



BIROn - Birkbeck Institutional Research Online

Fifield, Peter (2021) Is Literary History sick? Thoughts on a declinist trope. *Modernism/Modernity* 6 (2), ISSN 1071-6068.

Downloaded from: <https://eprints.bbk.ac.uk/id/eprint/32121/>

Usage Guidelines:

Please refer to usage guidelines at <https://eprints.bbk.ac.uk/policies.html> or alternatively contact lib-eprints@bbk.ac.uk.

Is Literary History Sick? Thoughts on a Declinist Trope.

The diagnostic stance assumes a certain status in the examined object. The doctor is not called to diagnose good health, only the nature of sickness. Insofar as literary critics adopt a diagnostic method of their own, they too begin with an often unstated assumption of literary “pathology”; implicitly, the text is understood to be problematic, whether aesthetically, morally, or ideologically.ⁱ Diagnostic critics, for all the nuance of their professional judgments, begin their work assuming that something is wrong. For, despite the even-handed etymology of “diagnosis,” which refers only to being able to tell things apart—to differentiate or discern—the term refers not to a neutral, detached, or emotionally cool activity but to an interested, even a concerned, one. Goethe’s aesthetic maxim, for example, does not make an each-to-their-own distinction: “What is Classical is healthy; what is Romantic is sick.”ⁱⁱ The appeal of diagnosis’ connotations—precision, expertise, fine-grained discrimination—coexists with an undervalued sense of critical worry. I suggest that literary scholars would benefit from acknowledging and harnessing this affective, interested quality in our diagnostic literary judgment.

This essay examines the diagnostic critical models established by T. S. Eliot and D. H. Lawrence, who, when acting as literary critics, employ recognizably diagnostic terms or methods. In “The Metaphysical Poets” (1921) and “Introduction to these Paintings” (1929) they diagnose literary history as characterised by a moment of cultural crisis after which literary writing falters: a mutual identification of a worrisome set of cultural symptoms that occasions these authors’ critical comment. In both cases they understand this as an historical moment where subjective experience disintegrates, which influences literary writing: Eliot’s “dissociation of sensibility” diagnoses an estrangement of emotion from intellect, while Lawrence theorizes that the contraction of pox triggers the alienation of body from mind. For Eliot, we may infer, a healthy modernist literature

therefore serves as an immediate palliative for a sickening culture; *The Waste Land* counters a sense of a culture in decay.ⁱⁱⁱ For Lawrence, as I will show below, a more ambivalent cultural diagnosis accompanies an acknowledgment of the aesthetic power of a canon nonetheless compromised by the contraction of “pox.”^{iv} I suggest that contemporary modernist scholars have inherited our own diagnostic readerly practices in part from such modernist critical arguments. Whether we are unpacking the enigmatic nature of a work through systematic and knowledgeable examination of its various sections and aspects, or juxtaposing the modernist text with its tradition and its contemporaries in order to identify a moment of stylistic change, our approaches emulate the criticism practiced by the modernists themselves. Insofar as we are critically-trained “doctors of philosophy,” we have been trained at least in part by the diagnostic praxes of our subjects.

The process of diagnosis has acquired renewed urgency in recent literary criticism. The spirited assessment of suspicious reading in Rita Felski’s *The Limits of Critique* (2015) and the subsequent collection of essays *Critique and Postcritique* (2017) presses heavily on so-called symptomatic reading, a practice that reads the dynamic forces invisible on the text’s “surface.” As its medical lexis indicates, symptomatic reading is coterminous with a diagnostic-style criticism: the promise of symptomatic reading is one of a discerning judgment, carrying the sort of expertise—and therefore the prestige—of the medical practitioner. Such reading will, its advocates claim, show the text’s unspoken assumptions, its ideological grounding, and its structural underpinnings by analyzing its ambiguities, contradictions, and omissions. It will diagnose the underlying condition from a set of suggestive but not easily legible surface manifestations and situate the diverse parts within the previously obscure whole. This suspicious nature, its detractors argue, bolsters the authority of the critic, who draws misleading prestige from the scientific domain, while narrowing, if not overlooking, an authentic experience of reading. In order to demonstrate the variety and versatility of criticism, post-critical studies encourage us to be more optimistic and less studiously disinterested.

I would like to question the assumption that diagnostic criticism is based on a posture of scientific distance, analytical superiority, and emotional coldness. Diagnostic criticism is as interested and affective as the medical practices with which it shares its vocabulary.

Symptomatic reading derives, according to Felski, from the influence of a “deep” psychoanalytical subject, and rose to prominence in the 1970s with the rereading of Freud undertaken by French theory. In this model, the literary text is structured like a clinical subject, with repressions, traces, internal divisions and expressive slip-ups. As such, symptomatic reading is, in Felski’s account, a belated triumph for modernist knowledge; it joins other strands of suspicious reading in that it “riff[s] off, revises, and extends the classic themes of literary and artistic modernism.”^{vi} This improvisatory quality further identifies the practice with modernism, through an infatuation with novelty. In this account, symptomatic reading has been the self-renewing mode of literary criticism. Its strategies are a part of the material that it examines, and it aims, equally, not to be a static or conservative process, but one constituted by its performance of novelty. The satisfactions of uncovering an apparently slight new insight that entirely upends received readings of familiar texts, are, in short, a form of making new.

In what follows, I locate other, less condemnatory, critical histories of diagnostic reading, where diagnosis is seen not as a recent false step, but an integrated and enduring component of cultural commentary. George Canguilhem’s *The Normal and the Pathological* (1968) traces a modernist genealogy that positions Nietzsche as a prophet for diagnostic reading. Noting the scientific conception of pathology held by Auguste Comte and Claude Bernard, Canguilhem observes that “Nietzsche borrowed from [...] Bernard precisely the idea that the pathological is homogeneous with the normal.”^{vi} Sickness is, in this conception, not a qualitatively different condition from health, acting under different laws, but follows the same processes as the normal: the pathological is the result of hyper- or hypo-activity, not of a different set of forces or states. Accordingly, Nietzsche

sees in illness a form of experiment: the pathological is “is a substitute for biological experimentation” that produces “a gain in knowledge of the normal.”^{vii} Illness is, in this theory, an exaggeration or magnification of normal physiology, revealing what might otherwise be invisible or overlooked. Following this logic, we might understand modernist literature as productively “pathological.” Modernism’s spectacular hallmarks, where meaning is imperilled, narrative is interrupted, perspective is contradictory, and voice is inconsistent, stand to magnify the under-acknowledged strangenesses of non-modernist texts. By acting as a Nietzschean experiment in this way the “pathological” modernist text offers to show the modernist at the heart of its supposedly pre- or non-modern cousins.

Acknowledging the contiguity—indeed the arbitrariness—of pathological and healthy cultural diagnoses, the compulsion to conduct such evaluations is a powerful impulse for writers of literary history. In his recent collection of lectures, *The Nostalgic Imagination: History in English Criticism* (2019), Stefan Collini draws attention to the pervasiveness of declinist models in literary historical writing in the nineteenth and twentieth centuries, assembling a revealing range of examples. In what he calls “a species of cultural decline,” Collini shows, among others, T. S. Eliot mixing not memory and desire but hypochondria and pessimism.^{viii} For example, Eliot asserts, “if open licence is better than concealed depravity, [Carlyle’s] style is healthier than Macaulay’s,” implying that their cultural commentary—and perhaps his own—ought to answer to a moral demand that is best understood in pathological terms.^{ix} Eliot’s use of ‘health’ as an index of cultural judgment links the practice of historiography to diagnosis, assaying cultural discourses that one might otherwise assume carry no such pathological qualities. I follow Collini’s prompt in understanding Eliot’s declinist literary history as intrinsically bound up with the most influential of his cultural diagnoses, the dissociation of sensibility.

Such explicit diagnostic language does not dominate Eliot's critical oeuvre; he prefers scattered to sustained references to diagnosis in his essays.^x However, Collini shows that Edwin Muir understood Eliot's critical practice as diagnostic, asserting in 1925 that "Mr. Eliot's diagnosis of the increasing psychological debility of English poetry since the time of the Elizabethans and their immediate successors is sufficiently well known."^{xi} The key line of Eliot's "The Metaphysical Poets" in this respect communicates without explicit diagnostic language a clear sense of malaise: "In the seventeenth century a dissociation of sensibility set in, from which we have never recovered; and this dissociation, as is natural, was aggravated by the influence of the two most powerful poets of the century, Milton and Dryden."^{xii} While "setting in" usually refers to bad weather or rot—the verb does not accommodate positive actions—terms like "recovered" and "aggravated" belong to the distinctive idiom of symptom and suffering. Eliot further cements the physiological import of his interpretation of literary history when he privileges the thoroughgoing anatomical interests of Racine and Donne over the metaphorical methods of Milton and Dryden. Unlike the latter pair, Racine and Donne "looked into a good deal more than the heart. One must look into the cerebral cortex, the nervous system, and the digestive tracts."^{xiii} Eliot's corrective "one must" here asserts the necessity of recuperating a type of embodied poetic activity, integrating the whole organism, rather than only its intellect. Contrary to the impression of diagnostic reading as a mode that downplays embodied reading, Eliot's critical model here locates aesthetic potency in a visceral poetic process, which is affecting precisely insofar as it is embodied. In turn, Eliot's diagnosis implies that to be critically attentive is precisely to pay renewed attention to the body.

D. H. Lawrence's "Introduction to these Paintings" makes an argument structurally similar to Eliot's "The Metaphysical Poets" in order to identify not only the functioning body but the specifically pathological body as a major cultural force.^{xiv} Indeed, the common diagnostic structure—identifying a discrete historical moment when culture changed due to the fragmentation of human

experience—may even suggest a direct influence. Lawrence suggests that “the grand rupture had started, in the human consciousness” not during the seventeenth century, as Eliot suggests, but during the Elizabethan period.^{xv} This estrangement from a corporeal consciousness, Lawrence avows, stemmed “from the great shock of syphilis and the realization of the consequences of the disease.”^{xvi} In his account, the universal “horror and terror” occasioned by the syphilitic subject initiated a collective repression of a body whose sexual urges were now feared and thought unwholesome.^{xvii} Equally troubling to Lawrence, and a surprising literary result of this infection, he says, is the widespread treatment of “pox” as joke: “It is one of the words that haunt Elizabethan speech. Taken very manly, with a great deal of Falstaffian bluff, treated as a huge joke!”^{xviii} The transformation of syphilis into a joke is, for Lawrence, as much an effect of the word’s acoustic qualities as of the disease’s actual symptoms: pox invites humor as much as the more technical language of “syphilis” refuses it. In his rather unlikely advocacy of “syphilis”—a more abstract and less earthy terminology—Lawrence wields the professional diagnostic language of medicine as a prophylactic against the effects of the sniggering vernacular.^{xix}

In an extravagantly sweeping gesture, Lawrence suggests that all of the great figures of the Elizabethan age, including the monarchs and Shakespeare, were either sufferers or at the very least had internalized the fear of syphilis, so that the period’s intellectual fruit is directly tainted by the disease. Lawrence’s diagnosis of cultural decline is therefore a diagnosis of a literal pathology: fear of syphilis and syphilis itself exhibit the same cultural symptoms. Lawrence’s displeasure at this syphilitic culture is complicated, however, by his attribution of certain qualities in Shakespeare’s work to this cause. Lawrence states, “I am convinced that *some* of Shakespeare’s horror and despair, in his tragedies, arose from the shock of his consciousness of syphilis.”^{xx} The proposal that syphilis has been a lively agent in the *creation* of affective power is a radical one. Shakespeare’s emotional depth, it would appear, is a product of illness: his capacity for evoking a powerful response in his

audience—horror and despair—appears here as a veritable symptom of his shocked awareness of syphilis. Lawrence’s disapproval of the unwholesome content of *Hamlet*’s “father-murder complex” must, therefore, be balanced against his acknowledgement that illness is an affective—and effective—well-spring for literature, as unhealthy as one might judge it.^{xxi} This ambivalence is, once again, at the center of Lawrence’s depictions of illness. It is a mark of damage, imbalance, and limitation, but also a creative opening: a heightened experience that has distinct cultural affordances.

Lawrence thus diagnoses national cultural consciousness—what Eliot calls “the mind of England”—with the individual affect of affliction, whether a numbing estrangement or soul-tormenting despair.^{xxii} In this role syphilis is at once a solitary and a social pathology: its significance is not limited to the consulting room, but is political, cultural, and societal. Indeed, Lawrence’s engagement with Shakespeare implies the iconoclastic argument that English national consciousness is passed down not as a creed of shared values or a common spirit, but as a mechanism of degenerative, pathological heredity like syphilis itself. Where Eliot sees the horror of literary decline consoled with the potency of cultural diagnosis, for Lawrence, diagnosis is more ambivalent. In a revisionist reading for the ages, Lawrence tethers Shakespeare’s affective power and canonicity to a moral and sexual taint that is as troubling as it is striking.

Lawrence’s ambivalence, balancing admiration and concern, offers an instructive response to the recent scholarly unease with diagnostic reading strategies. It reminds us that aesthetic judgment does not require a statement of disinterest but rather demands an active, concerned, interested involvement, where the reader is entangled with the text as a whole subject—a subject with a body, emotions, and beliefs incorporated. This sense of involvement is central to Lawrence’s aesthetic, F. R. Leavis diagnosing in *The Plumed Serpent* an “insincerity” which is “of the kind [Lawrence] was so good at diagnosing and defining.”^{xxiii} Leavis implicitly pairs diagnostic skill and sincerity here; it matters to him, and to Lawrence, that critical judgment is inhabited, rather than postured.

As an empowering corrective, the postcritical turn gives welcome emphasis to important facets of criticism, ranging from pleasure to embodiment. In challenging “symptomatic” reading as a product of a post-war theoretical turn, however, it overlooks the modernist roots of our contemporary professional “diagnostic” reading habits. Eliot and Lawrence provide suggestive examples for contemporary consideration, encouraging us to read in creative and engaged ways. Beginning by acknowledging that good readers are interested and not remote or cool, we can exercise embodied, affective, and evaluative functions in our criticism. As scholars of literary modernism we are well-positioned to remember and harness these critical functions as a lesson learned from our objects of study themselves. This matters because diagnostic criticism is not only attuned to the modernist text but delivers an emotional and corporeal sense of engagement that is important to the cultural reach of literary criticism more widely. Diagnostic criticism chimes with the non-professional sense that books matter because of how they make us feel. Addressing the worries regarding literature’s state and status is not, then, blandly Eeyorish but rather galvanising, satisfying, and progressive. It may even deserve the apparently divergent meanings that have emerged around the adjective “sick”: diagnostic criticism may address both the ailing and excellent.

ⁱ This is not entirely true: the *OED* records a rarer, late nineteenth-century use in biology, which refers to ‘distinctive characterization in precise terms’. There is, however, no acknowledgement of a figurative or verbal form of this less value-laden sense.

ⁱⁱ Johann Wolfgang Goethe, *Maxims and reflections*, trans. Elisabeth Stopp, ed. Peter Hutchinson (London: Penguin, 1998), 132. Perhaps more familiar, but altogether less snappy, the same language and the same sentiment is found in T. E. Hulme’s ‘Romanticism and Classicism’, where he endorses the verdict of Fauchois and his circle: ‘They regard romanticism as an awful disease from which France had just recovered’ (T. E. Hulme, “Romanticism and Classicism,” in *Speculations: Essays on Humanism and the Philosophy of Art*, ed. Herbert Read (London: Kegan Paul, Trench Trubner and Co, 1924), 115).

ⁱⁱⁱ Eliot describes a type of modern poetry that resembles *The Waste Land* “The poet must become more and more comprehensive, more allusive, more indirect, in order to force, to dislocate if necessary, language into his meaning” (“The Metaphysical Poets”, *The Complete Prose of T. S. Eliot: The Critical Edition: The Perfect Critic, 1919–1926*. ed. Anthony Cuda and Ronald Schuchard (Baltimore: Johns Hopkins University Press and Faber & Faber, 2014), 381.

^{iv} D. H. Lawrence, “Introduction to these Paintings,” *Late Essays and Articles*, ed. James T. Boulton (Cambridge: Cambridge University Press, 2004).

^v Rita Felski, *The Limits of Critique* (Chicago, IL: University of Chicago Press, 2015), 42.

^{vi} Georges Canguilhem, *The Normal and the Pathological*, trans. Carolyn R. Fawcett and Robert S. Cohen, introd. Michel Foucault (New York: Zone Books, 1991), 45.

^{vii} Canguilhem, 43.

^{viii} Stefan Collini, *The Nostalgic Imagination: History in English Criticism* (Oxford: Oxford University Press, 2019), 35.

^{ix} T. S. Eliot, “Contemporary English Prose: A Discussion of the Development of English Prose from Hobbes and Sir Thomas Browne to Joyce and D. H. Lawrence”, *Vanity Fair*, 20 (July 1923) 51, 98, *The Complete Prose of T. S. Eliot: The Critical Edition: The Perfect Critic, 1919–1926*. ed. Anthony Cuda and Ronald Schuchard (Baltimore: Johns Hopkins University Press and Faber & Faber, 2014), 448.

^x Of the many other examples from Eliot’s critical oeuvre, three from *The Sacred Wood* indicate the tenor the critique, “We cannot grapple with even the simplest and most conversational lines in Tudor and early Stuart drama without having diagnosed the rhetoric in the sixteenth and seventeenth-century mind” (“A Romantic Aristocrat”, *The Complete Prose of T. S. Eliot: The Critical Edition: The Perfect Critic, 1919–1926*. ed. Anthony Cuda and Ronald Schuchard (Baltimore: Johns Hopkins University Press and Faber & Faber, 2014), 29; “The verbal disease above noticed may be reserved for diagnosis by and by. It is not a disease from which Mr. Arthur Symons (for the quotation was, of course, not from Mr. Symons) notably suffers” (“The Perfect Critic”, *The Complete Prose of T. S. Eliot: The Critical Edition: The Perfect Critic, 1919–1926*. ed. Anthony Cuda and Ronald Schuchard (Baltimore: Johns Hopkins University Press and Faber & Faber, 2014), 262-3; “Much of his analysis of the decadence of contemporary French society could be applied to London, although differences are observable from his diagnosis” (“The French Intelligence”, *The Complete Prose of T. S. Eliot: The Critical Edition: The Perfect Critic, 1919–1926*. ed. Anthony Cuda and Ronald Schuchard (Baltimore: Johns Hopkins University Press and Faber & Faber, 2014), 291.

^{xi} Qtd Collini, 38.

^{xii} T. S. Eliot, “The Metaphysical Poets”, 380.

^{xiii} Eliot, “The Metaphysical Poets”, 382. In this regard the essay’s process of bodily reflection is a remarkable contrast with the bloodless library-shuffling of “Tradition and the Individual Talent.”

^{xiv} The summary of Lawrence’s ‘Introduction to these Paintings’ in this and the subsequent paragraph is drawn from draft material for my forthcoming book, *Modernism and Physical Illness: Sick Literature* (OUP) due for publication in 2020. It is used here in the service of a different argument.

^{xv} Lawrence, 186.

^{xvi} Lawrence, 186.

^{xvii} Lawrence, 186.

^{xviii} Lawrence, 187-8.

^{xix} Defending Lawrence’s comic capacity has been a point of principle from his greatest historical champion, F. R. Leavis, to current advocates. The former described Lawrence as “one of the great masters of comedy” (F. R. Leavis, *D. H. Lawrence, Novelist* (London: Chatto and Windus, 1955), 13) while Jeffrey Meyers in 2006 suggests that “Humor, whether comedy or satire, is an important part of his literary arsenal” (Jeffrey Meyers, “D. H. Lawrence, Comedian”, *Salmagundi*, 152, Fall (2006): 205). In his introduction to the collection *Lawrence and Comedy* Paul Eggert rightly points up a difference between comedy as form and as effect, suggesting that ‘Lawrence rarely allows us to laugh with him in easeful joy’ (Paul Eggert and John Worthen, eds., *Lawrence and Comedy* (Cambridge: Cambridge University Press, 1996), 9). If comedy is not foreign to Lawrence laughter is perhaps a more troubling phenomenon, not least when it touches on sex.

^{xx} Lawrence, 189.

^{xxi} Lawrence, 189.

^{xxii} Eliot, “The Metaphysical Poets,” 380.

^{xxiii} F. R. Leavis, *The Great Tradition: George Eliot, Henry James, Joseph Conrad* (London: Chatto and Windus, 1955), 81.