

**Sensational Contagion:
Sin, Disease and Religion in Wilkie Collins's *Armadale* (1866) and Rhoda
Broughton's *Not Wisely, but Too Well* (1867)**

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Abstract

*This article explores the intersections and conceptual links between sin, disease and religion in the critical discourse surrounding sensation fiction in the 1860s and 1870s as well as two representatives of the genre. The first part of this article examines the role discourses of disease and contagion played in the reception of sensation fiction. It is shown that, besides disparaging the genre, the language of disease and contagion also allowed critics to express deep-seated anxieties regarding the disintegration of established boundaries and the moral health of the Victorian reading public. Using the examples of Wilkie Collins's *Armadale* (1866) and Rhoda Broughton's *Not Wisely, but Too Well* (1867), the second part of this article demonstrates that disease and contagion also figured prominently in sensation novels. However, as this article intends to illustrate, while nineteenth-century critics used the rhetoric of disease and contagion solely to reinforce conventional morality, the two sensation novels under consideration used the tropes of disease and contagion to more radical purposes, namely to pass criticism on and detail the devastating effects of misguided and excessive religiosity.*

The threat of contagion was part of Victorian everyday life. Despite the era's progress in medicine, health and hygiene, Victorian Britain still faced epidemical waves of contagious diseases like cholera, smallpox, typhus and scarlet fever. The concept of contagion also figured prominently in the reception of nineteenth-century sensation fiction. Although Wilkie Collins's *The Woman in White* (1859) was not the first sensation novel ever written, it was undoubtedly this novel that created the 'sensational mania' that characterised the sixties and seventies of the nineteenth century. Following the book's success, literary sensationalism became rampant, leading contemporary reviewers to compare the reading public's demand for sensation fiction to a contagious disease:

Just as in the Middle Ages people were afflicted with the Dancing Mania and Lycanthropy, sometimes barking like dogs, and sometimes mewing like cats, so now we have a Sensational Mania. Just, too, as those diseases always occurred in seasons of dearth and poverty, and attacked only the poor, so does the Sensational Mania in Literature burst out only in times of

mental poverty, and afflict only the most poverty-stricken minds. From an epidemic, however, it has lately changed into an endemic. Its virus is spreading in all directions, from the penny journal to the shilling magazine, and from the shilling magazine to the thirty shillings volume.¹

Besides constituting a damning indictment of contemporary culture and society, this excerpt from an 1866 article in the *Westminster Review* is representative of the nineteenth-century critical attitude towards sensationalism and reveals the critical anxieties it generated by taking up various themes that proliferated within the critical discourse surrounding sensation fiction. On the one hand, the representation of the demand for sensation fiction as a form of ‘mania’ as well as the discursive construction of the genre itself as a ‘virus’ highlight the alleged speed and uncontrollability with which sensationalism spread and supplanted other genres, which was a common theme in contemporary reviews. On the other hand, the remark that the ‘epidemic’ of sensation fictions ‘has lately changed into an endemic’ seems to imply that the initially erratic spread of the genre was over. However, as the review implies, this circumstance did not make sensation fiction any less threatening; if anything, it made one of the critics’ worst fears regarding the genre come true, i.e. that sensationalism was not just a passing fad but would become a constant presence in the Victorian literary landscape.

Another noteworthy aspect of the above-quoted passage is its repeated references to ‘poverty’, which represent unveiled criticism of sensation fiction’s ‘low’ origins and, at the same time, betray a fear of contamination from ‘below’. As the last sentence of the quote indicates, it was a common belief among nineteenth-century reviewers that the sensation novel had originated from penny publications, which were tailored to the tastes of the working class. This view was echoed by Henry Mansel, who in an oft-quoted diatribe against sensation fiction identified penny publications as ‘the original germ, the primitive monad, to which all the varieties of sensation literature may be referred’². Since sensation novels, unlike penny publications, were popular with readers from all social classes, sensation fiction posed a danger to established class boundaries, leading critics to discursively construct the genre as a disease. After all, as Pamela K.

¹ [J. R. Wise,] ‘Belles Lettres’, *The Westminster Review*, 86 (July 1866), 125-32 (p. 126).

² [Henry Mansel,] ‘Sensation Novels’, *The Quarterly Review*, 113 (April 1863), 482-514 (p. 505). Further references are given after quotations in the text.

Gilbert has noted, like sensation fiction, ‘germs [...] redefined class boundaries’³ by affecting people indiscriminate of their social status.

Besides their ‘seemingly contagious diffusion across the literary marketplace’⁴ and their blurring of class boundaries, sensation novels also possessed other properties that made them liable to being rhetorically constructed as a disease. As Bradley Deane has noted, reviewers also used the ‘rhetoric of disease’ to ‘describe the unhealthy consumption of these novels’ (p. 70) and their harmful effect on the reader’s body. Conservative reviewers agreed that the ‘excitement’ of the reading experience and the bodily responses the reading of sensation novels supposedly provoked in readers were ‘unwholesome’ or ‘unhealthy’. In fact, a number of reviewers equated the reader’s bodily response to sensation fiction with fever, asserting that the reading of sensation novels created a ‘feverish sensation’⁵ in the reader. However, not only the physical effect of sensation fiction was discursively constructed as fever, the same metaphor was used by critics and reviewers when referring to the production of sensation fiction. For example, in an 1867 article in *Blackwood’s Edinburgh Magazine*, Margaret Oliphant referred to sensation novels as ‘feverish productions’⁶, thus implying that sensation fiction not only produced symptoms of disease but was the product of a febrile delirium in the author. This view was shared by Henry Fothergill Chorley, who in an 1866 review of Wilkie Collins’s *Armadale* in the *Athenaeum* maintained that sensation novels were the product of ‘diseased invention’⁷.

Other critics, however, believed that the main portion of the blame did not rest with the authors of sensation fiction but with the Victorian reading public. While some reviewers viewed sensation fiction as a mere symptom of a more widespread ‘disease’, namely the reading public’s morbidity of literary taste, others claimed that sensation was not only a symptom but also the underlying cause of the readers’ ‘morbid failings and cravings’⁸. According to Mansel,

³ Pamela K. Gilbert, *Disease, Desire, and the Body in Victorian Women’s Popular Novels* (Cambridge: Cambridge University Press, 1997), p. 39. Further references are given after quotations in the text.

⁴ Bradley Deane, *Making of the Victorian Novelist: Anxieties of Authorship in the Mass Market* (New York: Routledge, 2013), p. 70. Further references are given after quotations in the text.

⁵ ‘Philosophy of “Sensation”’, *St James’s Magazine*, 5 (October 1862), 340-6 (p. 346).

⁶ [Margaret Oliphant,] ‘Novels’, *Blackwood’s Edinburgh Magazine*, 102 (September 1867), 275-80 (p. 275). Further references are given after quotations in the text.

⁷ [Henry Fothergill Chorley,] ‘New Novels’, *The Athenaeum* (2 June 1866), 732-3 (p. 732).

⁸ ‘Not a New “Sensation”’, *All the Year Round*, 9 (25 July 1863), 517-20 (p. 517).

sensation novels, or ‘the morbid phenomena of literature’ as he termed them, had created a vicious cycle, owing their existence to ‘the cravings of a diseased appetite’ and ‘contributing themselves to foster the disease’ (pp. 482-3).

Many scholars have drawn attention to this rhetoric on the part of the reviewers that equated sensation novels with disease and have put forth various theories regarding the reasons behind this rhetorical strategy. According to Deane, ‘the trope of disease was only one element of a broader rhetorical strategy to discredit sensation fiction’ (p. 70). Others, like Gilbert, believe that this rhetoric bespeaks a variety of anxieties relating to ‘the disintegration of the physical and social body’ (*Disease* p. 18). According to Gilbert, by using the rhetoric of disease, ‘[t]he critic aligns him/herself with the sanitary inspectors whose purpose it is to police consumption and make the commodity safe for the middle classes’ (*Disease* p. 77). This view is echoed by Barbara Leckie, who has argued that the critics’ language of disease constructs the reader of sensation fiction ‘as an unhealthy body, a “patient,” in urgent need of medical intervention’⁹. By rhetorically aligning sensation fiction with disease, i.e. something that causes harm to the body, nineteenth-century reviewers were able to express concerns for the safety of readers of sensation novels and, at the same time, as Henry Mansel put it, give a diagnosis regarding ‘the state of health of the body in which they appear’, reading sensation novels as ‘by no means favourable symptoms of the conditions of the body of society’ (p. 512).

Many reviewers, like Geraldine Jewsbury, believed that the reading public’s craving for sensation novels testified to ‘a low condition of moral health’ among readers and that writers of sensation fiction did ‘their utmost to bring about this state of being’¹⁰, thus passing moral criticism not only on the reading public but also the genre itself. Due to their vivid depiction of characters engaging in morally reprehensible behaviour, sensation novels were believed to pose a threat to public morals. Since a large part of the Victorian readership were supposedly highly impressionable women, many nineteenth-century reviewers feared that readers of sensation fiction might conflate the characters’ thoughts and opinions with their own, leading them to adopt undesirable attitudes towards morality or engage in immoral behaviour themselves. According to Henry Mansel, sensation fiction played ‘no inconsiderable part in moulding the minds and forming the

⁹ Barbara Leckie, *Culture and Adultery: The Novel, the Newspaper, and the Law, 1857-1914* (Philadelphia: University of Pennsylvania Press, 1999), p. 121.

¹⁰ [Geraldine Endors Jewsbury,] ‘Review of *Miss Forrester: A Novel*, by Mrs. Edwards’, *The Athenaeum*, 1980 (7 October 1865), 466.

habits and tastes of its generation', so much so that sensation fiction had usurped 'a portion of the preacher's office' (p. 482). However, in direct contravention to the duties of a preacher, instead of instilling moral values in their readers, sensation novelists had a tendency to 'render vice interesting'¹¹, as the author of an unsigned 1862 review in *St James's Magazine* complained. Due to its supposed violation of moral principles, sensation fiction not only faced censure from lay critics but also caused a significant outcry among members of the clergy and certain Christian denominations. For example, the *Record*, an Evangelical newspaper, complained that sensation fiction was 'one of the crying evils of the day'¹².

In the nineteenth century, disease was not only associated with physical but also with moral harm. The spreading of venereal diseases through prostitution had become a considerable problem in Victorian England, leading to the passing of the Contagious Diseases Act in 1864. This act made it possible for the police to detain prostitutes for compulsory health checks. Like prostitutes, books were considered to be agents of contagion and contamination, both in a moral and physical sense. As Gilbert has shown, books were believed to be capable of spreading disease, resulting in the disinfection of books during epidemics and the withdrawal from circulation of books loaned to reportedly diseased people (see *Disease* p. 55). In the nineteenth-century imagination, the contagious potential of literature and prostitutes was strikingly similar, as 'both involve the invasion of the desiring subject by an apparently passive, but secretly aggressive and dangerous object' (Gilbert, *Disease* p. 56). It was this dangerous potential of books that justified their subjection to close moral inspection by reviewers, since '[t]he fear of the physical contamination of books by germs is an expression and crystallization on a physical level of anxiety related to a less specifically identifiable agency of moral contamination in the text' (Gilbert, *Disease* p. 56).

As I will show in following, not only critics and moral crusaders employed the rhetoric of disease and contagion, also sensation novels themselves frequently used disease as a trope. As Kari Nixon has noted, 'nineteenth-century fiction is [...] replete with disease'¹³, and the genre of sensation fiction is no exception.

¹¹ 'Philosophy of "Sensation"', *St James's Magazine*, 5 (October 1862), 340-6 (p. 343).

¹² Qtd. in Mark J. Knight, 'Rethinking Bibliolatry: Wilkie Collins, William Booth and the Culture of Evangelicalism', *Wilkie Collins Society Journal*, New Series, 3 (2000), 47-58 (p. 50).

¹³ Kari Nixon, *Kept From All Contagion: Germ Theory, Disease, and the Dilemma of Human Contact in Late Nineteenth-Century Literature* (Albany: State University of New York Press, 2020), p. 7. Further references are given after quotations in the text.

Sensation novelists used illness for a variety of purposes, for instance, ‘to motivate plot or delineate character’¹⁴. However, as scholars in medical humanities have shown, disease can also fulfil a variety of other functions that go beyond plot development and characterisation. Like it did contemporary critics, the trope of disease allowed sensation novelists to give voice to a variety of anxieties. While hereditary diseases were frequently used to articulate fears regarding degeneration¹⁵, contagious diseases frequently served authors as a metaphor for the destabilisation of ‘subjectivity-producing boundaries of selfhood and otherness’ (Nixon p. 8), including class and gender boundaries.

Like in contemporary reviews, disease in sensation fiction is closely connected to questions of morality. As Lawrence Rothfield has pointed out, nineteenth-century authors often employed illness as ‘a punctual signal of innate moral inadequacy [sic]’¹⁶, either of individual characters or society at large. Disease could also function as a form of ‘moral retribution’¹⁷ or punishment for the violation of moral precepts. However, while sensation novelists certainly did employ illness for moralistic purposes, they did not merely use the tropes of disease and contagion to pass moral judgment, like their critics did. As Nixon has observed, nineteenth-century novelists, like Thomas Hardy or Henrik Ibsen, sometimes inverted discourses of disease to undermine traditional notions of good and evil (see p. 138), a kind of subversion that is also traceable in a number of sensation novels. Using the examples of Wilkie Collins’s *Armada* (1866) and Rhoda Broughton’s *Not Wisely, but Too Well* (1867), I will show that, by intertwining themes of disease, contagion and religion, these two sensation novels invert traditional notions of the beneficence of religion by detailing the devastating effects of misguided and excessive religiosity.

¹⁴ Meegan Kennedy, ‘Medicine and Sensation’, in *A Companion to Sensation Fiction*, ed. by Pamela K. Gilbert (Malden: Wiley-Blackwell, 2011), pp. 481-92 (p.482).

¹⁵ See Pamela K. Gilbert, ‘Sensation Fiction and the Medical Context’, in *The Cambridge Companion to Sensation Fiction*, ed. by Andrew Mangham (Cambridge: Cambridge University Press, 2013), pp. 182-95 (p. 185).

¹⁶ Lawrence Rothfield, *Vital Signs: Medical Realism in Nineteenth-Century Fiction* (Princeton: Princeton University Press, 1992), p. 7.

¹⁷ Tina Young Choi, *Anonymous Connections: The Body and Narratives of the Social in Victorian Britain* (Ann Arbor: University of Michigan Press, 2015), p. 76.

The Sins of the Father: Hereditary Contagion and Religious Mania in Wilkie Collins's *Armada* (1866)

Like in the nineteenth-century sensation debate, sin and disease are curiously aligned in Wilkie Collins's 1866 novel *Armada*, whose main conflict is rooted in the Bible verse 'The sins of the father shall be visited on the child'. At the beginning of the novel, Ozias Midwinter's father divulges the secrets of his debauched youth, which culminated in the murder of his cousin, in a confessional deathbed letter. Midwinter's father firmly believes that sin is not something that is contained within the individual sinner but something that, like a disease, can be transmitted to other people, which is why he fears that his sin will descend to his son. However, unlike an infectious disease, which can be communicated to everyone who comes into direct or indirect contact with it, sin, in Midwinter's father's conception, seems to have the qualities of a hereditary disease, which is solely passed on from parent to child.

The idea that children might be punished for their parents' sins derives from a passage in the *Book of Exodus* in which God admonishes the Israelites not to worship idols after their flight from Egyptian slavery, threatening them to visit their transgression of this law on their descendants: 'Thou shalt not bow down thyself to them, nor serve them: for I the LORD thy God *am* a jealous God, visiting the iniquity of the fathers upon the children unto the third and fourth *generation* of them that hate me;'¹⁸. As Carolyn W. de la L. Oulton has shown, the idea of the heritability of sin is also inherent in the doctrine of original sin, which was especially prevalent among Evangelicals, who believed in a literal interpretation of the Bible.¹⁹ Midwinter's growing up in an Evangelical household and the frequent corporal punishments he had to suffer at the hands of his stepfather, who insists on his innate depravity, make him receptive to this kind of doctrine (see Oulton p. 103). Upon receiving his father's letter, he blindly adopts his father's belief in the transmissibility of sin and, as a result, repeatedly tries to end his friendship with Allan Armadale to prevent a re-enactment of their fathers' actions in the second Armadale generation.

Although the notion of the transmissibility of sin by inheritance built up in the novel's initial chapters is seemingly corroborated by a prophetic dream that

¹⁸ *The Bible*, Authorized King James Version with Apocrypha (Oxford: Oxford University Press, 1997), Exod. 20.5. Further references are given after quotations in the text.

¹⁹ See Carolyn W. de la L. Oulton, *Literature and Religion in Mid-Victorian England: From Dickens to Eliot* (Houndmills: Palgrave Macmillan, 2003), p. 96. Further references are given after quotations in the text.

gradually appears to come true as well as a number of startling coincidences, Midwinter's father's fears do not come true in the end. Some scholars have argued that Midwinter is able to put a stop to the 'fatalistic sequence'²⁰ by sacrificing himself for his friend and, thus, atoning for his father's sins. However, others, like Jenny Bourne Taylor, Andrew Mangham or Helena Ifill, have suggested that it is not the father's sin that threatens a repetition of the past in the next generation but rather Midwinter's unhealthy obsession with it. For example, Bourne Taylor has called *Armadale* 'a psychological investigation of the way that a monomania can work its own fulfilment'²¹. Although the novel contains many more direct references to fate and sin than to 'madness', there is no doubt that Midwinter and his father's conviction of the heritability of sin bears many of the hallmarks of mental disease. This view is supported not only by the fact that Midwinter's belief in cross-generational retribution is referred to as a 'mad superstition' (p. 564) by other characters but also by the fact that the biblical phrase 'the sins of the father' served nineteenth-century mental specialists as a metaphor for the heritability of mental disease.²²

The connection between mental illness and superstitious belief that the novel establishes through Midwinter's condition is firmly rooted in nineteenth-century medical discourse. It was a common belief among nineteenth-century alienists that excessive and misguided religiosity could provoke insanity. For example, Philippe Pinel, a famous French psychiatrist whose works were also translated into English, listed religious fanaticism as one of the main exciting causes of mental illness.²³ Moreover, the diagnosis 'religious insanity', with its clinical manifestations 'religious mania' and 'religious melancholia', established a direct link between religion and mental disease. Alexander Morison and many other nineteenth-century alienists considered religious insanity to be a form of monomania.²⁴ According to Morison, religious insanity could take a variety of

²⁰ Peter Thoms, *The Windings of the Labyrinth: Quest and Structure in the Major Novels of Wilkie Collins* (Athens, Ohio: Ohio University Press, 1992), pp. 114-5. Further references are given after quotations in the text.

²¹ Jenny Bourne Taylor, *In the Secret Theatre of Home: Wilkie Collins, Sensation Narrative, and Nineteenth-Century Psychology* (London: Routledge, 1988), p. 152. Further references are given after quotations in the text.

²² Helena Ifill, *Creating Character: Theories of Nature and Nurture in Victorian Sensation Fiction* (Manchester: Manchester University Press, 2018), p. 134. Further references are given after quotations in the text.

²³ Philippe Pinel, *A Treatise on Insanity*, trans. by D. D. Davis (Sheffield: Cadell and Davies, 1806), p. 113. Further references are given after quotations in the text.

²⁴ Alexander Morison, *The Physiognomy of Mental Diseases* (London: Longman, 1838), p. 115. Further references are given after quotations in the text.

shapes, ranging from ‘Theomania’ to ‘Demonomania’ (see p. 115). One of the most common forms, however, was religious melancholia, which was usually accompanied by a sense of impending doom, with ‘the patient conceiving that he is under the wrath of heaven and, that all hope of salvation is lost’ (Morison p. 115). James Cowles Prichard gave a similar definition of religious melancholia: ‘Many religious persons, labouring under a predisposition to grief and despondency, have conceived the opinion that they are doomed to future perdition, their own cases forming particular exceptions to the otherwise merciful dispensations of Providence’²⁵.

The case of Midwinter, who believes that he is ‘doomed, beyond all human capacity of resistance, to bring misery and destruction blindfold’²⁶ on his best friend and cannot be persuaded to believe that Providence would intervene on his behalf, is strikingly similar to the cases described by Morison and Prichard. Right from the beginning, the novel establishes an indirect, yet firm, connection between Midwinter’s superstitious belief and mental disease by linking the ‘symptoms’ of his religious fanaticism to the symptoms experienced by his father, who suffers from syphilis, or ‘general paralysis’, as nineteenth-century medical practitioners usually termed it. While Ifill, following Andrew Smith, reads Midwinter’s father’s syphilitic condition as a symbol for moral contamination (pp. 133-4), I would argue that his illness gains additional significance when considered in the context of nineteenth-century mental health discourse. After all, apart from its association with immorality, syphilis also conjured up connotations of mental illness in the nineteenth-century medical imagination. For instance, Prichard noted that general paralysis ‘frequent[ly] occurre[d] in conjunction with mental derangement’ (p. 99), which is why it ‘must be looked upon as nearly related to that disease [...]’ (p. 100). By aligning Midwinter’s passive submission to what he considers his fate with his father’s affliction, the novel establishes a link between Midwinter’s superstition and mental disease. Like his father, Midwinter appears to be paralysed by the oppressive sense of doom that haunts him. His paralytic condition is also noted by some of the other characters, who entreat him to ‘free [himself] from the paralysing fatalism’ (p. 512) that has taken hold of him.

²⁵ James Cowles Prichard, *A Treatise on Insanity and Other Disorders Affecting the Mind* (London: Sherwood, Gilbert, and Piper, 1835), p. 31. Further references are given after quotations in the text.

²⁶ Wilkie Collins, *Armada*, ed. by John Sutherland (London: Penguin, 2004), p. 513. Further references are given after quotations in the text.

Apart from Midwinter's almost paralytic resignation and passivity, his 'psychopathic obsession'²⁷ with inherited doom also elicits a number of other symptoms of disease, like mood swings, loss of appetite, uncontrolled shaking, and even swooning. Bourne Taylor has noted that the descriptions of Midwinter's nervous condition resemble contemporary discourses of hysteria (see p. 165). Also Lyn Pykett has pointed out that 'Midwinter's hypersensitivity, his susceptibility to non-rational modes of interpretation, and his emotional self-policing combine to place him in a role in the sensation narrative which is more usually occupied by a female character – the hysteric'²⁸. In fact, his sensitivity is so pronounced that Dr Hawbury, one of the novel's rational authorities, at one point states, 'I wouldn't change nervous systems with that man, for the largest fortune that could be offered me' (p. 137).

However, Midwinter's nervous condition, which is described to be a product of his 'sensitive feminine organization' (p. 220), does not only align him with female hysterics but also with the religious insane. Like hysteria, religious insanity was a feminine-coded disease in Victorian Britain. Nineteenth-century medical men believed that women's supposedly high-strung disposition made them especially susceptible to mental diseases of a religious kind. For example, Henry Maudsley maintained that it was mostly women who were 'driven to a morbid self-brooding, or to an excessive religious devotion or a religious enthusiasm'²⁹. Nathaniel Bingham, a nineteenth-century physician, took a similar line, asserting that religious insanity was frequently produced 'in persons of a delicate and very susceptible constitution'³⁰ when occupying themselves excessively with religious matters. Midwinter himself acknowledges the detrimental effects his superstitious belief has wrought on his mental condition: 'I am ill and unnerved; trifles startle me' (p. 264). Although he believes that his nervous suffering is the after-effect of an attack of brain fever he suffered earlier in the novel, it soon becomes obvious that his nervous symptoms are brought on by his pathological belief in cross-generational retribution.

²⁷ Laurence Talairach-Vielmas, *Wilkie Collins, Medicine and the Gothic* (Cardiff: University of Wales Press, 2009), p. 58.

²⁸ Lyn Pykett, *The Nineteenth-Century Sensation Novel* (Horndon: Northcote House, 2011), p. 49.

²⁹ Henry Maudsley, *The Physiology and Pathology of the Mind* (New York: D. Appleton, 1872), p. 203.

³⁰ Nathaniel Bingham, *Observations on the Religious Delusions of Insane Persons* (London: J. Hatchard and Son, 1841), p. 118.

The affinity between Midwinter's superstition and disease not only becomes obvious from the range of physical and mental symptoms he experiences but also from its seemingly infectious nature. Like a contagious disease, Midwinter's superstition seems to be passed on to other people. While some of the novel's characters, like Allan, seem to be immune to his fatalistic beliefs, others become infected with Midwinter's superstition. For example, Lydia Gwilt writes, 'I believe I have caught the infection of Midwinter's superstition. I begin to think that events are forcing me nearer and nearer to some end which I don't see yet, but which I am firmly persuaded is now not far off' (p. 442). Even the Reverend Brock, a personification of temperate faith, is briefly haunted by 'a vague suspicion [...] that the whole series of events [...] were held together by some mysterious connection, and were tending steadily to some unimaginable end' (p. 76). Although mental illness was not generally regarded as a contagious disease, religious insanity was commonly believed to be infectious in nature. Nineteenth-century medical practitioners frequently used terms like 'outbreaks', 'contagion' or 'epidemic'³¹ when describing alleged cases of religious hysteria. As Robert E. Bartholomew and Julian D. O'Dea have pointed out, 'Collective reactions among revivalist movement members were typically viewed as contagious hysteria'³². For example, the author of an 1862 article entitled 'The State of Lunacy in Ireland' quoted a report stating that 'during the two months that *religious revivalism* was prevalent, a year or two ago, in the northern district of the island, more cases of insanity resulted therefrom than had taken place in the whole preceding year'³³.

Nineteenth-century alienists believed that religious insanity was of 'a most obstinate character'³⁴. According to Pinel, 'melancholia or mania, originating in religious enthusiasm, will not admit of a cure, so long as the original impressions are to be continued, or renewed by their appropriate causes' (p. 81). However, the novel's conclusion suggests that religious insanity is curable given the right treatment. Midwinter's path towards mental recovery begins with the moral management of his friends, who encourage him to exercise self-control. As

³¹ J. G. Havelock, 'An Epidemic of Religious Mania Originating from a Case of Spurious Pregnancy', *Transactions of the Edinburgh Obstetrical Society*, 19 (1894), 183-5 (p. 184).

³² Robert E. Bartholomew and Julian D. O'Dea, 'Religious Devoutness Construed as Pathology: The Myth of "Religious Mania"', *The International Journal for the Psychology of Religion*, 8.1 (1998), 1-16 (p. 4).

³³ 'The State of Lunacy in Ireland', *The Medical Critic and Psychological Journal*, 2 (January 1862), 102-13 (p. 110).

³⁴ Forbes Winslow, 'Religious Insanity Metaphysically Considered', *The Journal of Psychological Medicine and Mental Pathology*, 1 (1875), 67-79 (p. 70).

Rebecca Stern has noted, ‘As a genre, the sensation novel both contributed to and reflected public discourse about moral treatment’³⁵. While Stern does not elaborate on this, Bourne Taylor has addressed the relevance of moral management for the plot of *Armada* in more detail. According to Bourne Taylor, it is Midwinter’s continued self-analysis and attempts at self-control that promote his recovery: ‘in attempting to control his associations Midwinter enacts the prescriptions set up by Abercrombie and Conolly in their outline of “the qualities and acquirements which constitute a well-regulated mind”’ (p. 166).

Quite tellingly, Midwinter’s recovery is completed at a mental asylum. To gain possession of Allan’s inheritance, Lydia Gwilt, the novel’s antagonist, lures the two friends into the sanatorium of her criminal associate Dr Downward, where an elaborate mechanism is supposed to flow a deadly, undetectable toxin into Allan’s room. However, Midwinter, sensing that something is not right, switches rooms with his best friend, thus saving his life. While some scholars have read Midwinter’s selfless act as a way to atone for his father’s sin, thus acknowledging the existence of a fatalistic sequence set in motion by their parents’ transgressions, I read it as a means to recover from his religious delusions. The realisation that he has turned out to be Allan’s saviour rather than the tool of his destruction erases the last traces of the superstition passed down to him from his father and leads him to embrace the more liberal faith embodied by his moral guardian, the Reverend Brock, thus making a happy ending possible. Although the novel paints a bleak picture of the potentially disastrous effects of the Evangelical belief in divine retribution, exposing it as a superstition that borders on insanity, its overall outlook is an optimistic one as it suggests that the contagious effects of religious fanaticism can be overcome by the right treatment.

Carnal Sin, Religious Fervour and Fever Epidemics in Rhoda Broughton’s *Not Wisely, but Too Well* (1867)

Rhoda Broughton’s *Not Wisely, but Too Well* paints an overall grimmer picture of misguided religiosity by detailing the devastating effects that religious fervour in the shape of Methodism can have on individual lives. Like in Wilkie Collins’s *Armada*, the concept of sin also features prominently in Broughton’s novel. Being a representative of a sub-genre of sensation fiction that has been dubbed ‘erotic sensationalism’, the book’s sensationalism ‘lies in thrilling emotion’

³⁵ Rebecca Stern, ““Personation” and “Good Marking-Ink”: Sanity, Performativity, and Biology in Victorian Sensation Fiction”, *Nineteenth Century Studies*, 14 (2000), 35-62 (p. 43).

rather than ‘crime and detection’³⁶. As Shirley Jones has noted, ‘Adultery, or the possibility of it, is the most common “crime” featured in [Rhoda Broughton’s] novels’³⁷. Although adultery is only contemplated and never actually committed in her novels, Rhoda Broughton’s ‘controversial representation of female desire’³⁸ was considered to be highly problematic by conservative reviewers, like Margaret Oliphant, who declared her writings to be downright ‘sinful’ (p. 267).

The novel centres on the love affair between Kate Chester, a young, unmarried woman, and Dare Stamer, a debauched womaniser who is already married to another woman. Kate’s passion for Dare is represented as sinful and destructive. The destructive nature of Kate’s passion is highlighted by the book’s use of the rhetoric of disease and contagion (see Gilbert, *Disease* p. 116). Right at the beginning of the book, Kate muses that life would be much more peaceful ‘without any of those dreadful hot and cold fits that one is subject to in typhus fever and love’³⁹. The analogy between love and fever is further developed through the narrator’s description of the attacks of brain fever Kate suffers every time she forsakes Dare, linking Kate’s ‘frantic emotions’ (p. 301) to the ‘delirious frenzies’ (p. 302) of the disease. Following close on instances where Kate is on the brink of carnal sin, her attacks of brain fever seem to be connected to her sinful urges, a connection that is underscored by the book’s moralistic narrator. As Gilbert has noted, in Victorian Britain, ‘[m]oral health came to be seen as [...] coterminous with [...] physical health’⁴⁰, which is why Kate’s illness has frequently been read as a product of and punishment for her sinful passions.

Similar to Wilkie Collins’s *Armada*, whose central conflict is built on the belief in the transmissibility of sin, Kate’s sin apparently does not remain contained within her but spreads like a wildfire. Kate’s recovery from brain fever and search for a cure for her diseased passion is set against the backdrop of a fever epidemic, which rages in the slums of the town where she lives. As Gilbert has noted, Kate’s fever of passion ‘is [...] transformed from an individual to a

³⁶ Helen Debenham, ‘The Victorian Sensation Novel’, in *A Companion to the Victorian Novel*, ed. by William Baker and Kenneth Womack (Westport: Greenwood, 2002), 209-21 (p. 214).

³⁷ Shirley Jones, “‘Love’: Rhoda Broughton, Writing and Re-Writing Romance”, in *Popular Victorian Women Writers*, ed. by Kay Boardman and Shirley Jones (Manchester: Manchester University Press, 2004), 208-36 (p. 212).

³⁸ Tamar Heller, ‘Rhoda Broughton’, in *A Companion to Sensation Fiction*, ed. by Pamela K. Gilbert (Chichester: Wiley-Blackwell, 2011), 281-92 (p. 282).

³⁹ Rhoda Broughton, *Not Wisely, but Too Well* (Brighton: Victorian Secrets, 2013), p. 51.

Further references are given after quotations in the text.

⁴⁰ Pamela K. Gilbert, *Mapping the Victorian Social Body* (Albany: State University of New York Press, 2004), p. xiv.

community concern, escaping its containment within the individual to prey on society at large' (*Disease* p. 117). According to Gilbert, Kate becomes 'a vector for disease' (*Disease* p. 114), 'spread[ing] contagion wherever she goes' (*Disease* p. 116). The seemingly infectious nature of Kate's sinful passion is well-grounded in nineteenth-century religious discourse. Indeed, the idea that sin was contagious and could be communicated to everyone who came into direct or indirect contact with it had gained some traction among authors of nineteenth-century religious text on both sides of the Atlantic, as this passage from the writings of Daniel Smith, an American Methodist, demonstrates:

Sin is contagious. [...] It is a spreading leprosy. Can we welcome it to our embrace, and yet hope to avoid the contagion? [...] [T]he infection is inhaled by the breath, absorbed through the pores – soon is it coursing its way through every artery and vein, and corrupting the whole mass – the light fades from the eye, the limbs falter, 'the whole head becomes sick, and the whole heart faint!'⁴¹

Also James Spence, a Scottish clergyman, shared the opinion that sin was not self-contained but could infect and corrupt other people:

We are all familiar with the sad fact that sin is infectious, that it possesses a power of self-propagation, of passing by contact from man to man, and from heart to heart. One soul that is tainted communicates the taint to another, and that one to a third, and thus the foul thing is transmitted and its existence perpetuated in the earth.⁴²

Not Wisely, but Too Well's alignment of its main protagonist's sexual passion with disease has earned the book the reputation of being 'canting', a word that Rhoda Broughton herself used when referring to it in a letter.⁴³ However, I believe that, the novel can also be read as a critique of excessive religiosity. First of all, it is interesting to note that Kate is not the only character in the book who is associated with sickness. James Stanley, Kate's friend and spiritual advisor, is

⁴¹ Daniel Smith, *Lectures to Young Men on Their Dangers, Safeguards, and Responsibilities* (New York: Carlton and Philipps, 1853), p. 26.

⁴² James Spence, 'The Greatest of These Is Love', *The Original Secession Magazine*, 17 (1886), 369-79 (pp. 377-8).

⁴³ Rhoda Broughton, 'Letter to George Bentley, 1871', in Rhoda Broughton, *Not Wisely, but Too Well*, ed. by Tamar Heller (Brighton: Victorian Secrets, 2013), p. 384.

frequently described with adjectives denoting ill health. He is variously characterised as ‘pale’, ‘delicate-looking’, ‘frail’ (p. 170), ‘fragile’ (p. 180) and ‘sickly’ (p. 179). By associating both Kate and James, two characters who are united by their religious enthusiasm, with disease, the book establishes a connection between disease and religiosity. Although Kate does not strike the reader as a very pious person in the first volume, she becomes a district visitor, distributing tracts to the poor and the sick, in the book’s second volume. Quite tellingly, the outbreak of the fever epidemic coincides with Kate’s turn to religion. The first time we hear about the fever is in a scene which shows Kate sitting in a room with religious tracts scattered around her. Although she initially goes about her duties rather reluctantly, calling the tracts she is supposed to hand out ‘[l]ittle torments’ (p. 168) and ‘nasty good books’ (p. 172), she starts to embrace her district-visiting duties after her recovery from brain fever: ‘Heart and soul, with all the energies of her body, and all the faculties of her mind, she went into that work, with which she had formerly trifled and played’ (p. 304).

Like Midwinter, Kate believes that she is utterly depraved and destined for destruction. Afraid that she might be tempted towards ruin in a ‘fresh access of insanity’ (p. 303), she plunges herself into Methodist charity work in an attempt to cure herself of her diseased passion. Although she used to think of herself as ‘incurable’ (p. 176), she comes to regard religion as the remedy for her sinful urges. Also James believes that religion can serve as medicine for earthly woes: ‘We are all God’s poor patients, you know, [...] and He gives us very bitter physic sometimes; but His physic is not like earthly doctors’; it always cures if we take it right’ (p. 176). However, despite some of the characters’ insistence on the healing powers of religion, the novel makes it very clear ‘that it is quite possible to have too much of a good thing’ (p. 223). These words that Kate utters herself when referring to the company of her cousins can also be applied to religion, as the novel makes quite plain. Even James seems to think so, as at one point he refrains from sermonising Kate for fear of giving her an ‘overdose’ (p. 177).

Similar to Plato’s concept of the ‘pharmakon’, religion becomes a force that combines the qualities of both medicine and poison when Kate’s attempts to suppress her ‘sinful’ urges assume exaggerated proportions:

No reins [...] could be too strait and tight to curb and check so untamed a soul, no manacles too heavy and close to fetter it. [...] She had done for ever with the flowers and jewels of life; the thorns must be her portion now, and she would wear them crownwise, round her brows, and not clamour or

complain about the blood they drew. On her past harmless coqueties she looked back as on so many deadly sins [...]. (p. 303)

As Gilbert has noted, the book equates ‘both sex and religion as feverish obsessions’ (*Disease* p. 122). Both the moralistic narrator and Kate’s immediate family members agree that Kate’s religious fervour has taken on pathological features. By describing Kate’s ‘exaggerated strictness’ with herself as the result of a ‘morbid remorse’ (p. 303), the narrator aligns Kate religious zeal with disease. Also Kate’s sister, Maggie, believes that Kate’s turn to religion has assumed unhealthy proportions: ‘She is morbid; it is unnatural to hear a young girl preach like that [...]’ (p. 331). The book’s association of religious enthusiasm with disease is further enhanced by the fact that the fever in the slums becomes more and more rampant as Kate’s religious zeal increases: ‘Fed by the fog, and the river mist, and the warm drizzle, the fever shot up like a tropical plant, from an infant into a full-grown giant’ (p. 310).

Kate’s fervent adoption of Methodism is not only connected with physical but also with mental disease. Following her second desertion of her lover and her second attack of brain fever, Kate gives way to profound melancholy. However, rather than connecting her depression of spirits with her lovelorn state, the narrator makes it plain that Kate’s melancholy is a direct result of her religious self-chastisement: ‘I think her religion did not make her happy. No one ever heard her joking now, or making little witticisms; very seldom she laughed’ (p. 306). Maggie even goes one step further in forging a link between Kate’s religious enthusiasm and mental illness, declaring her ‘mad’ (p. 308) when Kate refuses to give up her district-visiting in view of the raging fever. This association between Kate’s religious enthusiasm and insanity is reminiscent of nineteenth-century medical discourse, which considered religious fervour, especially in the context of religious revivalist movements, to be an important cause of mental disease.

While Kate’s path of religious self-chastisement ends in her murder at the hands of Dare in the book’s original serial version, the ending of the revised triple-decker edition sees her entering a convent, where she spends the remainder of her years in religious drudgery: ‘Early and late she toiled, giving her days and her nights, her feeble strength, and all her tender woman’s heart, to the abating by but a few drops the great ocean of human anguish; and, for meed of her labours, won much weariness of body, oftentimes discouragement of soul, and small cold praise’ (p. 375). The narrator’s unveiled awe of Kate’s self-sacrificial devotion has led scholars to the conclusion that the book’s ending ‘confirms the

superiority of religious self-sacrifice over passion' (Gilbert, *Disease* p. 124). However, by associating not only Kate's sinful passion but also her excessive religiosity with disease, the novel seems to invite a slightly different reading. Although Kate's exaggerated self-chastisement prevents her from falling into her old patterns, it does not effect a cure and, as a result, only produces misery. Instead of portraying religious zeal as a means to attain happiness, the book forcefully shows that practices labelled 'sinful' according to nineteenth-century morality, like the indulgence of sexual passion, and practices that usually invite moral praise, like religious exertion, have an equal potential of producing suffering when assuming excessive proportions.

Conclusion

In conclusion, it may be said that the concepts of disease and contagion not only pervaded the mid-nineteenth-century sensation debate but also feature prominently in Wilkie Collins's *Armadale* and Rhoda Broughton's *Not Wisely, but Too Well*. However, as I have shown, unlike nineteenth-century conservative critics' use of the rhetoric of disease and contagion, the two novels' weaving together of discourses of sin, disease and religion can be read as a critique of misguided and excessive religiosity rather than an affirmation of conventional morality. By applying the rhetoric of disease and contagion to both sin and religious enthusiasm, the novels put the two concepts on the same level, suggesting that excessive religious fervour can be as destructive as sinful behaviour. This is exemplified by the stories of the two novels' main protagonists, Ozias Midwinter and Kate Chester. While Midwinter's religious mania threatens to drive a wedge between him and his best friend, thus almost making his worst fear come true, namely that he will bring about his best friend's destruction, Kate's fervent adoption of Methodism does not bring her happiness but only toil and misery.

It may be argued that both novels display an anti-Evangelical strain, as they both demonstrate the dangerous potential of the Evangelical 'insistence on human depravity' (Oulton p. 94) and belief in the doomed nature of humanity in their own way. By depicting both Midwinter's conviction that he is doomed to be the tool of his best friend's destruction and Kate's conviction that her depravity has put her outside the pale of God's mercy (see p. 293) and her subsequent religious fervour as pathological, the two novels level thinly veiled criticism at two of the core teachings of Evangelicalism. Thus, in an ironic reversal of nineteenth-

century moral criticism of sensation fiction, which declared sensation novels to be ‘one of the crying evils of the day’, Wilkie Collins’s *Armadale* and Rhoda Broughton’s *Not Wisely, but Too Well* can be said to expose moral self-righteousness and excessive religiosity, especially that of an Evangelical turn, as the real agents of contagion.

Bibliography

- Bartholomew, Robert E., and Julian D. O’Dea, ‘Religious Devoutness Construed as Pathology: The Myth of “Religious Mania”’, *The International Journal for the Psychology of Religion*, 8.1 (1998), 1-16
- Bingham, Nathaniel, *Observations on the Religious Delusions of Insane Persons* (London: J. Hatchard and Son, 1841)
- Bourne Taylor, Jenny, *In the Secret Theatre of Home: Wilkie Collins, Sensation Narrative, and Nineteenth-Century Psychology* (London: Routledge, 1988)
- Broughton, Rhoda, *Not Wisely, but Too Well*, ed. by Tamar Heller (Brighton: Victorian Secrets, 2013)
- Choi, Tina Young, *Anonymous Connections: The Body and Narratives of the Social in Victorian Britain* (Ann Arbor: University of Michigan Press, 2015)
- [Chorley, Henry Fothergill,] ‘New Novels’, *The Athenaeum* (2 June 1866), 732-3
- Collins, Wilkie, *Armadale*, ed. by John Sutherland (London: Penguin, 2004)
- Deane, Bradley, *Making of the Victorian Novelist: Anxieties of Authorship in the Mass Market* (New York: Routledge, 2013)

- Debenham, Helen 'The Victorian Sensation Novel', in *A Companion to the Victorian Novel*, ed. by William Baker and Kenneth Womack (Westport: Greenwood, 2002), 209-21
- Gilbert, Pamela K., *Disease, Desire, and the Body in Victorian Women's Popular Novels* (Cambridge: Cambridge University Press, 1997)
- , *Mapping the Victorian Social Body* (Albany: State University of New York Press, 2004)
- , 'Sensation Fiction and the Medical Context', in *The Cambridge Companion to Sensation Fiction*, ed. by Andrew Mangham (Cambridge: Cambridge University Press, 2013), 182-95
- Havelock, J. G., 'An Epidemic of Religious Mania Originating from a Case of Spurious Pregnancy', *Transactions of the Edinburgh Obstetrical Society*, 19 (1894), 183-5
- Heller, Tamar, 'Rhoda Broughton', in *A Companion to Sensation Fiction*, ed. by Pamela K. Gilbert (Chichester: Wiley-Blackwell, 2011), 281-92
- Ifill, Helena, *Creating Character: Theories of Nature and Nurture in Victorian Sensation Fiction* (Manchester: Manchester University Press, 2018)
- [Jewsbury, Geraldine Endsor,] 'Review of *Miss Forrester: A Novel*, by Mrs. Edwards', *The Athenaeum*, 1980 (7 October 1865), 466
- Jones, Shirley, "'Love": Rhoda Broughton, Writing and Re-Writing Romance', in *Popular Victorian Women Writers*, ed. by Kay Boardman and Shirley Jones (Manchester: Manchester University Press, 2004), 208-36
- Kennedy, Meegan, 'Medicine and Sensation', in *A Companion to Sensation Fiction*, ed. by Pamela K. Gilbert (Malden: Wiley-Blackwell, 2011), 481-92

- Knight, Mark J., 'Rethinking Bibliolatry: Wilkie Collins, William Booth and the Culture of Evangelicalism', *Wilkie Collins Society Journal*, New Series, 3 (2000), 47-58
- Leckie, Barbara, *Culture and Adultery: The Novel, the Newspaper, and the Law, 1857-1914* (Philadelphia: University of Pennsylvania Press, 1999)
- [Mansel, Henry,] 'Sensation Novels', *The Quarterly Review*, 113 (April 1863), 482-514
- Maudsley, Henry, *The Physiology and Pathology of the Mind* (New York: D. Appleton, 1872)
- Morison, Alexander, *The Physiognomy of Mental Diseases* (London: Longman, 1838)
- Nixon, Kari, *Kept From All Contagion: Germ Theory, Disease, and the Dilemma of Human Contact in Late Nineteenth-Century Literature* (Albany: State University of New York Press, 2020)
- 'Not a New "Sensation"', *All the Year Round*, 9 (25 July 1863), 517-20
- [Oliphant, Margaret,] 'Novels', *Blackwood's Edinburgh Magazine*, 102 (September 1867), 275-80
- Oulton, Carolyn W. de la L., *Literature and Religion in Mid-Victorian England: From Dickens to Eliot* (Houndmills: Palgrave Macmillan, 2003)
- 'Philosophy of "Sensation"', *St James's Magazine*, 5 (October 1862), 340-6
- Pinel, Philippe, *A Treatise on Insanity*, trans. by D. D. Davis (Sheffield: Cadell and Davies, 1806)
- Prichard, James Cowles, *A Treatise on Insanity and Other Disorders Affecting the Mind* (London: Sherwood, Gilbert, and Piper, 1835)
- Pykett, Lyn, *The Nineteenth-Century Sensation Novel* (Horndon: Northcote House, 2011)

Rothfield, Lawrence, *Vital Signs: Medical Realism in Nineteenth-Century Fiction* (Princeton: Princeton University Press, 1992)

Smith, Daniel, *Lectures to Young Men on Their Dangers, Safeguards, and Responsibilities* (New York: Carlton and Philipps, 1853)

Spence, James 'The Greatest of These Is Love', *The Original Secession Magazine*, 17 (1886), 369-79

Stern, Rebecca "'Personation' and 'Good Marking-Ink': Sanity, Performativity, and Biology in Victorian Sensation Fiction", *Nineteenth Century Studies*, 14 (2000), 35-62

Talairach-Vielmas, Laurence, *Wilkie Collins, Medicine and the Gothic* (Cardiff: University of Wales Press, 2009)

The Bible, Authorized King James Version with Apocrypha (Oxford: Oxford University Press, 1997)

'The State of Lunacy in Ireland', *The Medical Critic and Psychological Journal*, 2 (January 1862), 102-13

Thoms, Peter, *The Windings of the Labyrinth: Quest and Structure in the Major Novels of Wilkie Collins* (Athens, Ohio: Ohio University Press, 1992)

Winslow, Forbes 'Religious Insanity Metaphysically Considered', *The Journal of Psychological Medicine and Mental Pathology*, 1 (1875), 67-79

[Wise, J. R.,] 'Belles Lettres', *The Westminster Review*, 86 (July 1866), 125-32