The Burdens of Intimacy: Psychoanalysis and Victorian Literature
(review)

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dependent in Romola’s household; Rosamond declaring Will’s love for Dorothea—the fate of such sexual rivals suggests much more than “the impulse to transcend jealousy and aspire to some nobler bond” (147). If we are to refresh or deepen our understanding of Eliot’s thought in relation to her fiction, it needs to be done from some other perspective than that of elaborating the implications of what she has already so amply given us.

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Why is love in Victorian fiction so close to perfect torment? Why, once this fact is clear, do people come back for more? Bad love is Christopher Lane’s central subject, which he shows is hard to tell from good love. He has written a learned, scrupulous, passionate, intricate book on extreme feeling and its relation to the persistent ambiguities of masculine identity and sexuality. His introduction and afterword provide serious critiques of cultural studies and queer studies, respectively. His densely argued readings of major texts by Edward Bulwer-Lytton, Algernon Charles Swinburne, Olive Schreiner, Thomas Hardy, Henry James, George Santayana, and E. M. Forster repay careful attention with a sense of the threat desire poses to identity and of the strange pleasures of having this threat realized.

In Lane’s analysis, intimacy is burdened by the frequency of its failure: his authors suggest the impossibility of peaceful collective life or tranquil private mutuality or even an accepting relation to oneself. They find themselves looking to passionate attachments for a fulfillment and completion that not only never arrives but which threatens to produce its opposites—a lasting unhappiness, a fake reconciliation, a dissolution of the self. The failure of intimacy requires explanation, especially in a culture as prolific as Victorian England’s with calls for its success. Lane makes the problem even more complex by arguing not only that love is pursued in a way that blocks an achieved identity but that this blockage is the concealed goal. For example, the ambiguous sexuality of Bulwer-Lytton’s figure of the dandy fails to produce self-mastery and expresses Bulwer-Lytton’s “fascination with self-unmaking” (65).

But what explains this failure, this unmaking, this desire that misses its mark, and the desire to miss the mark? Lane takes psychoanalysis to be the only viable theoretical model, and the core of his version may be Jacques Lacan’s claim that being and meaning are radically at odds: as Lane puts it, “If we choose being, the subject disappears, it eludes us, it falls into non-meaning” (26). Identity rests on the absence of its own basis or foundation. One cannot find one’s true identity by turning away from social convention towards one’s deeper desire, for the contact between identity and desire shatters identity. Nor can one construct a non-essentialist identity on the basis of an inner life which, given the operation of sexuality, is fundamentally hostile to any identity construction. Lane cites Leo Bersani’s observation that sexuality may arise from the unbridgeable gap between “the stimuli to which we are exposed” (qtd. 30) and the ego’s (inadequate) capacity for binding those stimuli. If the ego is constructed as a reaction to forces it
cannot shape into an identity, then Lane is quite right to insist on his rigorously anti-
identarian approach to psychological issues. This leads him to careful treatments of male 
same-sex desire that nonetheless reject queer readings that see homosexual longing as 
the repressed truth of heterosexual convention.

There is good reason to see literature as the record of humanity’s emotional 
failures. We ceaselessly fail to exist through our definitions of ourselves, or to define 
ourselves into existence. Lane’s readings on such themes offer a richness and sophistica-
tion I cannot capture here. He is particularly good on the appeal of states of non-identity 
to his authors: he shows, for instance, Santayana tracing the sense of beauty to what sexual 
passion regards as non-procreative waste. At the same time, his work raises but does not 
answer some questions about Victorian studies and about the study of literature more 
generally. First, Lane’s psychoanalytic model emerges through a polarizing attack on 
historicist or cultural explanations for the traumas of love and being he describes. Must 
these be seen as exclusive? Lane rightly rejects notions of linear causality that see culture 
determining psychic life, but the result of this duel of origins, social versus psychic, is to 
encourage Lane to set up a linear determinism of his own, this one rooted in the uncon-
scious. Whatever happened to multiple causality and overdetermination? Lane is 
responding to the perennial critical debate between internal and external, aesthetic and 
historical, psychological and social factors, but the binary versions of this debate are 
dumb. Strong psychoanalytic models can incorporate social factors.

Second, does the contest of origins—capitalism versus the unconscious, and so 
on—prevent Lane from taking his analysis of intrapsychic forces as far as he might? Each 
chapter focuses on a different text, and it is a credit to Lane’s intensity and care that the 
various texts generate somewhat different models of intrapsychic life. For example, while 
the introduction sees sexuality as expressing a stimulus in continuous excess of the ego’s 
powers, the reading of Schreiner defines the ego’s limits as a residue of the child’s passive 
attitude toward the father. These models certainly overlap, but the second suggests that 
sexuality might be overwhelming only to an ego weakened by paternal relations in a 
particular psycho-historical context. If so, then the failure of identity is neither immanent 
nor inevitable, which would encourage further inquiry into the complex structure of our 
faulty egos, and into the possibility that, without delivering “identity,” they might give us 
far more pleasure.

This question of self-development leads to a third issue. Is the truth of sexuality 
the stupidity of liberation? Lane rejects Michel Foucault’s stress on ideological determi-
nants, but approves of Foucault’s contemptuous sarcasm in the off-cited pages of History 
of Sexuality Volume 1 toward those (like Herbert Marcuse and Wilhelm Reich) who used 
the repressive hypothesis to argue in favor of a liberation from repression. The contrast 
between these terms has been repeatedly dismantled by a range of scholars that includes 
Marcuse and Foucault. Lane is well aware of this. But he shows little interest in a further 
implication—“internal constraints” (225) do not block “identity” or “freedom” any more 
than they create it. Identity always emerges from non-identity, partially and erratically, as 
do liberation from repression and freedom from bondage. The best literary work on 
liberation has been theorizing freedom while trying to wean itself from communities or 
identities that act as a ground, stability, or presence. This generates complexities and 
contradictions towards which Lane is quite impatient, but there’s no speeding up the 
process. The major stakes of literature and criticism remain ones which were particularly
literal for the Victorians—emancipation from external and internal bondage, whose conjunction requires interminable analysis. Even if Lane focuses largely on constraints, his subtle readings offer challenges and resources for this ongoing project.

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In the United Kingdom, the opening of the twenty-first century has heralded a radical reconsideration of the relative positions of publicly funded and private healthcare in the curative regime of national life. The key concept in this volatile and often heated debate is that of a “mixed economy”—a public system of state-funded and -administered health care supplemented, and at times superseded, by the institutions of medical private enterprise. For some observers, the adoption of such a position represents a marked departure from previous practice in the public administration of health, and indeed a challenge to the socialist principle of a state-funded National Health Service, freely available to all citizens and implicitly egalitarian in its provision.

As Leonard D. Smith’s “Cure, Comfort and Safe Custody” reveals, though, the concept of a “mixed economy” is far from novel in British mental health care: indeed, it may be suggested that the two systems—public interest and private profit—have operated in parallel, occasionally with hostility, sometimes in productive cooperation, but more often than not in profound ignorance of each other, for a period far exceeding that enjoyed thus far by the British National Health Service. The legislators of the late-eighteenth century, with whose work this book is in part concerned, may have been more radical than their counterparts over one hundred years later.

Culturally, therefore, this is a valuable book, in that it treats not merely of individual case and institutional studies, but of an entire medical and psycho-medical culture which arguably influenced care elsewhere in the world. As Smith observes, much has been written in recent years on the “hardware” of mental health care—not merely the manacles, chains, strait waistcoats, and restrictive chairs which he succinctly discusses and illustrates in the latter portion of the book, but also the institutional buildings, similarly memorialised in “Cure, Comfort and Safe Custody”. Less, though, has been written on the more transient and often obscure aspects of care related to these physical artefacts—the social origins of asylum staff, the processes by which medical supervisors and governors were appointed and dismissed, the relationship of the staff to the governing body, and the relationships of asylums to each other, particularly where this involved the interface of private and public care. Smith covers this fascinating contextual field, often in great detail, but always with relevance and, indeed, acute observation. The transition from a regime based upon custodial attitudes to moral management, which by implication leads, eventually, to more recent medicalised and managerial discourses in health care, is crucial in its relationship to the greater field of medical history.