

**Danijela Lj. Petković<sup>1</sup>**

University of Niš

Faculty of Philosophy

English Department

<https://orcid.org/0000-0003-4112-1266>

## **“A GAUNT AND SHORN-HAIRED INVALID IN THE FINAL STAGES OF CONSUMPTION”: DISABILITY, VICTORIAN FEMININITY, AND CHILDHOOD IN BARBARA HAMBLY’S *THE LOST BOY*<sup>2</sup>**

The subject matter of this paper is the representation of tuberculosis-related disability in Barbara Hambly’s 2008 novelette, *The Lost Boy*. Relying on the research of social historians, medical professionals, and literary critics ranging from Katherine Ott, Helen Bynum, and Diane Yancey to Alex Tankard and René Dubos, inter alia, the paper examines said depiction against the background of the nineteenth-century medico-cultural treatment of “consumption”, and its implication in Victorian gender ideology and classism. The central argument is that *The Lost Boy*, as a gaslamp fantasy, depicts the physical and social aspects of Mary Watson’s disabling illness in fact-based, historically accurate detail, yet problematizes Victorian construction of the female “invalid” (some contemporary feminist interpretations of Victorian “invalidism” as empowering, too), thus offering a much more realistic – still poignant – perspective on disability and dying. *The Lost Boy*, it is argued, achieves this by intersecting Mary Watson’s disability with the complex mythology and reality of Victorian childhood, via Peter Pan who functions both as the character and the bearer of this mythology, as well as the link with Mary’s own, profoundly unhappy, childhood.

*Keywords:* Barbara Hambly, childhood, consumption, disability, femininity, Peter Pan, Sherlock Holmes

### **Introduction**

In direct opposition to the “[t]he silencing of women in the Holmes canon [which] is pervasive” (ALLAN and PITTARD 2019: 78), yet much like her husband, Mary Watson narrates, and participates in, the two fantastic adventures of Sherlock Holmes and Peter Pan that comprise Barbara Hambly’s gaslamp fantasy *The Lost Boy* (2008). As the narrator, moreover, Mary replicates the role John Watson performs in the canon, “work[ing] to secure Holmes’s position as exceptional” (ALLAN and PITTARD 2019:

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1 danijela.petkovic@filfak.ni.ac.rs

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69). In *The Lost Boy*, the iconic detective indeed arises as an exceptional human being – the slayer of monsters; the rescuer of kidnapped children; the savior of “the Neverlands” [sic!], and, finally, no less significantly, the man who can change his mind on the subject of women and their abilities. Hambly’s take on Sherlock Holmes has him solving the disappearance of Wendy, John and Michael Darling, the famous child characters from J. M. Barrie’s infamous play/novel; in the second half of the novelette, at Peter Pan’s request, Holmes rescues the kidnapped human boy, Bobbie Lewensham, from “a pocket of darkness in the curtain that separates the real world and the Neverlands” (CAMPBELL and PREPOLEC 2008: 39). Holmes achieves this having battled with the nightmarish Dark Knights, marked by “glittering steel blades coming straight out of [...] wrist, blades that whacked back and forth like saw-toothed scissors” (CAMPBELL and PREPOLEC 2008: 40), and the evil wizard called Night Crow. In addition to painting Holmes as a traditional hero, Hambly’s novelette supplements his status as a “doyen of logic, reason and rationality” (ALLAN and PITTARD 2019: 79), rather than challenging or deconstructing it, as one would, perhaps, expect from the story that has Sherlock Holmes facing “the dark forces” (CAMPBELL and PREPOLEC 2008: 9). As Hambly’s narrator states, “Mr. Holmes’ logic and studies extended far beyond what people like John [Watson] — bless his kindly, literal heart! — regard as the Real World” (CAMPBELL and PREPOLEC 2008: 24). This revelation – which Mary learns from another woman, Holmes’s long-suffering landlady Martha Hudson – is arguably in keeping with the original character, “the cognitively exceptional detective” (BARKER and MURRAY 2017: 185): “he had never, even when I first met him, been a close-minded man” (CAMPBELL and PREPOLEC 2008: 34). What Hambly challenges with this story, thus, is the limiting of Sherlock Holmes’s canonical intellect to the material world, as well as his views on women: in the end, the detective recognizes that not valuing and interacting with women has, in fact, been his “loss” (CAMPBELL and PREPOLEC 2008: 45).

Crucially for the purposes of this paper, however, Mary Watson is not only a female version of John Watson, but also a disabled person in the terminal stage of “consumption”. While she does not dwell upon them, apart from an occasional remark offered as an explanation, her illness, the related disability, and fast-approaching death, do, in fact, inform the novelette. The two dream adventures that Mary witnesses and takes part in – ostensibly mobilized for Holmes to change his attitude to women and demonstrate just how open-minded he is – also serve as a (dying) wish fulfillment fantasy for Mary, as she is finally allowed to play with the boys: “It’s been good to have an adventure with you [Sherlock],” I said. “I always wanted to. They never let girls” (CAMPBELL and PREPOLEC 2008: 45). As in George MacDonald’s *At the Back of the North Wind* – the 1871 children’s classic in which MacDonald meditates on death and God’s goodness via the consumptive boy being taken on journeys by the North Wind/Death – Mary’s dream adventures, moreover, run parallel to the worsening of her condition in real life. At the end of the second one, when she tells Holmes she will be returning to John, “at least for a short while”, Holmes’s face is eloquent enough: “In his face I saw his knowledge, of how short that time would be” (CAMPBELL and PREPOLEC 2008: 45). MacDonald’s Diamond dies happy; Mary, too, seems comforted by revisiting the Neverlands, transformed into a schoolgirl she once was – though Hambly, writing in the twenty-first century, does not

infuse either childhood or terminal illness with the Victorian qualities of heightened spirituality and special insights into God's plan, despite insistently associating adult female disability with childhood. Before examining how Mary Watson's illness, disability, and dying overlap with both mythologized and historical Victorian childhood, and the ambiguous figure of Peter Pan, some context on disability and "consumption" is needed. The central argument of the paper is that *The Lost Boy*, in keeping with the demands of gas-lamp fantasy as a subgenre of fantasy and historical fiction, depicts the social and physical aspects of Mary Watson's "consumption" in historically and medically accurate detail, while simultaneously deploying fantasy, primarily Peter Pan, to address the intensely (un)real subject of death. Hambly's accurate depiction of Mary Watson's disabled and terminal state, moreover, is inevitably positioned against the dominant Victorian discourses and representations/expectations of decorous female invalidism.

In order to outline the complex background of the nineteenth-century construction, interpretation, treatment and the reception of the illness then known as consumption, the next section of the paper relies on the research of social historians, medical professionals, and literary critics ranging from Katherine Ott, Helen Bynum, and Diane Yancey to Alex Tankard and René Dubos, among others. As all other social and cultural phenomena, the medico-cultural treatment of consumption and the correlated phenomenon of "invalidism" in Victorian Britain, moreover, were heavily and often contradictorily implicated in its gender ideology and classism, as evidenced by the work of Bram Dijkstra and the explicitly feminist literary critics such as Maria H. Frawley and Athena Vrettos. The paper utilizes their insights in the following sections, as well: here it should be noted that, just like Barbara Hambly, they are all critical of the Victorian construct of the female "invalid". Finally, the interpretation of Hambly's novelette will have to touch upon some contemporary feminist interpretations of Victorian invalidism as empowering, primarily Katherine Byrne's "rebellion hypothesis" which sees invalidism as the means of assertion, or even liberation, deployed by the disenfranchised Victorian women. Examining the novelette against these overlapping contexts, the paper argues that *The Lost Boy* problematizes both the Victorian construction of consumption and the female invalid, as well as contemporary optimistic interpretations, resulting in a realistic, convincing and poignant portrait of female disability and incurable illness in its terminal stage. A significant portion of that poignancy, as will be demonstrated in later sections, is due to Hambly's intersecting Mary Watson's disability with the complex mythology and reality of Victorian childhood, via Peter Pan who functions both as the character and the bearer of this mythology, as well as the link with Mary's own, profoundly unhappy, childhood.

### Consumption and disability

A brief note on terminology regarding disability is needed first. Throughout this paper, Mary Watson is referred to as a disabled person, rather than a person with disability. The argument in favor of the latter phrase, insisted upon by some disability activists, is that it emphasizes the person, rather than disability; the reason for my preference for the phrase "disabled person" lies precisely in how effectively it conveys the disruptive influence of the illness on the totality of Mary Watson's body, mind, and life – or any historical consumptive's bodies, minds, and lives, for that matter. Yet neither of these phrases would have been recognized in the historical setting that Hambly masterfully suggests with a

few scattered remarks and details. Jennifer Esmail and Christopher Keep, for instance, warn that “the Victorians did not use the term disability as expansively as we use it today”. Victorian categories were different, Esmail and Keep continue, and organized around “the pathologizing notion of ‘fitness’ – whether fit to work, to be educated, to have legal rights and responsibilities, or to reproduce” (2009: 46). A more widely used term was “invalid”, but, as Maria H. Frawley elaborates in her study, “the invalid” was primarily a social role, “scripted in various ways by society and inflected by other dimensions of identity, chief among them gender, class, nationality, and religious belief” (2004: 4). Nonetheless, as Alex Tankard argues, “[n]ineteenth-century consumptives were disabled people in the modern sense, even if they had yet to develop a politicised language to protest social injustice” (2018: 27). Hambly’s depiction of Mary Watson’s consumption and her disabled state is in line with Tankard’s claim. While in *The Lost Boy* Mary Watson does not engage in any anachronistic identity politics that would center on her “disability”, she is undeniably disabled by her illness, both physically and socially, in the sense that she is being progressively stripped of the attributes and rights of adulthood (however limited those rights may already be for a Victorian woman), and is reverting to her imaginative, abused, and equally rightless childhood self. Even her use of the term “invalid”, in the phrase quoted in the title of this paper, does not suggest the social role Frawley examines, but rather the physical decline brought about by the illness – and, likely, the medical treatment as well.

“Consumption” too, requires some clarification. Throughout the nineteenth century, according to Katherine Ott, any illness “that involved weight loss, fever, and lung lesions, indicated by coughing and expectoration” would be labelled “consumption” or “phthisis” (1996: 9), including what we now know to be “silicosis, histoplasmosis, emphysema, and lung cancer” (2-3). Although the two terms are not entirely interchangeable, nowadays, “consumption” is retroactively identified as tuberculosis. Just like “consumption”, however, “tuberculosis” is a single term which covers a whole range of ailments:

Tuberculosis is an easy shorthand for pulmonary tuberculosis, from which most of the tuberculous suffer, although the disease is horribly ubiquitous; besides the lungs it destroys the tissues of most of the body’s systems— central nervous, circulatory, lymphatic, gastrointestinal, genitourinary as well as the bones, joints, and skin. [...] Tuberculosis can be a quick killer, especially in its meningeal form in the brain, but usually it isn’t. It carries out its destructive tendencies over a much longer period, often as the body’s own defences wane (BYNUM 2012: xiv).

The disease, moreover, is not only “horribly ubiquitous” in the human body, but has also been so in the human population ever since the Neolithic Revolution. The Neolithic Revolution, the shift from a hunter-gatherer lifestyle to the settled one centered on agriculture, included the domestication of animals, which is when “the seeds of disease were sown. [...] Cattle provided the pathogen pool with tuberculosis and viral poxes like smallpox” (PORTER 1999:18). Unsurprisingly, therefore, “[b]ones of Egyptian mummies dating from 2400 B.C. show evidence of decay caused by *Mycobacterium tuberculosis*” (FINER and ALCAMO 2003: 8); “Babylonian tablets written more than two thousand years ago describe symptoms of the disease” (YANCEY 2008: 15). According to WHO, “[i]n 2022, an estimated 10.6 million people fell ill with tuberculosis and 1.3 million people died: worldwide, TB is the second leading infectious killer after COVID-19 (above

HIV and AIDS)”: in fact, tuberculosis usually follows HIV infection. It is estimated that a third of the world’s population – more than two billion people – are now latently infected with TB. At its height in Europe and the USA, in the nineteenth century, “nearly 4 million people [...] died [...] in England and Wales between 1851 and 1910. Three-quarters of those from tuberculosis of the lungs” (CLARKE 2019).

Tuberculosis, especially in its last stage, the “active disease” following primary and latent infection (YANCEY 2008: 48), is profoundly disabling. Most obviously, “[a] hacking cough exhausts and causes soreness in the ribs. Chest pain is not always a prominent feature, but infected pleura [...] do hurt a lot” (BYNUM 2012: xxiii). The sick person struggles to breathe, to walk, experiences insomnia, night sweats; the loss of weight is always present and dramatic. Kafka, for instance, was 6’1” and weighed 88 pounds when he was admitted to Doctor Hoffmann’s sanatorium in 1924 (GRANDA 2024). (This is why the term “consumption” was appropriate and used for so long: the illness de-fleshes and consumes the sick person.) Another famous consumptive, Frédéric Chopin, wrote about his inability to walk the stairs: “I gasp and cough [...] I have not spat blood since the day before yesterday, my legs are swollen [...] I can’t go upstairs, I suffocate” (YANCEY 2008: 14). It is recorded that in a sanatorium, in 1949, George Orwell was “too feverish to go over to the X-ray room & stand up against the screen” (BYNUM 2012: xxvi). In Kafka’s body, moreover, tuberculosis had spread to the larynx, and the novelist was prescribed the “silence cure” – in his last days Kafka communicated via hand-written notes, and tears (GRANDA 2024). This, too, was not unique: “sometimes the voice could be affected before severe lung disease was evident. Hoarseness could progress to complete loss of voice as the ulceration deepened into the vocal cords” (BYNUM 2012: 93).

Tuberculosis can thus leave a person mute, unable to walk, and nearly blind (there is ocular tuberculosis, too), but it is not only the illness that is multiply disabling: the medical treatment of “consumption” throughout the nineteenth century was disabling as well. “[T]he most widely prescribed treatment for tuberculosis, even after Koch’s discovery, remained the advice of Galen (rest, sea travel, and fresh air)” (FINER and ALCA-MO 2003: 21). In addition to being out of reach for the poor, who comprised the majority of TB patients, this treatment was largely ineffective. Yet, as the century progressed, other, more invasive and damaging treatments arose, like “[i]njecting sufferers with gold salts [...] Taking creosote, a derivative of coal tar commonly used as a preservative and disinfectant [...] Thoracoplasty, the surgical removal of part of a patient’s ribs, was popular for a time, as was the notion of treatment in a TB sanatorium, which swept the medical community beginning in the 1880” (YANCEY 2008: 24), although the people seeking cure in sanatoriums “died at the same rate as those who remained at home” (26). But the key medication in the treatment of consumption was opium. It was used to such a degree that “[i]t is probable that every consumptive became, in some measure, an opium addict” (DUBOS 1987: 64).

### Consumption in the nineteenth-century culture: gender and class

So far, the focus has been mainly on the physical aspects of consumption/tuberculosis, making it clear that both the illness and its nineteenth-century treatment are painful, potentially lethal, and multiply disabling. But that is only one side of it. Another is the cultural reception, interpretation, and the construction of tuberculosis, which un-

derwent significant changes only in the late 1880s, several years after Robert Koch's discovery of the cause of tuberculosis in 1882. For the greater part of the nineteenth century, "consumption" was heavily romanticized, and made fashionable. Such a construction of tuberculosis was not limited to England, but was found also on the Continent, especially in France, and across the Atlantic, in the United States. Alexander Dumas, for instance, wrote in his memoirs that "[i]n 1823 and 1824 it was the fashion to suffer from the lungs; everybody was consumptive, poets especially; it was good form to spit blood after each emotion that was at all sensational, and to die before reaching the age of thirty" (DUBOS 1987: 58-9). Dying before thirty is exactly what John Keats did, and what Byron, who had also been infected, aspired to do. Ever the trend-setter and fashionista, Byron is recorded to have told Tom Moore "I should like to die of consumption [...] the ladies would all say, 'Look at that poor Byron, how interesting he looks in dying!'" (YANCEY 2008: 18).

Despite Byron's in character obsession with his looks, in men, the illness was primarily associated with genius, intellect, and creativity. The specific mental state supposedly caused by consumption was even named "*spes phthisica*, [and it] included heightened creativity, constant hopefulness about recovery and the future, buoyancy and euphoria, and an increased sex drive" (OTT 1996: 27). The romanticizing of tuberculosis, moreover, had a significant class bias: though nothing could be further from the truth, consumption was regarded as "the aristocratic decline, inspiring works of art and leading painlessly to an ethereal release of the soul among the falling autumn leaves" (DUBOS 1987: 66). In reality,

[i]n some British towns at the beginning of the twentieth century, between 25–33% of deaths from tuberculosis occurred in Poor Law institutions. The letters of consumptive artists, writers, and musicians demonstrate that even middle-class consumptives could find themselves under-educated, unemployed, and finally destitute after periods of prolonged illness: looming over traditional notions of consumption as a source of spiritual enlightenment and artistic inspiration was the shadow of the workhouse infirmary (TANKARD 2018: 27).

Poverty as the looming threat associated with tuberculosis was not reserved for the nineteenth century or the beginning of the twentieth: in his sanatorium bed in the late 1940s, dying Orwell, for instance, was constantly thinking about his next novel, worried about his financial future: "The only thing that worries me about my financial position is the possibility that I might become like some of the people here, i.e. able to stay alive but unable to work" (BYNUM 2012: xxvi). Testimonies and facts like these shed a different light on incessant creativity supposedly proceeding from *spes phthisica*.

The supposed effects of consumption, moreover, were gendered. While consumption-induced genius was culturally attributed to (upper-class) men, the illness in women from higher classes was associated with beauty (BYNUM 2012: 94). The material, corporeal realities again clash with the cultural constructs, since "[i]n women the demands of menstruation and child-bearing increase the toll of tuberculosis" (BYNUM 2012: xix). Nonetheless, the visible, physical effects of consumption overlapped with the ideal Victorian femininity to such a degree that Bram Dijkstra coined the term "the cult of the consumptive sublime" (1988: 29) to refer to the cultural celebration of the emaciated, pale, confined, supposedly highly spiritual woman, who may or may not be actually dying

from tuberculosis.

Unsurprisingly, it was the nineteenth-century medical doctors who contributed significantly to the “the Victorian [...] equation of femininity and sickness” (FRAWLEY 2004: 198) in general. Regarding consumption specifically, Dr Elizabeth Bigelow, for instance, wrote in her 1876 senior thesis that “[c]onsumption is the most flattering of all diseases” because it produces “bright eyes of pearly whiteness, transparent skin... hectic flush [which] give an unnatural beauty to the countenance ...” (qtd. in OTT 1996: 10) – “a lily on [the] brow and a fading rose on [the] cheek”, to paraphrase Keats’s famous description of the dying, feminized knight in “La Belle Dame Sans Merci”.

Tuberculosis apparently amplifies the conventions of Victorian ideal femininity, but not merely in terms of appearance. Since “the middle-class Victorian woman was represented as highly spiritual, a creature of disinterested love and nurture, the moral center of the home and of society as a whole” (KRUGOVOY SILVER 2002: 9), her de-fleshed and physically incapacitated body is meant to be the visible expression of these qualities, and it is meant to remain in the domestic space: “invalidism becomes the logical extension of [...] domesticity” (VRETTOS 1995: 34). This insight is expressed in *Wuthering Heights*, in the ominous scene where dog-bitten and incapacitated Catherine Earnshaw is wheeled in front of the fire: an intimation of the future that awaits her as Mrs. Linton. Emphasizing the power of the “domestic ideology, medical understanding, and the iconography of the period”, Maria H. Frawley even hypothesizes that these “ensured that most middle-class women in the nineteenth century would not have associated being bedridden and confined to home as compromising their femininity” (2004: 7-8). The protagonist in Silas Weir Mitchell’s novel *Characteristics* (1891) further normalizes the link between invalidism and femininity when he states that “[t]o be ill is a feminine verb, and agrees best with that gender” (qtd. in VRETTOS 1995: 89). Such a pervasive association of illness and disability with women, moreover, bears on the concept of masculinity, resulting in the feminization of “all disabled figures” (Rosemarie Garland Thomson qtd. in TANKARD 2018: 15), which in turn reinforces femininity-as-illness-or-disability. Thus, in her study on disability and masculinity in the mid-Victorian novel, Karen Bourrier claims, “[t]he crippled [sic!] male embodied traditionally feminine virtues” (2015: 2); Katherine Byrne also notices that “the classic literary consumptive is inevitably a woman in the Victorian era”, whereas consumptive men represent “usually emasculated exceptions” (qtd. in TANKARD 2018: 15).

The cultural romanticizing of tuberculosis started waning only in the last decade of the nineteenth century, partly due to Robert Koch’s discovery, in 1882, that tuberculosis is caused by *Mycobacterium tuberculosis*, and that is a highly contagious disease, and partly because of the rise and the popularity of eugenics which attempted to provide the solution to the multiple crises affecting the Empire. Athena Vrettos specifies that “issues of military strength, world competition, national growth, and the defense of national borders translated into anxieties about physical strength, athletic prowess, evolutionary progress, and the defense of biological boundaries against disease” (1995: 125). In response to all this, “eugenics became obsessed with the elimination of ‘defectives,’ a category which included the ‘feeble-minded,’ the deaf, the blind, the physically defective, and so on” (DAVIS 2006: 7). Alex Tankard states that “consumptives [...] [were] maligned

in late-century eugenic discourses” (2018: 5); as time passed, the discourses turned into invasive and repressive policing that denied the people suffering from tuberculosis basic human and civil rights (YANCEY 2008: 20; TANKARD 2018: 14).

While Mary Watson in the Holmes canon died between 1891 and 1894, Hambly’s version, though historically accurate, stays silent on the then rampant eugenics discourses, focusing instead on developing the associations between adult female disability and (mythologized as well as historical) Victorian childhood.

#### Mary Watson’s Disability, Femininity, and Childhood/Peter Pan

It is against the conflicting constructs and realities of consumption, disability, class, and femininity, merely touched upon in the previous subsection, that one must read Hambly’s portrait of Mary Watson, the consumptive. As stated already, *The Lost Boy* depicts the physical aspects of Mary’s illness in historically and medically accurate detail, thereby problematizing the nineteenth-century romanticizing of consumption, and the middle-class female “invalid” as the Victorian near-ideal woman. Thus, early in the novelette there is an allusion to that inescapable companion of consumptives throughout the nineteenth century, opium: “The medicine I was taking then was bitter and strong. Though it gave me the sleep I needed, it also sent dreams, more vivid than I had known in adult life” (CAMPBELL and PREPOLEC 2008: 24). Moreover, instead of consumption heightening domesticity, strengthening gender roles, and amplifying such feminine attributes as ethereal beauty and spirituality, *The Lost Boy* provides a more realistic perspective on Mary Watson’s illness and the related disability. Domesticity, stripped of sentimentality and accurately defined as the “burden of running a house” is gone for the middle-class female “invalid”, unlike confinement; the middle-class home also deviates from cultural norms and expectations, as it is emphatically not the place where the ideal woman “is protected from all danger and temptation” (RUSKIN 1865: 21), but rather the setting for the slow, and expensive, process of dying. In the home disordered by the illness nothing is safe anymore, including the gender roles – a man runs a house and takes care of the sick: “John was nearly frantic, between the costs of caring for me, and fear that I wouldn’t pull out of it, and the sheer insanely mundane burden of running a house” (CAMPBELL and PREPOLEC 2008: 29). Here it is worth noting that John Watson is not only an unusually loving and caring husband to an ill and disabled wife, but also a medical doctor caring for an invalid, the tableau which conveys graphically that “the invalid almost by definition signified medicine’s inability to ensure recovery” (FRAWLEY 2004: 5). Despite the consumptive look being fashionable for the greater part of the nineteenth century, furthermore, the physical reality of the illness is conveyed by Mary’s apt phrase quoted in the title of this paper: in the last stage of consumption, she is a “gaunt, shorn-haired invalid” (45), and not a white-skinned, red-cheeked, pearly-eyed beauty that Dr Bigelow writes about in her thesis. Finally, in opposition to Katherine Byrne’s contemporary reading of illness as “one of the few means of self-assertion available to the disenfranchised” – the interpretation which Janet Oppenheim terms the “rebellion hypothesis” and refutes (FRAWLEY 2004: 198) – in Hambly’s novelette consumption is a disruptive force in the lives of two otherwise happy and content people and not “a means by which women could resist their traditionally enforced roles and subvert patriarchy” (Katherine Byrne qtd. in TANKARD 2018: 15). In *The Lost Boy*, any subversion of gender roles via the illness and disability is



accidental, necessitated by the material realities of consumption, and not a strategically deployed weapon on the part of the repressed Victorian woman.

Hambly, moreover, associates Mary's disability with childhood, most obviously through the figure of Peter Pan, who serves as a link with Mary's own childhood, and as the product, and the subversion, of the Victorian/Edwardian cult of the child. On the surface of it, this is far from a unique narrative choice on the part of the authoress: the general "cultural association of disability with dependency, childlikeness, and helplessness", as Fine and Asch point out, "overlap[s] with cultural expectations of femininity [...] a disabled woman is redundantly fulfilling cultural expectations of her" (WENDELL 1996: 62). Yet Hambly's depiction of Mary's disabled state as overlapping with her childhood is more complex, and does not necessarily, or simply, affirm the cultural expectations surrounding femininity – or childhood, for that matter. Mary's illness, ostensibly via opium given her as the treatment, does bring her back to her childhood marked by the lack of autonomy and no agency, as well as intense imagination and the desire for, or closeness with, death – both embodied by Peter Pan. Yet, Hambly makes it clear that heightened imagination and closeness with death – just like hyper-spirituality, sensitivity to the Word of God ("from the lips of children and infants..."), or "an original openness to being" (KENNEDY 2006: 4), variously attributed to children across the centuries and discourses – are not the mystical and timeless properties of childhood in general, but the results of adult interpretations, adult politics, and, in the case of closeness with death, adult cruelty to children. Thus, in a relatively short narrative, Mary emphasizes the abuse she suffered as a child in Mrs. Clegg's girls' school by referring to it several times.

As already established, Mary's dream adventures run parallel to the worsening of her condition in real life. The more severe Mary's illness is, the more drugged she is, the more intensely she dreams, and the younger she gets in those dreams. In the first dream adventure narrated in the novelette, where she witnesses Holmes's encounter with Peter Pan and Gallipoot, "the Thing Cold and Empty", Mary still looks like an adult. In the second one, centered on rescuing the titular lost boy, Bobbie Lewensham, Peter comes to Mary, demanding that she take him to see Holmes: "as he pulled me to my feet I was as we all are in dreams, perfectly healthy and much younger than in real life" (CAMPBELL and PREPOLEC 2008: 30). But there is a detail that reveals Mary is not only much younger, but is brought back specifically to that period when she was so abused she came close to killing herself – "my nails chewed off short. (I'd quit biting them the minute I left Mrs. Clegg's)" (30). This is also the version of Mary Watson that Holmes cannot recognize. "Holmes glanced across at me, the line between his brows telegraphing his uncertainty. In the shadows he had thought he'd recognized me, but sitting on his sofa before the fire – where so many times I'd sat in my adult life, all dressed up in proper gray delaine with a corset, bustle and husband – I could see he didn't know why he'd thought so, or who he'd imagined I might be" (CAMPBELL and PREPOLEC 2008: 31-32). The illness that is disabling and killing Mary is also slowly taking the most visible attributes of adulthood and femininity: the decorum of long hair, the bustle, the corset, and a husband, and not merely a caretaker. What Mary gets as a temporary recompense for these losses is bittersweet freedom from the conventions of Victorian femininity in an imaginary realm: being transformed into a dream-child, an able-bodied young girl who finally gets to par-

participate in the boys' adventures, and some sense of agency through narration. While none of these are enough to counteract the terror of dying, they do provide some comfort, and strengthen Mary's heart before death.

It is important to note, however, that Mary's apparent return to her childhood self is not enacted in the realm of opium-induced dreams and imagination only; on the physical level, and in real life, her body, consumed by the illness, is getting lighter and smaller; her hair is short; she is dependent on the fully functioning adult for some comfort and wellbeing – and is even served hot cocoa in the evening. Yet she is still, undeniably, an adult, as evidenced by her narration, *inter alia*. The illness and the ensuing disability thus problematize not only gender roles, gender assumptions, and the promises of medicine, but also the cultural mythology of adulthood as the period of competence and autonomy in which the deficiencies of childhood are supposedly overcome and forever left behind. (Interestingly enough, this is also the perspective on adulthood one finds in Barrie's *Peter Pan*, without the consumption.) They also reveal how much the modern concept of adulthood relies on, and reinforces, unexamined ableism.

From the very start of *The Lost Boy*, moreover, it is evident that Mary Watson is not only disabled by her illness, but is in fact dying – and she is aware of it, too. It is here that the full significance of Peter Pan comes into play, as the connection of Peter and death is already present in Barrie's "terrible masterpiece", although the interpretations of this connection vary significantly. While Jacqueline Rose believes "Peter Pan touches, or belongs, on the edge of the difference between boys and girls, and of their fears, just as he does on the death of the child" (1984: 28), Peter Hollindale sees Peter as the embodiment of "death-in-life tragedy of perpetual youth" (1995: 21). Susan Mansfield, conversely, states that Peter Pan "is Death, who empties the nurseries like a plague" (qtd. in GAVIN and HUMPHRIES 2009: 50). In the novel, however, there are enough suggestions to support the claim Peter Pan is a dead child, rather than death itself. "Wendy, I ran away the day I was born. [...] I ran away to Kensington Gardens and lived a long long time among the fairies" (BARRIE 2010: 32). The child going away with fairies is an obvious euphemism for death: one of Arthur Rackham's haunting illustrations for *Peter Pan in Kensington Gardens* (1906) expresses this perfectly, depicting the fairies being chased by Peter, and empty-eyed Peter dressed in a long white nightgown, wearing the facial expression from Victorian post-mortem child photography. Moreover, Peter is accompanied by the Lost Boys, who are apparently dead, too: "They are the children who fall out of their perambulators when the nurse is looking the other way. If they are not claimed in seven days they are sent far away to the Neverland to defray expenses. I'm captain" (BARRIE 2010: 35). Even the famous Disney musical (1953), contains a number with a refrain, "Think of all the joy you'll find/When you leave the world behind". In a program note for the 1908 Paris production of *Peter Pan*, Barrie explicitly stated "of Peter you must make what you will – perhaps he was a boy who died young and this is how the author perceives his subsequent adventures" (GAVIN and HUMPHRIES 2009: 39)<sup>3</sup>. The adventures, it must be noted too, are all centered on killing and dying – even breathing, in Neverland, kills adults – culminating in the famous claim made by Peter moments away from drowning: "To die will be

3 As it is widely known, there were many dead boys in Barrie's life – his brother David, who drowned, two days before his 14<sup>th</sup> birthday, in 1866; George and Michael Llewelyn Davies, Barrie's adopted sons, dying young in 1915, and 1921 respectively – Michael also by drowning.

an awfully big adventure” (BARRIE 2010: 110).

*The Lost Boy* leans on, and continues, Barrie’s vision of Peter as a boy who died young, and is therefore the harbinger of death. Mary Watson’s first acknowledgement of her terminal state, for instance, appears in connection with her childhood companion, who characteristically disrespects the many boundaries that govern living children’s and adult lives: “We [Meg Darling and Mary Watson] were both certain that it was possible for him to cross through the film that separates the Neverlands from the damp chilly world of girls’ schools, and account-books that don’t add up, and bleak London streets, and *knowing one is going to die*” (CAMPBELL and PREPOLEC 2008: 22, italics added). In fact, in the second adventure, in which Mary appears as a young girl, Holmes realizes that she is free in the Neverlands precisely because she is so close to death.

But Peter Pan is an ambiguous character, partly because the death he signifies is turned into an adventure, and partly because of the adventures themselves: hence the eternal boy’s being explicitly identified as the reason Mary did not kill herself, when she was “seven or eight”. Highlighting the callousness and indifference with which historical children of all classes were treated in the nineteenth century<sup>4</sup>, Mary explains: “it’s a mistake adults make, to think that children who are sufficiently unhappy don’t want to try to end their own lives. Mostly we just don’t know how. That I’d lived through Mrs. Clegg’s ideas of how to operate a girls’ school was entirely because I learned to dream, and in those dreams I’d met Peter Pan” (CAMPBELL and PREPOLEC 2008: 22). As a young girl and an equally unhappy fellow pupil at Mrs. Clegg’s, Meg Darling (Speedwell, at that time), too, disappears in Kensington Gardens, and is discovered two days later: “And Meg had told me, that she had been in the Neverlands, with Peter Pan, for what seemed to her then to have been many weeks. She was never quite the same after that. Happier, as if she carried in her heart the assurance that things would all come right in the end” (24). In her final conversation with Sherlock Holmes, too, Mary states confidently that “Peter will look after me, and go with me the first part of the way. It is the one thing he always does” (45). In addition to the death-taming, heart-strengthening adventures Peter offers unhappy children of all ages in the Neverlands, in *The Lost Boy* he apparently accompanies the newly-dead, or those “who are just born, being dead”, through the Neverlands to some other, unspecified but seemingly non-frightening realm. In a nod to the Victorian crisis of religious belief, and expressing the twenty-first century skepticism, Hambly stops here, at this vague suggestion that things would all come right in the end. The spirituality forcefully attributed to children throughout the nineteenth century, the comfort of religion or afterlife, or the belief in a just God, are not mentioned. There is illness, there is death, and there is Peter who keeps the newly-dead company for a while: dying is an awfully big adventure, and nothing more.

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4 Despite belonging to middle or upper class, all the children in the novelette are abused, lonely, and unhappy. In addition to Mary and Meg, the lost boy, Robert Lewensham, the son of the Earl of Wylcourt, apparently lives in severe isolation: “Bobbie never visits anywhere,” replied Peter promptly. “He goes to school in the city, and when he’s at his home he’s alone” (CAMPBELL and PREPOLEC 2008: 33). It is revealed that Sherlock Holmes, too, spent a significant portion of his childhood “locked in his room for seeing too clearly, and for making deductions about his elders” (39).

## Conclusion

In *The Lost Boy*, Barbara Hambly depicts Mary Watson's experience of terminal, disabling consumption as overlapping in several crucial physical and social aspects with her childhood as the period when she had no autonomy, and no agency apart from the vivid imagination and the desire for, or closeness with, death – both embodied by Peter Pan. By transforming the “consumptive invalid” into a healthy dream girl who finally gets to participate in the boys' adventures, Hambly emphasizes adult female disability contradictorily as the state of childlike helplessness necessitating the fantastic comfort of “the Neverlands”, and the period of apparent, and much-desired, liberty from the restrictions of Victorian femininity. In the novelette, therefore, the illness and disability subvert not only gender roles and gender assumptions, but also the concept of adulthood as competence and self-rule in which the deficiencies of childhood are overcome and forever left behind – revealing, just like Peter Pan himself, that the boundaries between all of these are much messier and more easily crossed than it seems.

Combining historical and medical accuracy with the potent death symbolism surrounding Peter Pan, *The Lost Boy* ends up creating an unsentimental, bleak, yet realistic view of terminal illness and disability, which is inevitably positioned against the dominant nineteenth-century discourses romanticizing both tuberculosis and femininity-as-illness, as well as Katherine Byrne's contemporary feminist interpretation of Victorian female “invalidism” as empowering. Finally, by choosing the “consumptive invalid” for the narrator, *The Lost Boy* appears to align with the broad goal of disability studies, in that it “identifies agency in the way the suppressed and marginalized disabled voices dissent from hegemonic narratives” (BRADSHAW 2016: 2). Mary Watson's tuberculosis-related disability, including, but not limited to, opium addiction, has her explicitly and multiply dissenting from the Victorian discourses on “the female of the species”, to which both the canonical and Hambly's version of Holmes initially subscribe; her dissent from the hegemonic narratives of decorous and pious female “invalidism” is noticeable, as well. Nonetheless, the potential of Mary's agency – the creation of counter-narratives which, while deploying fantasy, still treat illness, disability, and dying in a more honest and realistic manner – is arguably overshadowed by Mary's proximity to death. Dying may be an awfully big adventure, but “death closes all”.

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Danijela Lj. Petković

„ISPIJENI INVALID KRATKO OŠIŠANE KOSE, U POSLEDNJEM STADIJUMU SUŠICE“: INVALIDITET, VIKTORIJANSKA ŽENSTVENOST I DETINJSTVO U IZGUBLJENOM DEČAKU BARBARE HEMBLI

Rezime

Tema rada jeste predstavljanje invaliditeta povezanog sa tuberkulozom u noveli Barbare Hembli *Izgubljeni dečak* iz 2008. Oslanjajući se na istorijska istraživanja Ketrin

Ot, Helen Bajnam i Aleksa Tankarda, između ostalih, rad najpre daje istorijski pregled medicinsko-kulturnog tretmana „sušice“ u devetnaestom veku, i razmatra ulogu ove bolesti i invaliditeta u viktorijanskoj rodnoj i klasnoj ideologiji. Centralni argument rada jeste da *Izgubljeni dečak*, kao tzv. „gaslamp fantasy“, koja predstavlja kombinaciju fantastike i istorijske fikcije, prikazuje fizičke i društvene aspekte bolesti Meri Votson realistično i istorijski tačno, čime nužno problematizuje viktorijanski konstrukt ženskog „invalida“, kao i pojedine savremene feminističke interpretacije viktorijanskog „invalidizma“ kao osnaživanja žena. Novela uspeva da ponudi mnogo realističniji – ali i dalje dirljiv – pogled na invaliditet i umiranje, što *Izgubljeni dečak* postiže ukrštanjem invaliditeta Meri Votson sa složenom mitologijom i stvarnošću viktorijanskog detinjstva, preko Petra Pana koji funkcioniše i kao lik, i kao nosilac ove mitologije, ali i kao veza sa Merinim, duboko nesrećnim, detinjstvom.

*Ključne reči:* Barbara Hembli, detinjstvo, invaliditet, Petar Pan, sušica, Šerlok Holms, ženstvenost