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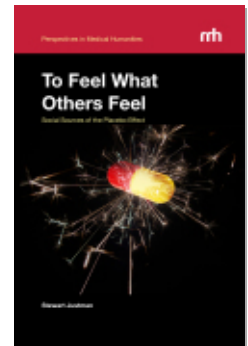
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Chapter Seven

The Invalidism of Mr. Woodhouse

By dint of having his fantasy indulged by everyone around him, the man's imaginary ailment has become real.

The inverse of a vigorous mind in a healthy body would be a frail mind in a frail body. Such is the state of Mr. Woodhouse as we encounter him in the brilliant opening chapter of Jane Austen's *Emma*, set immediately after the marriage, and therefore the departure from the household, of Emma's governess Miss Taylor. Completely unequal to his patriarchal position and said to be "without activity of mind or body," the enfeebled Mr. Woodhouse stands as a sad exhibit of the interdependence of the mental and the physical. The text suggests that he sank to the condition in which we find him not as a result of the natural course of any disorder but because he abandoned himself to an imaginary helplessness to which others deferred, wisely or not. If companionship can itself be a medicine—alleviating gloom and distress, for example, as a certain tradition of common sense maintained—so too, it seems, can the aid of others complicate our troubles. Mr. Woodhouse is a study in socially constructed invalidism.¹

The void at the moral center of Emma's world, Mr. Woodhouse is identified as "having been a valetudinarian all his life," which makes him (according to the Oxford English Dictionary) "A person in weak health, esp. one who is constantly concerned with his own ailments; an invalid." In the more provocative terms of Falconer's treatise on mind-body medicine, Mr. Woodhouse suffers from or cultivates something like hysteria, albeit without such physical symptoms as "paroxysms." The same irony that makes him a figure of imperious debility gives him a malady more commonly imputed to women.² Of hysteria Falconer writes that "nothing contributes to aggravate it more than indolence and vacancy of mind"—Mr. Woodhouse's vocation. Concerned lest people accede to the hysteric's fictions and affectations, Falconer cautions that

too great solicitude to avoid every thing likely to give uneasiness, especially if such solicitude be very apparent, is likely to do as much mischief as service. Nothing so much enhances the apprehension of danger, or so causes those on whose account the care is taken, to believe that the hazard is greater than it really is, and such circumstances frequently recurring, keep them perpetually in a state of painful irritation, which in reality constitutes the disorder. It would be much better to inure such persons gradually to the common occurrences of life.³

Seven years have not been enough to inure Mr. Woodhouse to his elder daughter Isabella's marriage, which he persists in regarding as a misfortune to her because it feels like one to him. Naturally he views the marriage of Miss Taylor earlier that day in the same light. Even a walk on a mild moonlit night seems to Mr. Woodhouse, in his hysteria, a "shocking" event, and to venture half a mile to visit the newlyweds is out of the question.

"My dear, how am I to get so far? Randalls is such a distance. I could not walk half so far."

"No, papa, nobody thought of your walking. We must go in the carriage to be sure."

This little exchange well illustrates the sort of care and coddling Mr. Woodhouse's hysteria receives—at least from Emma, his principal prop, for whom his incapacity means her own freedom.

In view of her father's infantilism, the wonderful first sentence of the novel takes on new meaning:

Emma Woodhouse, handsome, clever, and rich, with a comfortable home and happy disposition, seemed to unite some of the best blessings of existence; and had lived nearly twenty-one years in the world with very little to distress or vex her.

The inference is inescapable: having a father who demands to be tended like a child does not disagree with Emma Woodhouse. And perhaps it is because this arrangement suits her that Emma is shown pampering the nominal patriarch, playing along with his hysteria in violation of Falconer's sensible advice. At one point she even denies he is living in a fantasy world, thereby reinforcing the most fundamental delusion of all. Tellingly misconstruing a

remark by Mr. Knightley as concerning him, Mr. Woodhouse confesses, “I am afraid I am sometimes very fanciful and troublesome,” as if begging to be contradicted. Emma instantly reassures him that it is not so. “My dearest papa! You do not think I could mean *you*, or suppose Mr. Knightley to mean *you*.” That Mr. Woodhouse is immediately corrected by Emma after his all-too-accurate admission shows just what a cobweb of fictions his life has become, and how the complicity of others, in particular Emma, keeps the delicate structure from being swept away. “His spirits required support.”

Following a superb exchange between Emma and Mr. Knightley about whether she engineered the match between Mr. Weston and Miss Taylor or it came about by itself, Mr. Woodhouse, “understanding but in part,” makes a simple-minded comment. If he had understood the exchange, it might have set him thinking about whether his own strange condition came about by itself or as the result of social complicity. That Mr. Woodhouse has been “a valetudinarian all his life” means he is not only wealthy enough to make inactivity his occupation but important enough, at least locally, to command deference despite himself. He is, we are told, “a much older man in ways than in years; and though everywhere beloved for the friendliness of his heart and his amiable temper, his talents could not have recommended him at any time,” which suggests that his pretense or affectation of inability has become all too real through lack of doing anything and through the cultivation of his weaknesses by those who love him.⁴ Second nature seems to have become nature itself. The most he may be capable of is treating others as if they were as delicate as himself.⁵

Instead of the remedies recommended by Falconer, such as “to inure [the hysteric] to the common occurrences of life,” Emma abets Mr. Woodhouse’s fantasy that he is too frail for life itself. If to feel as others feel, or seem to feel, is a channel of the placebo effect, Mr. Woodhouse is forever unable “to suppose that other people could feel differently from himself,” and so projects onto them his own cultivated inability to support life’s occurrences. (Hence his offer of an egg to Mrs. Bates in chapter 3: “Mrs. Bates, let me propose your venturing on one of these eggs. An egg boiled very soft is not unwholesome. . . . You need not be afraid—they are very small, you see—one of our small eggs will not hurt you.”) The supposed frailty of others then serves to justify his own, although his, by virtue of long pretending, has become real enough. If a placebo effect lies somewhere on the continuum between the suppositious and the real, in the case of Mr. Woodhouse an affected delicacy has become genuine incompetence.

In chapter three of *Emma* we hear of certain newfangled schools in which “young ladies for enormous pay might be screwed out of health and into vanity.” Without the help of any system or theory but certainly with the aid of others, Mr. Woodhouse has sacrificed his wellbeing to a fantastic obsession with health itself.



If the magic of words is such that being able to name their condition gives some patients a sense of control of it (a transaction sometimes called the Rumpelstiltskin effect), a medical label can also have the reverse effect of contributing to a sense of illness. A study published in 1978 found that after a screened group was diagnosed with hypertension, their annual rate of absenteeism increased by 80%, whether or not the condition was actually being treated.⁶ The diagnosis, the label, evidently underwrote the workers’ understanding of themselves as ill even though their illness had no symptoms and the normal range of blood pressure is a matter of ambiguity. The label Mr. Woodhouse wears as a valetudinarian, a man in permanent ill health, makes for a sort of moral absenteeism, in the form of an abdication of his patriarchal responsibilities.

Some medical labels may even give stage directions for the performance of illness. A recent discussion of the nocebo phenomenon—the induction of adverse effects by expectation—points out that given groups not only have their own classifications of disease but in effect their own scripts for acting it out. A nosology of disease

is also a *sickness repertoire*, available for performance. . . . Knowledge that symptoms such as fainting exist provides a role or script available to be performed. In addition, nosologies may be *licenses* (insofar as they certify the cultural legitimacy of the condition) or *prescriptions* (insofar as they define expected sequences of occurrences). However, nocebo acts need not be—and most appear not to be—deliberate, voluntary, or fully conscious.⁷

Perhaps the understanding of valetudinarianism in his local world gives Mr. Woodhouse a “legitimate” script to perform (not that he could get away with it if he were a servant rather than a man of leisure). It is understood that a certain sort of person, called a valetudinarian, is in weak health; constantly concerned with his own health; an invalid. This definition does not exactly

state that the invalidism in question may have been self-caused.⁸

Hysteria as explained by Falconer lacks legitimacy both because it is such an artificial construction and because it is bound up with “indolence and vacancy” as well as “selfish and mean ideas and sentiments,”⁹ all of which Mr. Woodhouse exhibits unmistakably. It seems that the available sickness repertoire has given Mr. Woodhouse a role to play that is all at once congenial to his temperament, congenial to Emma (in that it nullifies his authority), entitled to the deference of others, and finally debilitating. Hysteria as instanced in Mr. Woodhouse is a *nocebo* phenomenon.

What of the qualification that *nocebo* acts need not be conscious and deliberate? That Mr. Woodhouse never intended to lose himself in a pathological fantasy goes without saying. But never would he have been able to do so without continual babying, especially by Emma herself; and though Emma certainly enjoys and abuses the freedom she acquires as a result of his abdicated authority, she is not so ill-meaning as to undermine him with cynical intent. Others, too, defer to Mr. Woodhouse without ill designs. Even the sensible Mr. Knightley, who contests Mr. Woodhouse’s hysterical interpretations as far as possible, can only say so much.

The last words of the opening chapter belong to Mr. Knightley, the irony of their implications ringing out like the after-tone of a bell. Let Mr. Elton choose his own wife, he tells Emma. “Depend on it, a man of six or seven-and-twenty can take care of himself.” Yet Mr. Woodhouse cannot take care of himself and apparently never could and never will. The novel ends with Mr. Woodhouse in the same state of incapacity as at the beginning, as if the changes that come to others—the events of his world—had simply passed him by. Where in the first chapter he is said to hate “change of every kind” and marriage in particular as the “origin of change,” in the novel’s last paragraphs he proves himself unchanged by dreading the impending marriage of Emma and Mr. Knightley. What snaps him out of it is not “any sudden illumination” of his mind or “any wonderful change of his nervous system,” we are told. It happens that some turkeys are stolen from the nearby poultry-houses, a crime so alarming to Mr. Woodhouse that he is relieved to put himself under the protection of his soon-to-be son-in-law. One dread simply displaces another.

Being “leveled with the rest of the world,”¹⁰ Mr. Woodhouse is ineligible for sudden illuminations and wonderful changes—for miraculous cures—although in fact his case does not lend itself to cure at all. Because he hates change of every kind he must also hate the thought of the only thing that

could help him, a reformation of his own habits. Over time, through indolence and the deference of others, he has gotten so locked into these practices that any departure from them is now outside the realm of the possible.



Our own time has seen any number of hitherto unknown ailments identified and popularized—ADHD, chronic fatigue syndrome, premenstrual syndrome, and social phobia, for example, all of which may be responsive to placebo treatments. What's wrong with the expansion of the list of medical or psychiatric disorders and the marketing of illness that goes along with it? A well-informed critic of the trend toward the medicalization of human life can only say that the classification of so many deviations from the medical average as illnesses deprives the world of “diversity,” in effect making it a less colorful place.¹¹ But Mr. Woodhouse is revealed as a colorful man precisely in that he has renounced maturity in order to play the child and devote himself to his fantasies, and so too may an abundance of new disorders make the world a more variegated place merely by their presence. Let a hundred flowers of illness bloom. Far from representing a police action by a medical community bent on suppressing diversity, the installation of novel entities such as chronic fatigue syndrome, adult ADHD, and even multiple personality disorder in the American Psychiatric Association's *Diagnostic and Statistical Manual* often comes about at the urging of groups seeking to have their claim to difference—their diversity—officially recognized.¹²

A staunch believer in chronic fatigue syndrome has argued that a child with any of its symptoms should have complete rest, inasmuch as “the stress of leading a normal life and keeping up with their peers can exacerbate the condition,” which as others have noted is a prescription for invalidism.¹³ And at this point we return to the case of Mr. Woodhouse, for whom incapacity became a way of life. The trouble with the ever-expanding list of ailments and the tidal trend toward the medicalization of life is not that they make things bland and uniform but that the creation and popularization of disorders which may or may not have a medical basis not only provide templates of debility to model ailments on (thereby encouraging their spread) but pose the same risk to which Mr. Woodhouse succumbed: the risk of the patient growing into the complaint.