
Alan Bewell. *Romanticism and Colonial Disease*. Baltimore: The Johns Hopkins University Press, 1999. 373p.

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Literary critics tend to understand representations of disease as metaphors. We tend to assume that British depictions of diseased colonial spaces reflect British sentiments about foreign spaces. Alan Bewell reminds us that spreading and encountering new disease was a reality of British colonial experience, a reality as well as a metaphor mapped onto colonial landscapes. His thorough historical study of British experience of colonial disease seeks to address the tremendous cost of colonization to the British and its impact on Romantic writers. In Bewell's readings, Romantic writers used images of disease to critique and question the idea of colonization. After reading Bewell's exhaustive study of representations of disease in both historical documents and literary works, the reader wonders how the quest of British imperialism could ever have been viewed as a healthy endeavor for British subjects.

Studying both classic Romantic works and less known documents such as medical discourse and representations of colonial soldiers, Bewell weaves an impressive narrative about how the possibility of British empire was increasingly doubted throughout the eighteenth and nineteenth centuries. His historical evidence is thorough, well interpreted, and closely read, its significance adeptly applied to Romantic literature for specific rather than full interpretations of literary meaning. One should not expect in Bewell's work to find full discussions of Romantic texts but specific readings of disease that could be used in Romanticism courses to nuance more comprehensive readings of Romantic writers. Bewell traces the politics of medical geography, arguing that understandings of illness helped British writers to mark spatial boundaries and relationships between illness and cultural lifestyles. He articulates the relationship between writers, like Shelley, Wordsworth, Coleridge, Keats, and Brontë, and political/historical documents.

Readings of Romantic texts are sometimes more summative than interpretive, yet excellent readings of the geopolitics of disease can be found in his interpretations of Wordsworth's "The Ruined Cottage," Coleridge's "Rime of the Ancient Mariner" and Brontë's *Jane Eyre*. Rather than a comprehensive reading of any particular literary text, a comprehensive historical picture emerges in which the reality of colonial disease shaped literary response, regarding the desirability and feasibility of colonization. An implicit assumption reigns throughout Bewell's scholarship, the assumption that the literary text manifests rather than shapes historical realities, for the texts are primarily interpreted as responses to the

century's understanding of illness, voiced in non-literary documents. Bewell includes the personal illness experience of authors as additional evidence for the historical reality driving Romantic writers to contemplate disease, further arguing that texts are manifestations of historical reality. Whether or not literature actually *shapes* any growing critical awareness of the impact of disease is a question not asked by Bewell.

Nevertheless, Bewell, by reading representations of disease, successfully overturns the predominant reading of Romantic authors as entirely bound up with imperialist values. Together with historical documents, literary texts suggest that the British feared the colonial disease environment within its own boundaries, fearing more and more that colonial disease crossed geopolitical boundaries and infected England's own landscapes and people. Increasing anxieties about the spread of illness such as cholera among British lower class populations served to punctuate British fears about foreignness within its own national boundaries. Although the British justified its crusade to improve health conditions in colonial spaces, seeing health as a question of reforming land and air, colonial space actually functioned as a dark mirror for Britain's sentiments toward its own poorer environments. Representations of disease thus function to suggest Britain's fear of itself, suggested by Wordsworth's ruined cottage, and the diseased garden spaces of Keats' and Shelley's poetry. Bewell reads literary response to colonial disease as reflecting the critical impulse of authors who prophecy the destruction of England through disease. Bewell's study leaves questions regarding how the health of expanding empire could have possibly been justified and how England could have still articulated itself as superior to the colonized, given the devastating loss of lives to colonial disease.

A small chapter on tropical invalids begins to ask a question that the study does not answer: "Doctors began to speculate on a progressive deterioration of the European body in tropical regions" (279). Bewell does not attempt to explain this important mode of inquiry: how was the European body differentiated from the colonized body? How was the pervasive problem of illness answered in discourse? How could empire ever be justified as a healthy endeavor? Doctors began to speculate that the British body was particularly constituted to suit its own environment. Thus how was the British body distinguished from the colonial body to answer the prevalence of disease among British colonists and within Britain itself, where disease spread rampantly? Perhaps Bewell's next work will discuss how the critical impulse aroused by rampant illness was addressed and kept in check by those invested in imperial expansion. How could distinctions between European and colonized bodies be maintained or described in light of the ample evidence that au-

thors, soldiers, the British poor, and significant members of the British population had fallen prey to colonial illness? Like any persuasive account of historical phenomena, Bewell's interpretation of illness opens up further questions. ✱