BOOK REVIEW

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When people fall ill in the twenty-first century, many are driven by the notion that they must recover as quickly as possible so they can get back to their normal life, namely work. Things were different in the nineteenth century, however, as Hosanna Krienke demonstrates in Convalescence in the Nineteenth-Century Novel: The Afterlife of Victorian Illness, a recent instalment in the Cambridge Studies in Nineteenth-Century Literature and Culture series. In it she explores the relationship between nineteenth-century conversations about convalescence, the uncertain, extended period of rest and recuperation following illness or medical treatment, and its representation within five Victorian novels: Bleak House, Ruth, The Moonstone, Erewhon, and The Secret Garden. Krienke argues that these works demonstrate what she terms ‘convalescent time’ (p.1) as part of a process of training readers in a process of reading that emphasises the ‘slowly emerging and contingent meanings of the unfolding plot’ (p.1) above the novels’ often tidy conclusions. Fictional depictions of convalescence therefore serve as a means through which readers become more comfortable with prolonged uncertainty necessitated by the process of novel-reading itself.

Krienke’s work builds from foundational studies of illness in the nineteenth century, yet her approach differs from the majority of scholarship on Victorian illness in that she considers convalescence from a temporal perspective, as a shared experience among and across communities, instead of tracing specific pathologies or diagnoses and their impacts on individual characters. This focus on the uncertainty of illness, convalescence, and recovery draws from disability studies methodology, which Krienke then combines with cultural studies approaches; each of the five chapters couples literary analysis with extensive background and analysis of a specific aspect of convalescence discourse within Victorian culture to illuminate the complex connections between literature and culture.
In the first chapter, ‘Convalescence and the Working Class: Convalescent Homes, Illness Outcomes, and Charles Dickens’s *Bleak House*’, Krienke presents her strongest analysis in contextualising the rise of the convalescent home for working-class and poor patients in the earlier parts of the nineteenth century. Rather than focusing primarily on the sometimes-narrator Esther Summerson, as a number of other studies of this novel have done, the chapter instead closely examines the role of George’s shooting range as a makeshift convalescent home for the ill and infirm, including characters Phil Squod, the dying Jo, and Mr. Gridley. Krienke argues that *Bleak House* offers an optimistic roadmap for ways in which lower-class convalescents might be able to access and benefit from the care that their middle- and upper-class convalescent counterparts already enjoyed.

Chapter 2 discusses Elizabeth Gaskell’s *Ruth* alongside the genre of religious tracts aimed at convalescents; these ‘devotionals’ (p.19) discuss the religious benefits that illness may bring to suffering patients and caution them against getting carried away in their desire for reform only to ultimately fall away from their religious resolutions as their health recovers. Krienke traces Gaskell’s engagement with these religious discourses within *Ruth* and claims that, despite the novel’s seemingly condemnatory ending, in which ‘fallen woman’ Ruth’s early misbehaviour leads to her final illness and eventual death, it is the novel’s middle that offers numerous episodes of various characters’ efforts toward moral reform that contradict or at least complicate punitive readings of Ruth’s ending.

In the third chapter, Krienke departs from representations of overt depictions of illness in an examination of Wilkie Collins’s sensation novel *The Moonstone*, where she grounds her discussion in magazine articles and autobiographical accounts wherein male writers present novel-reading as a form of convalescence aimed at counteracting overwork and what we might today term burnout. Here she argues that *The Moonstone* presents novel-reading as a means through which readers might step outside of social expectations determined by gender and class and thereby ‘aims to foster cross-class sympathy’ (p.20).

Chapter 4 represents a shift from what Krienke identifies as the more optimistic period of nineteenth-century discourses surrounding convalescence in the first three chapters; here she examines Samuel Butler’s dystopian satire *Erewhon*, a novel depicting a society where illness is punished as a crime and criminal behaviour is treated with compassion and understanding, in relation to the After-Care Association, a charitable organisation promoting extended convalescent care to patients released from insane asylums. Krienke reads the
novel as commentary on the treatment of these individuals, seeing it as a harbinger of the decline of British societal appreciation for the open-ended, uncertain nature of convalescence in the latter half of the nineteenth century, a decline coincident with the rise of eugenics discourses.

The final chapter discusses the fascinating system of imperial convalescent depots in India, outposts where British soldiers were sent to recuperate from illness and injury throughout the long nineteenth century, in connection with Frances Hodgson Burnett’s *The Secret Garden*. Through examination of documents and records pertaining to treatment plans and early medical studies on British soldiers in India, Krienke argues that these recuperation centres ran counter to general philosophies about convalescence and convalescent time and instead augmented their policies and treatment plans as a means of improving efficiency and reducing cost, which she sees as a foundation for post-WWI methods of recuperative care. *The Secret Garden*, then, serves as an effort to ‘reclaim the moral awakenings of convalescence to forge a vision of an ethical, yet militaristic imperialism’, (p.21) despite the underlying irony that military values and methods were a significant cause of the decline in convalescent care in Great Britain.

Each chapter offers a thorough grounding in both summarising the featured novel and in the historical context of its accompanying historical genre, making it useful for a range of audiences, both more experienced scholars of nineteenth-century literature and those who are new to the field such as undergraduate students. Krienke’s research into and engagement with primary sources reveals the depth of this study, but this attention to historicisation does not come at the expense of literary analysis, as her close reading of the five texts is detailed and nuanced. If there is any weakness to the study, it may be in her selection of text for sensation fiction, *The Moonstone*. Collins’s novel differs considerably from the other four in the study in that it does not feature convalescence of illness, and, indeed, the only male characters who appear to suffer from the overwork that the accompanying genre depicts have limited or no role in narrating the text. Sensation fiction is a genre simply brimming with ill and convalescing characters, particularly female characters, and one might wonder whether one of those texts might better represent the rich genre within this study or be discussed in addition to Collins’s novel.

In her conclusion to this work, Krienke traces the decline of convalescent care and looks forward to the ongoing COVID-19 pandemic, which has once again challenged society’s notions regarding convalescence, particularly as we
are seeing lingering effects from even mild infections. Her study comes at an opportune time, as it invites us to reexamine notions of illness and recuperation in a world where many people live through serious illness but face ongoing and uncertain levels of recovery. *Convalescence in the Nineteenth-Century Novel: The Afterlife of Victorian Illness* suggests that, despite modern medical advances, we denizens of the twenty-first century might learn something about recovery from the Victorians after all.