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## Same as it Ever Was, But Different: The Changing Legacy of Victorian Contagion Studies in a Post-Pandemic World

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Those few of us who have made our careers by contemplating Victorian notions of contagion were, perhaps, surprised to find the public suddenly hungry for the topic in the wake of the COVID-19 pandemic's beginnings. Not that the topic was ever a seemingly esoteric choice to those of us who selected it as our field specialty, but while most academic research is by definition found amid niche topics, to be a self-avowed 'contagious disease scholar' before COVID-19 was typically met with surprise, even from other niche academics. Thus, while the relevance of contagion to society was always, perhaps, clear to those of us 'niche' specialists, we were not, generally, wont to find *others* so keenly aware of the relevance of our studies to modern life.

I begin with these musings, because prior to the COVID-19 pandemic, introductions to special issues on the topic had to be carefully laid out, to demonstrate the—possibly inscrutable—relevance of this topic to readers, even academic ones. Now, conversely, years after the pandemic began, it feels almost hackneyed to connect the relevance of one's research topic to the pandemic. It seems every scholar feels their realm of research has something to say about, or was affected in meaningful ways by, the pandemic. For scholars *of* epidemics and pandemics, this is a disorienting turn. For to us, this has always been a foundational truth to our work: disease affects *everything*, and its effect on everything reveals infinite layers of meaning in regards to how we make meaning in the world.

While our own sense of the relevance has remained constant, in other words, our external positionality as humanists in a field which was always struggled to prove its relevance in a utilitarian world has thus shifted from struggling to prove our even less recognised relevance, to risking the appearance of trite associative claims that everyone, the world over, is making.

COVID-19 may indeed have made discussing the relevance of disease to human society a matter of course, but be that as it may, it is worth naming the relevance that Victorian disease scholars have highlighted for many years, if only *because* relating everything under the sun to COVID has become so banal a topic

that is at risk of shifting far too rapidly from invisible connection to taking on the tone of mere pleasantries, like mentioning the weather.

In simplest terms, contagious disease matters because disease is us. By this I mean, first, that disease wouldn't matter to us if it weren't that it affected our livelihoods and indeed our very lives so directly. Far too easily, even in a post-COVID world, disease can become an abstract concept, reduced to statistics and climbing graph lines. Yet, the reason we concoct all these numbers displayed in different visual formats is, of course, because of our concern that these numbers will have some real impact on our very lives—or those of our loved ones. Even diseases that are not zoonotic and do not affect humans only matter to any of us, usually, because of anthropocentric, and ego-centric, concerns. Avian flu likely matters to most people because of rising egg and chicken prices, or for its secondary or tertiary impact on other supply chains.

'Disease is us' also applies in less utilitarian terms. Our existential understandings of who 'we' are, rely, as Julia Kristeva so aptly demonstrated in her 1980 *Powers of Horror*, on how we craft a scheme of 'not us'.<sup>1</sup> Disease, for its threat to the very biological life-support system of our selves, is perhaps the most categorically 'not me' schema that could ever exist. For her part, Kristeva suggests that death is the most foundational 'not I' category to be found, and yet disease and debility precedes the state of death in all but sudden, accidental death cases.

In spite of increasing evidence demonstrating that we are not bounded individuals at all, but vast aggregations of microbiological life—perhaps, in fact, more bacteria than human cells making up our forms, this notion of self/other still hinges—for most people, in their everyday assumptions—on a binary that separates our humanness from those viruses and diseases we perceive as on the other side of some categorical binary. As Kristeva, and her other poststructuralist forebears have long since demonstrated, these schema against which we define something, in fact provide the very outlines for that something which it is posited as mutually exclusive of.

Moving even beyond microbiological drivers of disease, of course, 'disease' is its own categorical concept. What conditions do we note as relevant outside of some baseline state of existence? Why do we consider, for instance, cholera a disease, but not acne? Why are some infirmities deemed as such, and

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<sup>1</sup> Julia Kristeva, *Powers of Horror: An Essay on Abjection*. Columbia, NY: Columbia UP, 1990.

other bodily states comfortably grouped in with so-called normativity in the public imaginary?

Of course, here, it must be mentioned that not all ‘disease’ is contagious. Heart disease, cancer, and epilepsy are just some of any number of conditions not caused by contagious vectors. But for their causal role in inculcating disease states, microbial pathogens are doubly outside of our self-conceptions, as it were. It is an Other, writ large (though invisible to the naked eye, which makes the threat feel pervasive), which transforms our very selves into an Other we defined ourselves against. Whereas ‘diseases of the self,’ such as cancers and autoimmune disorders certainly present existential challenges to self-conception (how can ‘I’ be attacking myself or inducing my own destruction?), the existential threat of pathogenic vectors is that it maps onto all of our most foundational senses of self versus other and makes it possible to operationalise hypervigilance and martialistic thinking against some perceived external force. Such attitudes have, then, real impact on the environment and also ourselves, for example, in the way we have weaponised antibiotics so often as our collective and individual saviour that we now face a future reality.

Thus, disease is ‘us’ in so many ways. Disease vectors have literally constructed us, as bacteria live within, among, and on us, and viruses constitute possibly the origins of human DNA itself. Disease is also us insofar as it sketches out the limits of how we conceptualise the boundaries of our self, physically and symbolically. Disease is us, because it shapes the lives that live and die around us, including our own. Disease is us as we weaponise tools to ‘kill’ pathogens, which then have rebound effects on our antibiotic toolkit. And disease is us insofar as it shapes the limits of what we imagine as the normative and even the human.

The authors in this issue aptly tackle this concept from just as many diverse angles, elucidating nicely the broad relevance of contagion, not simply as some distanced Victorian topic in the pre-antibiotic age, but as a matter of continued concern to readers today.

Sarah Frühwirth’s essay, ‘Sin, Disease, and Religious Fervour in Wilkie Collins’s *Armada* (1866) and Rhoda Broughton’s *Not Wisely, but Too Well* (1867)’ approaches the topic of Victorian contagion from what is in many ways a traditional approach—highlighting the ways in which contagion or contamination was used as a literary metaphor for moral contamination or evil. However, Frühwirth contributes a unique take to interpreting this well-known trope. In her essay, Frühwirth analyses the presence of religious figures *in* literary

texts as a lens through which to assess the notion of contamination and contagion in the text. This stands in contrast to the traditional paradigmatic approach to this topic, which assumes an external reader as the metric for a sort of vague, middle-class morality. In an interesting turn, then, Frühwirth resists anachronistic assumptions about Victorian moralising (which might universally assume moral taint and pathogenic taint to be metonymically linked), and instead reveals that popular *belief* in these moral systems was its own taint. To this end, Frühwirth highlights a character who is destroyed not by his moral taint through his father, but by his religious fanaticism that causes him to *believe* he is doomed to be destroyed by generational sin and retribution. Frühwirth points out that the ‘taint’ in this family is in fact syphilis, but the affected parties are unable to see this, because of the simultaneous contamination of religious fervour which causes them to mis-read these signs, much as an uncaredful scholar might misread the moral message at the heart of *Armada*. By using intratextual clues as to the text’s own moral compass, Frühwirth not only provides a new and useful approach to concepts of morality and contagion in Victorian literature, but she provides a helpful methodological approach for scholars of new historicism more generally.

Moving nicely on from the topic of religious characters in texts about moral and actual contagion, Molly Ryder’s article, “‘every door might be Death’s Door’: Narrating Mortality in Charles Dickens’s *Bleak House*”, considers death and gravesite representation in Victorian novels, namely *Bleak House*. By focusing on death—the far too common outcome of contagion in the Victorian Era—Ryder also clearly demonstrates just what the stakes of contagion were for Victorians. As a way into the topic, Ryder begins with a consideration of mortuary architecture as a means of sanitary reform in graveyards, revealing just how intimately built spaces have always been seen as a means of separating the I/not I (as Kristeva would have it), and of expanding the boundaries of the self outward, as it were, while maintaining the categorical binaries humans are so fond of between ‘us’ (humans) and ‘them’ (microbes, or microbe-infested human bodies). In so doing, this essay provides, like Frühwirth’s before it, a useful overview of the topic which readers newer to the field will appreciate.

Also, in line with Frühwirth, Ryder approaches the main topic of death in *Bleak House* (and *Bleak House* is indeed riddled with death from contagion) from a novel perspective. In the course of her analysis, she also assesses the foundations of the narrative mode of the book as a whole, in considering why a novel so riddled with death necessitates the use of the first-person narrative voice,

as well as the paradoxical notion of *how* a novel about death can be narrated by some, apparently living first-person who has avoided death's maw. She reveals, as scholars have done with the narrator H.F. in Daniel Defoe's *Journal of a Plague Year*, that the survivor-narrator plays an important role embodying the time of the reader who they are speaking to and the other characters amongst whom they lived, essentially weaving temporality and life-states together with their words. Arguing that Esther Summerson is a 'Persephone-like figure,' this essay reconsiders Esther as a character, as well as her unfinished sentence that famously concludes the novel.

Finally, Suzanne Bode's essay, 'Pre-Raphaelite Art and the Influence of Opium on Ways of Seeing', rounds out the issue with an assessment of how disease cures can sometimes be as infectious—and as deadly—as the disease themselves. In a riveting portrayal of how opium usage affected artistic visual schemas in the Victorian Era, as well as the artists inhabiting that community themselves, Bode provides yet another angle from which to consider disease, treatments, and what sort of entities we define as pathogenic to begin with. Bode astutely lays out how Millais's entanglements with opium are revealed in surprising ways in his painting of Ophelia, using both careful analysis of the images and their specific departures from other paintings, as well as the biopsychology of opium effects to make the argument. Bode's essay also provokes necessary and moving re-examination of Elizabeth Siddal's role as an artist and human—not merely an ancillary figure of the Pre-Raphaelite movement. This alone makes for an invigorating and important read. Instead, Bode's essay turns the analytical eye back to the reader, asking if we scholars have been ourselves contaminated with Victorians' views of women's capabilities, agency, and indeed, stigmatising assumptions about drug dependent people.

In keeping in line with the liminal space that Victorian scholarship on contagion finds itself—simultaneously understudied and yet seemingly omnipresent in a post-COVID context—each of these essays simultaneously lifts age-old issues of continued importance in contagion studies, while also asking readers to completely reconsider adjacent concepts they may have thus far taken for granted, as disease concepts themselves do for each and every one of us.

## Bibliography

Kristeva, Julia. *Powers of Horror: An Essay on Abjection*. (Columbia, NY: Columbia UP, 1990)