pym negotiate the shift from medicine to religion in this dying work?

Tom Dagnall, the rector, faces a virtually empty church each Sunday morning. His role as comforter, advisor and spiritual guide in the village has been supplanted by the doctor whose surgery is always full and, worse, has an impatient queue waiting outside. Nobody waits impatiently outside the village church. The patients leave, comforted by the prescription held in their hands, while the rector has nothing tangible

to offer those few he does comfort. Medicine as a science is concerned with facts and answers; religion has no final answers. The common element between them though is faith: with science, faith that the answers are the right ones; with religion, faith that the questions are the right ones.

The traditional villagers, aided by the welfare state of 1970s England, have improved the quality of their lives, not only with comfortable bungalows, central heating and all the "mod. cons," but with national health. It is they who flock to the doctors' surgeries and leave the vestry empty. But when death comes, it is to the church they turn. And in the "business of dying," is to the church that the doctors themselves turn, for death is a condition they have no answers for.

I have already referred to the illnesses in A Few Green Leaves as metaphorical conditions of the heart. And while dissatisfaction, discontent, and uneasiness are symptoms of the anxiety and depression evidenced in the variously "ill" characters, the same condition of dis-ease permeates the unnamed village as speculation does in Sanditon. Seen by the light of this trope of the heart, the illness of the village reflects an essential disorder at the centre of things. The traditional centre or heart of an English village had always been the church and A Few Green Leaves uses its unnamed village as a microcosm and its dis-ease as a parable to reflect upon the health of the church. Certainly Barbara Pym was well-grounded in the history of the Church of England and eminently capable of this project which renders her dying work more profoundly reflective than it is usually given credit for.

The Church of England underwent astounding systemic changes as a result of the Oxford Movement, which "may be said to have begun when, in 1833, John Keble preached a famous sermon upon "National Apostasy" (Scott, 49). The three major results of this movement are ritual, modernism and Christian socialism. Ritual as the Romanizing tendency of Anglo-Catholicism; modernism as the taking into account of

scientific evidence contrary to the biblical account of creation; and Christian socialism as the taking on by the church of social work and reform are all reflected in various ways in A Few Green Leaves. In a neatly mapped-out fashion, each of these elements of the Church is represented by a different character and tested for efficacy in the face of various crises and, finally, death. They are eventually synthesized in the character of the village rector, Tom Dagnall, and the reaffirmation of his own wavering faith.

If the Church community is metaphorically represented by the unnamed village, then modernism and Christian socialism are embodied by the "new" doctor, the anthropologist, and the social worker who each "compete" with the rector to cure the ills of the community. Such internally competing forces have been testing the strength of the Church and its fundamental source of energy, faith, since the Oxford Movement. But the traditional role and function of the Church and its clergy were also facing external challenges of a contemporary nature. In the first few pages of A Few Green Leaves, these internal and external challenges are all introduced, figuratively and metaphorically, and comprise the period of instability or metaphorical illness of the church which Pym explores.

As mentioned, the novel opens with a contemporary re-playing of a village tradition dating to the sixteenth century and observed by the anthropologist: "On the Sunday after Easter--Low Sunday, Emma believed it was called--the villagers were permitted to walk in the park and woods surrounding the manor" (AFGL,7). Originally intended for the collection of faggots, the tradition continues in spite of the lack of a resident squire and, in an era of central heating, no need for the villagers to burn wood. In fact, as already noted, it is not the "real" villagers who most avidly adhere to the custom; it is the new villagers, the relocated urbanites. The underlying theme of the persistence of tradition in spite of a changing context is where this dying work commences and where Austen's Sanditon, I believe, was heading.

Tom Dagnall's role as the country parson is another tradition undergoing a contextual re-definition; and whether or not this tradition will also survive its period of instability or metaphorical illness is the question the novel attempts to answer. If the missing squire and the era of central heating metaphorically parallel the absence of God in an increasingly secular society and the turning of belief in God to faith in science and the state, then the vicar's role is indeed one that deserves to be questioned. Dagnall's predecessors in his role in the microcosmic village would have been quite sure of their multifarious role in the community, but he is in doubt about his. And quite rightly so, for the Church is receiving stiff competition. As mentioned, Tom's church is almost empty while the doctors' surgery has a queue. His parish visits must be timed judiciously so as not to compete with popular television shows. The needy and poor of the village are looked after by the welfare state, not the parish. The social worker has supplanted the vicar's counselling function. The anthropologist is keeping the records of village life that the vicar traditionally has done. What is there left for Tom to do? He wonders himself, and with his obsessive historical research and related quest for the site of the deserted medieval village, he looks to the past for the answer.

However, it is not the past that contains the key to the cure of Tom's--and the Church's--dis-ease. It is when death enters the novel and the community that the Church's true and enduring function becomes clear. The mausoleum in the churchyard is a central motif in A Few Green Leaves which functions in a similar way to the houses in Sanditon. Unvisited, abandoned, and overrun by weeds, this place of death is neglected in the contemporary life of the village. It is briefly, and rather flamboyantly, cared for by a sentimental young florist who soon abandons his task due to a crisis of religious doubt. Sentiment cannot adequately deal with death, Pym appears to say. Neither can science which pits all its strengths into resisting death. Fittingly yet ironically, the new young doctor, a gerontologist, assiduously avoids the

mausoleum and counsels his elderly mother-in-law not to linger in the damp churchyard helping the vicar with his historical research. After "frankly" advising an elderly patient that "her days are numbered," he recoils from her next question when she had

...come back at him by asking if he believed in life after death. For a moment he had been stunned into silence, indignant at such a question. Then of course he realized that he couldn't be expected to answer things like that--it was the rector's business. The fact that death came to all of us seemed irrelevant at this moment. It was a relief when she slipped quietly out of the room...(AFGL, 186)

However, the older doctor--he who is far more interested in obstetrics than geriatrics--comes across the vicar occasionally in the mausoleum. And it is here, between the obstetrician and the vicar, that the symbolic handing over of function of tending to birth and to death occurs. When the death of an eccentric minor character occurs, it is the church and not science or medicine which best copes. The old doctor gratefully hands over the case to Tom, and he willingly receives it, as evidenced in the following passage:

With Miss Lickerish's death, Tom felt that he came into his own....It was now obvious that there were some situations that only the clergy could manage properly. The doctors had done their part and it was now over to Tom (AFGL 203).

Pym implies that it is through the Church and a living faith that death can be best understood and accepted. And Tom's own living faith is renewed after the affirmation of his function.

The dialectic of illness and cure which courses through Pym's works and is played out in metaphorical terms of warfare and resistance becomes in her dying work a

discourse of dis-ease requiring a cure of a distinctly different sort than the "inoculation" that had proved effective against invasive unsettling infections. There is no cure for death, but one can die well. And in this final work, written while Pym was knowingly dying, she proclaims that to die well requires the healing quality of faith, not science or medicine. Pym appears to have found the answer herself to the question of "how to tie up all the loose ends," for which she had previously looked to Austen.

It is interesting to note how similar in narrative form and closure A Few Green Leaves is to Austen's pre-Sanditon works. Unlike the majority of Pym's works, the closure of this narrative contains the promise of pending marriage between the rector and the observer, anthropologist Emma Howick. In a neat tying up of "loose ends," this final work also marries art and religion for Emma decides to abandon her scientific studies for novel-writing. Tom Dagnall suggests to Emma that she speak to his historical society about her work

...you've been in the village some time now and must have made notes on certain aspects of our life here, come to your own conclusions. You could relate your talk to things that happened in the past...or even speculate on the future--what might happen in the years to come.

Emma responds in a way that brings this work to a closure that none of Pym's prior works do. The narrative continues its linear and horizontal course rather than circling back to its beginnings with dis-ease absorbed or successfully resisted. Emma responds to the rector:

"Yes, I might do that," Emma agreed, but without revealing which aspect she proposed to deal with. She remembered that her mother had said something about wanting to let the cottage to a former student, who was writing a novel and recovering from an unhappy love affair. But this was not going to happen, for Emma was going to

stay in the village herself. She could write a novel and even, as she was beginning to realize, embark on a love affair which need not necessarily be an unhappy one.

Even though the final sentence is couched in guarded language ("could," "beginning," "even embark") and replete with double-negatives, it expresses a positive life-affirming hopefulness which suggests that yet another cure for dis-ease has taken effect; that failure in love is not a necessary condition of life.

In this final work of Pym's, the metaphorical cure of faith-healing dominates, but one also infers that both love and art are offered up as faith's products. It is perhaps not surprising that such concepts are present in a dying work. When a writer has clear intimations of her mortality, perhaps the vision broadens, as Broyard asserts it does, to encompass concepts which are universal and enduring. The curative powers of faith, love, art, and in Sanditon, nature are such concepts. They share a nobility and simplicity that lift the discourse up and away from its dis-ease. They serve to ground the particular--the fevered, shifting, fragmented, petty and human concerns at a distance that might well be required in the process of dying well. As a postscript to these discussions of Sanditon and A Few Green Leaves, I wish to address the notion of the presence of simplicity in dying works.

"Intimations of Mortality"

In 1984, two psychologists from the University of British Columbia, Peter Suedfeld and Luz E. Piedrahita, published a startling study in the Journal of Personality and Social Psychology, titled "Intimations of Mortality: Integrative Simplification as a Precursor of Death." It was followed in 1993 by another article in the same journal, by Peter Suedfeld and Susan Bluck, titled "Changes in Integrative Complexity Accompanying Significant Life Events: Historical Evidence." (Both articles are appended to this paper.)

The 1984 article tested the hypothesis that a "terminal drop" in cognitive functioning occurs a few years before death. The methodology of the study consisted of examining the correspondence of eighteen subjects, twelve men and six women from the 18th to the 20th century who "(a) were deceased; (b) were considered eminent to the point of having had several biographies written about them; and (c) during the last ten years of their life had produced extensive correspondence that was available in published form" (Suedfeld 1984, 849). The letters were scored for integrative complexity, "a variable which is related to the degree of integration and differentiation in information processing." In layman's language, the letters were examined and measured for their level of "difficulty." The subjects were divided into two groups according to cause of death; the "Sudden Death" group who died accidentally, as the result of an illness of no longer than a month's duration, or from a discrete event such as a heart attack; and all others were assigned to the "Prolonged Death" category. Although neither Jane Austen nor Barbara Pym were among the subjects, other writers were Lewis Carroll, D.H. Lawrence, Aldous Huxley, Franx Kafka, Gustave Falubert, Robert Browning, Marcel Proust, Mary Russell Mitford, Gertrude Bell, and Mary Wollstonecraft Shelly. Austen and Pym would have been placed in the Prolonged Death category.

Interestingly, and most surprisingly to the conductors of the study, the conclusions they reached were the same for both groups. The level of integrative complexity measured in the letters of both groups dropped significantly in their last year of life when compared to the level measured in their previous works. Whether death is the result of a sudden accident or the natural result of a prolonged illness, complexity of thought and style in final works dropped to a level markedly lower than that measured in letters written during the ninth year before death where the highest point of measured integrative complexity was found. The Prolonged Death group showed a

gradual decline in integrative complexity from the ninth year preceding death, while the Sudden Death group made a sudden drop from another peak in complexity in the year preceding death. Unfortunately, only ten years of letters were studied, so that comparisons between very early and pre-death writing were not made.

This fascinating study might appear at first to have little bearing on literary criticism. For instance, the authors tantalizingly ask, "Could one use a reliable change in complexity to predict death as such changes have been used to predict the outbreak of armed conflict?" (Suedfeld, 852) However, I think this study can shed some useful light on how we receive and evaluate last works, for as the authors also write, "The surprisingly low mean scores of our eminent subjects may imply that complexity is affected by context--the intention of the author, the audience, and so forth--a question that can be answered by comparing public writings with private correspondence."

When we consider, as I have done, how a prevailing discourse changes from previous works to become something quite different in their knowingly dying works, I am certainly discussing context--biographical and historical, and have been drawing many conclusions about possible authorial intentions. And while I have not compared Austen and Pym's letters with their works in this study, apart from brief references, I and others have come to some conclusions about their dying works that seem to reinforce Suedfeld et al's study findings.

As I have mentioned, many critics cite both Sanditon and A Few Green Leaves as marking returns to the "lighter and brighter" style and thought of Austen and Pym's earliest works. That neither dying work continues the promise of writerly development held out by the penultimate works of Persuasion and A Quartet in Autumn is debatable. Austen quite clearly, to me, seems to be embarking on a new style, but Pym's final work does show a backing-off from or rejection of the more modernistic style of Quartet. But I hope that I have demonstrated that Austen and Pym were both

saying something not only remarkably similar, but also remarkably similarly simple in their last works. The project of both final works; that is, their metaphorical responses to instability and death and their endorsement of nature and faith as providing healing stability, may well be less integratively complex than the issues they previously tackled. However, as a conclusion to this postscript, one cannot deny that overwhelming truths often overwhelm by virtue of their simplicity. Matthew Arnold wrote in his last words of On Translating Homer:

Nothing has raised more questioning among my critics than these words—
noble, the grand style...I think it will be found that the grand style arises in
poetry, when a noble nature, poetically gifted, treats with simplicity or
with severity a serious subject.

Whether or not Austen and Pym had noble natures, they were both poetically gifted—and in their last works they both “treated” that most serious of subjects, death, with Arnold’s simplicity and severity, tempered always by Sterne-like mirth; and both last works contain cures of a noble and simple nature.

Let us turn now to how a text, in particular the unpublished and unfinished texts of Sanditon and A Few Green Leaves, may also undergo a treatment of cure.

Chapter 8

The Recuperated Text

The language of medicine has allowed us to trace a discourse of illness and cure through the works of Jane Austen and Barbara Pym which culminates in their final works. The following discussion shall use the same metaphors of illness, health, and cure to explore the notion of the recuperation of texts. The "altered states" of a dying body and dying work can also pertain to the text.

The "life" of a text, as an organism or body set free from its author through publication and public distribution, is as interesting, productive and provocative an area of study as its corollary, Roland Barthes's notion of "the death of the author." Barthes seeks to eradicate our linking of a work with an author's name and the consequent man-and-his-work criticism by asserting that a work becomes a text when it is freed from "the father's signature" (Barthes, 80). Throughout this study I have been discussing Austen and Pym's works and, most surely, have been conducting woman-and-her-work criticism. Let us now shift our view from that position of author-privileged and biographically-informed criticism of works to a regard of the text freed from its author's signature.

The "life" of a published text often undergoes periods of instability or what we are terming "illness": for instance, it may be, at times, unpopular, unstudied, or unbought. But an unread text is also an "ill" text because it is not functioning or working as it was intended. The primary reason for a text to be unread is because it is not published and, therefore, not circulating. And, further, works deemed by publishers to be unworthy of publication are often said "not to work." Since the ability to perform work is, as we recall, Rousseau's definition of health, the unread-because-unpublished text is most surely an ill text.

How, or even can, such an ill text be cured or recuperated? is the first of several questions about the condition of the text I shall pose. Indeed, this chapter of my paper may present more questions than it does answers, suggesting that the recuperation of a text--its healing and curing--is an area of study worthy of further exploration. While Austen's fragment, Sanditon, presents the more interesting and complex case of textual recuperation, I shall attempt an answer to this first question by using Pym's unpublished works as an example.

As has already been noted, Pym's An Unsuitable Attachment was rejected for publication in 1963 because her long-time publisher, Cape, felt that the novel did not work (unconvincing characterization and plot, too old-fashioned, etc) but, more importantly, it was rejected because it would not work; that is, have the ability to make money. As Pym writes to Philip Larkin:

Of course it may be that this novel is much worse than my others, though they didn't say so, giving their reason for rejecting it as their fear that with the present cost of book production, etc. etc. they doubted whether they could sell enough copies to make a profit (VPE, 216).

And how aptly named is this novel, An Unsuitable Attachment, that was not at this time deemed to be a validated and confirmed part of a body of works. However, it is now considered to be an eminently "suitable attachment" to Pym's body of works in spite of its generally acknowledged flaws. How was it recuperated as a text?

The recovery of such an "ill" text is often occasioned by a second opinion. A second look at Pym's body (of works) by the primary physician (the publisher) was occasioned by the opinions of two specialists (Larken and Cecil). It is remarkable how overlooked signs of health can suddenly be detected in what was considered a moribund, if not already dead, body when second, more exalted, opinions are given. Cape's

prognosis was reversed after the TLS article. As we know, not only were Pym's new works immediately published after Larkin and Cecil's diagnosis, but all her previous works were re-issued. Later, even the acknowledged-to-be-dead text of An Unsuitable Attachment was revived in a miracle of publishers' "CPR"; for, aptly, this novel is at the heart of her body (of works) in terms of production dates, and also functioned as the heart that stopped her writing for fourteen years when it was itself stopped. Its revival was followed by the publication of even more Pym material; her letters, diaries and journals which comprise A Very Private Eye and several unrevised texts such as Crampton Hodnet and Civil to Strangers.

The reading public also plays a role in the health of a text. Even when written off by publishers or critics as works, existing texts can continue to circulate and remain "healthy" in the sense of "working." Recall this line from Pym's letter to Philip Larkin, quoted in Chapter 3 and written when Pym's works were considered unpublishable: "I have had quite a lot of letters from various people who say they have always liked my novels and thought I was dead."

However, a fragment represents a very different and more challenging case of textual illness than that of unpublished works. Ernest Fontana has called fragments "diseased texts" in his paper on Rossetti's The Bride's Prelude, writing that "as a fragment it is a morbid deviation from an implied normalcy," which definition of illness I have also used in this study. Fontana suggests that "Rossetti's inability and/or unwillingness to complete The Bride's Prelude and his growing distaste for it indicate that we should regard it a true fragment" (Fontana, 5), which also suggests that Austen's "inability" to complete Sanditon may also indicate that we regard it as a true fragment rather than an historical accident. It is also conceivable, as will be discussed below, that Austen intended Sanditon to be a fragment. Certainly its fragmentary condition affected its health in terms of publication.

Sanditon was not published until 1925, over one hundred years after Austen's death, although Austen's nephew did include parts of the text in his biography. Its very condition of incompleteness is at the root of its century-long languishing unseen and unheard. Like a "defective" child,--indeed, like Austen's own brother, George--it was banished from the family of her works. Its fragmented condition precluded its whole-hearted inclusion in her body of works: it did not have the compensatory factors of youth as did Austen's Juvenilia and it was an uncomfortable work. Much of the cause for the discomfort is its condition; but another reason is its quite alarmingly different style.

Critics were at a loss to explain Sanditon's apparent reversion to an earlier style, belying the promise of writerly development held out by the incipiently Romantic Persuasion. As Laurence Lerner writes:

We cannot be certain that [Persuasion] marked a permanent change of direction: there is, after all, Sanditon, which followed, and there are parts of Persuasion itself...which are plain Jane. Even if the change had come and Jane Austen had lived to write more novels like it, her new view might have been more pleasant, more attractively open, and paid for with the loss of her genius (Lerner, 172).

On the other hand, several critics, R. W. Chapman and Lord David Cecil among them, have noted Austen's celebration of place in Sanditon and the presence of a "Romantic" chiaroscuro as a marked departure in style. A. Walton Litz and E.M. Forster both remark on its "atmosphere unique in Jane Austen's fiction (Litz, 168). These critical responses have served to recuperate Sanditon and restore it as a "healthy" appendage to Austen's body of works. But this is still a woman-and-her-work type of criticism and recuperation.

What is more meaningful perhaps when discussing fragments is how the reader

attempts to recuperate or "cure" them as texts. I mentioned earlier that the public has little influence in the private domain of publishing and its role in curing texts, but slightly more in the public domain of textual circulation and popular health. But the individual reader plays the most central of roles in the recuperation of texts in that most intimate and private of domains, the relationship between text and reader.

The concept of the text constructing the reader represented a paradigm shift in literary criticism, and continues to do so with mighty and still-evolving repercussions on how we view the reader-text relation and the act of reading. But let us examine the former concept, the one that was overturned to produce such mighty repercussions: the reader constructs the text

There remains little or no debate, notwithstanding the logocentric and text-stands-alone viewpoints, that we bring to a reading of a text our own set of meanings which filter the text and change it over the years to reflect or conform to selected ideologies. To parody Foucault, no text is free from the reader's signature. If this were not so, literary criticism would be a craft of the past. So, with author-privilege gone and reader-privilege firmly in place, what is actually happening in the act of reading and in the relationship between text and reader?

I suggest that the reader has an unconscious desire to "cure" any text; whether that may mean to come to terms with it (to comprehend and understand it); to heal or reduce any dissonance (that it may cause in the reader or display itself in its own narrative instability); or to reach a sense of closure together with the text in an intimate dialogic partnership. Therefore the relationship between text and reader can be seen as one of mutual and simultaneous construction.

Given this assertion of a mutually-constructing reading act, what occurs when a work is incomplete, the text a fragment? I suggest that both the text and the reader attempt to "cure" the other in this instance of textual illness. The reader's desire to bring

closure to an incomplete text is overwhelming, virtually impossible to humanly resist and the text's yearning to be enclosed is equal in intensity. And even though a fragment may be either intentional or unintentional according to its history of production it appears, oddly enough, that we bring to a reading of either sort of fragment similar "curing" tendencies. And both intentional and accidental fragments appear to have the same effect and constructing tendencies on the reader.

Marjorie Levinson has written a major study on Romantic fragment poems. She writes that an intentional fragment "posits an ideal integrity", and its irresolution is both a doctrinal and formal concern (Levinson, 12). But an unintentional fragment also posits its ideal integrity. Like a vestigial limb, it embodies in its unfinished state its own potential for completion. We know from experience of other complete limbs what a vestigial limb--a bud of an arm or a fingerless hand--could be in both form and function. Unlike an amputated leg, for example, which has a history, the vestigial limb or unintentional fragment has only futurity or potential. Its missing-ness, if you will, is like a silence, but a silence that speaks volumes in a scripted dialogue. And like this sort of silence, the vestigial limb/unintentional fragment often functions effectively. It can do things, manipulate things, and it can communicate. It is as if it draws back into itself some of the ideal integrity it is lacking.

But, conversely, the fragment can also become more itself, swelling with its own need to function as it is. Friedrich Schlegel writes, "A fragment, like a miniature work of art, has to be entirely isolated from the surrounding world and be complete in itself like a porcupine" (quoted in Rajan, 146). Like a porcupine, a fragment can be viewed as resisting invasion, and exhibiting neither opening nor need for the pouring back into it of its own ideal integrity. How we receive a literary fragment reflects both states or responses.

We can "complete" the fragment by drawing back into it some of its posited ideal

integrity. But here it is a most private affair since the ideal integrity it posits is seen though our eyes only. Each reader takes part in a private act of completion in this case. Or we can attempt to comprehend how the fragment-in-itself works; that is, as it is.

In the former case, I suggest that we are involved in a process of "curing" the text. We employ an interventionary treatment similar to the vivifying of the eighteenth century which I have traced through Austen's works. This I have likened, as may be recalled, to the improvement movement and the Enclosure Act. These responses seek to enclose and strengthen and improve an unstable, fragmentary "ill" text so that it will "work" in and of itself.

In the latter case, the reader is standing by observing how the fragment heals itself. The via medicatrix naturae permits the unstable text to achieve its own state of balance through its own integrity.

In the preceding discussion of discourses of dis-ease and cure in Sanditon, I have been involved in a treatment of this incomplete work which attempts to draw on the posited ideal integrity which hovers above, beyond, and behind the text. I have posited certain conclusions which I believe I glimpse or have intimations of. This response mimics the way I described Austen's own positing of ideal conditions of health toward which her narratives yearn. And dare I say that like Austen I, too, have been involved in a treatment of cure for the essential dis-ease I experience when in a dialogic relationship with an unstable because incomplete text.

Somehow I have been unable to resist my own readerly-privileged desire to cure. I have found it impossible to regard Sanditon as Schlegel suggests; that is, as complete-in-itself and capable of functioning well. Unable to stand by and observe how the via medicatrix naturae might heal this fragment, I have intervened or, conversely, I have not resisted what I perceive as its need to be completed. This text

has as surely constructed me and this paper as I have constructed it.

But it also quite clearly possible that Austen intended Sanditon to be a fragment. Her genius and impending death may have combined to create a final work which is indeed both the "formal and doctrinal affair" Levinson calls intentional Romantic fragments. For one thing, the last date Austen inscribed in the manuscript is after the last passage written, suggesting a finality and "signing-off," but more convincingly, further development of the Romantic elements promised in Persuasion can be found in Sanditon, and its very fragmentary condition, like the ruin and the torso, is a classically Romantic artistic form. If Sanditon is an intentional fragment, then the reader's desire to cure it is even stronger than if it were simply an abandoned, unfinished work.

Balachandra Rajan writes of these notions in his study of the form of the unfinished:

The torso like the ruin implies a whole, leaving the completion of that whole to the viewer's imagination, but regulating that completion by the character of the nucleus. In announcing itself stylistically as a fragment...the torso seeks resumption of its membership in an entity which is not necessarily lost as with the ruin, but which can be withheld so that the viewer can participate in the restorative effort. Both the torso and the ruin invite completion. Their aesthetic appeal depends upon a consequential meditation aroused by the relationship between the whole and the part. This can be true even with a poem, such as Ozymandias, which treats the surviving trace not as vestigial, but as the reality outlining the original pretence.

Unlike the torso and the ruin, the unfinished should not invite completion (Rajan, 2, italics mine).

While I disagree in part with the latter assertion because of the reader's desire to cure any text, I do agree that the simply unfinished work is not the formal affair requiring the same restorative effort as an intentional fragment. Rajan's words are a

suitable conclusion to this chapter, wherein I have focussed on only two types of diseased texts--the unpublished and the fragmentary. Each provides a quite different example of material illness or "periods of instability" in the textual condition, but both cases have permitted us to explore the notion of how the reader and text are involved in a recuperative act. The question of whether Sanditon was an intentional or unintentional fragment serves to further illuminate the discussion of discourses of disease and cure in dying works.

Chapter 9

Conclusion

This study of dying works has progressed from definitions of illness and health to the tracing of a discourse of illness and cure in the narratives of Jane Austen and Barbara Pym. This has permitted us to analyze the metaphorical treatments of "purging," "vivifying," and "inoculating" employed by Austen and Pym to restore their "ill" female protagonists to an approximation of the ideal condition of health by closure of the narrative. In their dying works of Sanditon and A Few Green Leaves, however, individual illnesses are suffused into a general societal condition of fragmentation, speculation and anxiety. The writers' shared use of a village undergoing profound change to site this societal dis-ease suggests an identification of the village with the dying body. In the face of certain death, no medical treatment is effective: however, while cure is elusive, healing is not. In these dying works, Austen provides hints that nature, the via medicatrix naturae, will heal the troubled village of Sanditon, providing balance between the new and speculative and the traditional and rooted; and Pym quite clearly expresses the curative powers of faith for the ills of the residents and for the state of health of the church.

Critic Anatole Broyard, while himself dying, asserts that a dying writer sees clearly and conclusively and that his or her final work may be a culmination of the themes of the preceding works which serve as mere preparation for the final vision. Indeed, this study's own long progression through Austen and Pym's works is itself merely preparation for an analysis of their final works.

In this study I hope I have demonstrated that the discourse of illness and cure found in Austen and Pym does indeed culminate in a suggestion of a simple and noble cure for dis-ease. Evidence for the presence of this sort of simplicity in dying works is

provided in the psychological study conducted by Peter Suedfeld et al at the University of British Columbia, where lower levels of integrative complexity were discovered in the letters of prominent writers in their final year of life, whether death was expected or sudden.

The discourse of illness and cure moved to a theoretical level in the final chapter's discussion of the recuperation of texts. Unpublished texts require a particular form of treatment in order to render them healthy and Pym's unpublished works were used as an example. The medical metaphor of a second diagnostic opinion and the role of the reading public in keeping a text circulating even while pronounced dead were discussed.

It was then suggested that the reader-text relationship is always one of curing, but particularly so when the text is a fragment. An unintentional fragment, such as Sanditon, represents a different sort of textual illness from an unpublished text. Its condition of incompleteness affects its function as a working, healthy appendage to a body of works. Varying critical and reader responses to Sanditon reflect the essential dis-ease embodied and caused by the unfinished.

Ernest Fontana has called intentional fragments "diseased texts," and their positing of an ideal integrity suggests that the reader is involved in a curative effort to restore it. A final suggestion was made that Sanditon may be an intentional romantic fragment, like the torso or the ruin, which requires a cure, or what Balachandra Rajan calls "a restorative effort," that the merely unfinished does not.

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Appendix A & B

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