Infection as Resistance: 
Medical Discourse, Indian Courtesans, 
and Flawed Memsahibs in 
Flora Steel’s Colonial Fiction 

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I

DURING THE MID-NINETEENTH century, successive epidemics of “Asiatic cholera” swept Europe. Death by this “Indian Plague,” which reached Britain in October 1831 (resurfacing in 1848 and 1854), was dramatic, sudden, and swift. Healthy and alive in the morning, a cholera victim could be dead by the evening, having passed through the agones of cramps, vomiting, and diarrhea. The expansion of British colonialism, marked by the spectacular displays of the Great Exhibition of London in 1851, had ironically provided the very circumstances by means of which the disease had travelled westwards from India in 1817 (see Curtin). For Charlotte Brontë, in Shirley (1849), cholera was intensely racialized: “The future sometimes seems . . . like some gathering though yet remote storm . . . commissioned to bring in fog the yellow taint of pestilence, covering white Western Isles with the poisoned exhalations of the East, dimming the lattices of English homes with the breath of Indian Plague” (399). Thomas Mann’s novella, Death in Venice (1912), casts cholera-racked Venice as one of the points of entry through which contagion creeps into Europe. “The poisoned exhalations of the East,” which the colonial medical establishment was struggling to control throughout most of the nineteenth century, could stage a reverse invasion, blurring the boundaries between “home” and the colonies. Brontë’s con-
ception of an “infected” fog owes much to the theory of miasmatism which prevailed in the early Victorian period; those who subscribed to this believed that diseases such as fever and cholera travelled through and flourished in foul air, or “miasma.” Before the etiologies of specific diseases were discovered and debated, it was literally the breath of the infected “other,” whether constructed in terms of race or class, that was imagined as invasive and threatening.¹

The association of severe and debilitating infections with the climate and environment of the tropics led to the proliferation of medical treatises and practical advice-books on the subject, including works such as John Clark’s Observations on the Diseases in Long Voyages to Hot Countries (1773), James Johnson’s The Influence of European Climates, More Especially the Climate of India, on European Constitutions (1813), and British obstetrician Edward Tilt’s Health in India for British Women (1875).² Controlling the spread of disease was essential for the survival of empire; by insidiously emasculating the representatives of the imperial administration and reducing them to shivering wrecks, disease itself could become a site of resistance to colonial authority. Colonial novelist Flora Steel wickedly described capitulation to North Indian “fever” amidst the rigidly inscribed social rituals of Anglo-India in The Garden of Fidelity, Being the Autobiography of Flora Annie Steel, 1847-1929:

In Lahore we were put up by Henry (afterwards Sir Henry) Cunningham. . . . Here I had my first experience of Panjab fever. As bride, I was of course taken in to dinner by my host. Just at dessert time he surprised me by saying in an undertone — "I'm getting fever — speak to your other neighbour and take no notice; I shall get through." He did; but before the ladies left I saw tears running down his cheeks. He was shivering all over. (33)

Colonials did not always “get through.” David Arnold’s recent study of colonial medicine in India points out that, according to reports provided by doctors in the British Indian Medical Service, around 8,500 British soldiers succumbed to cholera between 1818 and 1854. Malaria, known as “intermittent fever,” smallpox, enteric fever, and venereal disease were among the other leading causes of sickness and death (69-70). Moreover,
as Arnold suggests, along with the shift from earlier climatic and miasmic theories to the germ theory of disease in the later nineteenth century, tropical medicine also registered a corresponding shift from concern with the effects of hot weather to fears of contagious oriental bodies, chief among which were Indian prostitutes and courtesans. The controversy over “lock hospitals” (where prostitutes were detained until cured of VD) and licensed prostitution was symptomatic of the high prevalence of VD among British troops, presumably contracted through their encounters with native women. As the century progressed, Victorian tropical medicine became inevitably preoccupied not only with preserving the “health” of the colonizers, but also with regulating the bodies and medical discourses of the colonized.

European and British women were considered by the imperial medical establishment to be particularly susceptible to the rigors and infections of the tropics. In fact, colonial women’s encounters with disease and medicine only recently have begun to receive attention through the work of historians of empire such as Arnold, Dane Kennedy, and Nupur Chaudhuri. Such work calls for a careful scrutiny of the discursive practices of colonial medicine, suggesting that furtherance of (as well as the rationale for) the imperial project may well have been dependent on the construction of “docile,” sanitized bodies. Ann Stoler has complicated this Foucauldian paradigm further in her extended critique of The History of Sexuality, arguing that nineteenth-century European bourgeois “cultivations of self” and sexual identity were not only refracted through, but actually produced by racial/imperial configurations of “healthy” and “contaminated” bodies (194-95).

Numerous advice books warned women of repeated assaults by the tropical environment on their bodies. An 1864 domestic manual entitled The Englishwoman in India: Containing Information for the use of Ladies . . . on the subject of their Outfit, Furniture, etc. cautioned that footstools should always be used “as they keep the feet out of the way of scorpions. . . . In the sleeping rooms there should be little besides the actual cot, above all, no water, nor any clothes hanging up, as they attract mosquitoes” (37-38). Writing from the Agra Fort in North India in 1857, one memsahib described the intolerable heat:
The heat now began to be overpowering: I was awakened one morning by the most stifling sensation in the air and felt quite ill. The ayah and the bearer said the hot winds had commenced. . . . it made your brain feel on fire, and all the blood in your body throb and burn like liquid fire. (Coopland 79-80.)

While Flora Steel and Grace Gardiner in *The Complete Indian Housekeeper and Cook* (1909) advised that colonial Englishwomen should adapt their dress to the climate, at the same time they warned against succumbing to “oriental” sloppiness and languor:

> There is really no reason why the Englishwoman in India should burden herself with the same number of petticoats, shifts and bodices and what not, that her great grandmother wore in temperate climes. We do not advocate any sloppiness of dress, on the contrary, we would inveigh against any yielding to the lassitude and indifference which comes over the most energetic in tropical heat, but we would have people be as comfortable as they can be under the circumstances. (216)

On her initial arrival in India, Steel battled against indigestion caused by eating mangoes:

> this disability to keep even a spoonful of mango down remained to the last day of my life in India. . . . I have tried again and again; always with the same despairing result . . . (Garden of Fidelity 29)

The vicereine, Lady Mary Curzon, wrote despairingly to her mother in 1899: “it is a very worrying time for me what with Nannie ill, and my wetnurse with gastric fever and Cynthia vaccinated and my second nurse ill, and I have toothache till I cry. I am never out of sickrooms though the house is full of guests” (Bradley 37). Miscarriages were common as women travelled with their husbands to different parts of India, where proper medical help and assistance were not always easily available. As increasing numbers of women began shipping out to the colonies during the mid- to late-Victorian period, the management of their bodies became the business of empire. These bodies were encoded simultaneously as fragile, “spotless,” and particularly vulnerable to the threat of climatic degeneration/racial pollution.
II

In 1875, Edward Tilt, member of the Royal College of Physicians and Fellow of the Obstetrical Society of London, published a medical manual entitled *Health in India for British Women*, in which he traced the connections between specifically feminine diseases, reproduction, tropical climates, and colonization. Chapter 4 of this work, “Diseases of European Women in India,” concerns itself with the ominous failure of women’s reproductive capacity in the tropics due to the predominance of uterine disease. Tilt agrees with previous practitioners of tropical medicine that “during their stay in India our country women are unusually prone to disturbed action of the reproductive organs, and particularly to ovario-uterine disease” (55). He then sets out to explain the probable causes, most of which centre on “excitement” and a fast, fashionable, public lifestyle:

Thus placed in circumstances adverse to health, women find themselves the more sought after because they are few in number, and they naturally enough give themselves up to the pursuit of pleasure, and set at defiance the laws of hygiene . . . before long the colourless lips and the sallow cheeks denote that climate has intensified the effects of neglected hygienic rules. There is an effort made to continue fashionable life at one of our Eastern capitals, but the effort induces abdominal pains, nervousness, depression of spirits and perhaps hysteria. . . . Suppose . . . the lady be married; if bent on pleasure she seldom takes more care of herself during pregnancy than during menstruation, and a miscarriage is a likely event. (56)

Vanity, pleasure, excess, and indolence interfere with the incorporation of the colonial wife into the ideological web of reproduction and motherhood, severely damaging her “female” functions, reducing the womb to a “morbid” state. This deformation of the uterus begins with the effect of climatic change on menstruation: “when women are transplanted from temperate regions to tropical countries, frequent perturbations of the menstrual function may be expected” (58). Miscarriages are brought on by “fever, diarrhea, or the continued heat of the hot season” (59). According to Tilt, not only did the “too early resumption” of exercise, social and marital obligations, a refusal
to confine herself to her bed and room cause the unnatural enlargement of a woman's uterus — additionally, in India it was often "beyond the scope of the womb's recuperative power to reduce itself." Consequently, it became "a permanent menace of disease" (59), continually "congested, irritated, ulcerated" (57).

Disease and deformity usurped and dismantled the mem-sahib's reproductive role. This was aggravated by "tropical anaemia," caused by "habitually intense heat" and malaria, along with "a complete change of habits which too often impart a certain amount of oriental indolence to the once hardy Englishwoman (64)." By producing "orientalized" female bodies, infection threatened to unravel the domestic threads which held the imperial fabric together. Tilt's conclusion, that "the reproductive power of our countrywomen suffers diminution and that their children must return to England or degenerate" (99), prompts him to consider this often-asked question: "Can the Anglo-Saxon race colonize India?" The question points to the crucial importance of women's bodies within the ideological imperatives of empire. Health in India for British Women clearly constructs uterine infections and deformity as symptomatic of the female body's revolt against both domesticity and imperialism.

Apart from the colonial brothel, the other significant space which aligned infection, femininity, and the threat of resistance was the zenana or women's secluded, inner quarters. The contagion of both had to be contained in order to ensure the health of the empire. Feminist historians have referred to the zenana as the "uncolonized space" (Nair 38), since here women could be more easily isolated from the influence of the "civilizing mission," which would include the intervention of colonial medicine. Although this definition is problematic, as it proposes the idea of the zenana as hermetically sealed off from the outside world, in the latter half of the nineteenth century European women doctors, reformers, and missionaries became intensely preoccupied with "opening up" the zenana, bringing "light" into the "darkness" of the harem. However, they encountered considerable resistance from the zenana women, as their narratives testify. In 1856, one reformer complained that
the obstacles to the conversion of females living in the higher circles of society are very great. They have no opportunity whatever of listening to the Missionary when he preaches in the streets and bazaars. He cannot visit their apartments, nor can they go to him. (Storrow 35)

Even if female missionaries managed to penetrate the interior of the zenana, they were confronted with opposition, as the women held obstinately to their own religious beliefs. In *The Women of India and Christian Work in the Zenana* (1875), Mrs. Weitbrecht admitted her failure to convince Hindu women to give up their goddess worship in favour of the Christian male god: “I told them that she was only a stone, and had no virtue in her, and that there is only one true god, who has created us all. . . . they were staunch in their belief of this goddess” (123-25).

Moreover, the zenana was marked as a site of infection, since European doctors did not have easy access. In her novel *The Potter’s Thumb*, Steel called the zenana the “plague-spot” of India; she in fact believed that the introduction of female doctors into the zenana was a mistake, as it would prevent women from discarding the veil in order to procure proper medical assistance (*Garden of Fidelity* 177). Weitbrecht also mentioned the “collection of dirty courtyards, dark corners, break-neck staircases, filthy outhouses” in the zenana (qtd. in Karlekar 49). Towards the end of the century, the Dufferin Fund was set up to bring imperial medicine into this gendered “inner” space. Mary Frances Billington, praising the work of the Dufferin Fund in *Woman in India* (1885), quoted a contemporary British journalist on the absolute necessity of invading the zenana if imperialism was to achieve its “greatest” mission:

> what is it at present that hinders all real progress in the country but the overpowering influence of the zenana? Once break down that, or shed light into it, and give it a healthy and upward direction, and I believe that progress and enlightenment will make such bound in this country that the regeneration of India will be a living reality. . . Get at the women then. . . . Show them the beauties of Christianity, appeal to their hearts by wisdom and the personal example of beautiful lives, and you will see such an era of progress set in that the regeneration of India will be a reality, and the conversion of its people an accomplished fact. When that is done, England’s great mission in India will have been accomplished. (111; emphasis added)
As an over-determined cultural space which could produce instability/insurgence in the face of progress and "civilization," the zenana, like the brothel, had to be reinvented, reconfigured, reinscribed. The question I would like to raise here is whether a vulnerability or receptivity to infection, languor, and sickness constitutes an interruption of colonial imperatives. If it is possible to conceptualize disease in the imperial context as both racialized and feminized, then in what ways can engagement with disease be implicated as part of a discourse of resistance and rupture, particularly for the colonial British female novelist writing about Indian women?

III

The daughter of a Jamaican sugar plantation heiress, Flora Steel had accompanied her husband to India immediately after their marriage in 1868. She became known later as the "female Kipling," an epithet which she would probably not have welcomed. In 1870, Steel herself lost her first child in a life-threatening pregnancy, because of inadequate medical attention. Though this experience obviously took an emotional and psychological toll, she described herself as having the "re recuperative power of an animal" (Garden of Fidelity 45). From 1889 onwards, she travelled between India and England, researching her novels, the most famous of which was her best-selling Mutiny romance, On the Face of the Waters (1897) written after she was allowed access to the archives of the Indian Mutiny of 1857.

In 1887, she also authored the most popular and definitive domestic guidebook for memsahibs, The Complete Indian Housekeeper and Cook, which went into several editions. Here, Steel maintained that ill health was the result of lifestyle (the habit of darkening rooms) rather than climate or environment: "the forced inertia caused by living without light is responsible for many moral and physical evils among European ladies in the tropics" (178). This was somewhat different from the prevalent nineteenth-century belief that exposure to the tropical sun caused degeneration, and that second or third generation Europeans inevitably deteriorated under such conditions, becoming "pallid, weedy and unhealthy looking," a view expressed by
members of the Society for Tropical Medicine and Hygiene (later the Royal Society) as late as 1907 ("Tropical Lands" 221; see also Kennedy 32-33).

Recent analyses of Steel’s work have mostly centred on On The Face of the Waters. While commentators such as Jenny Sharpe and Benita Parry have acknowledged the contradictory attitudes towards imperialism in her writing, drawing attention to the figure of the memsahib as a site of uneasy articulations, Steel’s Indian women tend to be read as passive racial stereotypes. Here, by looking at some of her lesser known (but no less remarkable) fiction, which has been largely ignored so far, I hope to offer a more problematic reading of her “native” women, especially courtesans, and their interventions in the memsahib’s “vulnerable” sexual and domestic identities.

Steel’s late Victorian novel Voices in the Night (1900), which deals with the onset of bubonic plague in the fictional town of Nushapore in imperial India, engages with some of the crucial dilemmas of colonial medicine and its attempts to control the exotic female subject. Voices in the Night is remarkable for the way in which its narrative enacts the tension between resistance to disease and disease-as-resistance, while simultaneously investigating the problem of female intervention. Steel interweaves the stories of two British women, Grace Arbuthnot, the Governor’s wife, and her son’s governess, Lesley Drummond, with those of several Indian women, among them an impoverished but aristocratic Muslim wife, Noormahal, and a princess turned courtesan, Sobraí Begum. A characteristic feature of Steel’s fiction is her fascination with fiercely independent and rebellious Indian courtesans. The landscape of the novel is split into the two halves of a colonial cantonment town, its British section and the native quarters or “bazaar areas,” which in colonial iconography became the locus of contamination as well as political resistance. Many cantonments also contained areas known as “regimental bazaars,” where prostitution could be regulated. Described in terms of filth and clutter with its “cavernous shadows” and “squalid shops,” Steel’s bazaar is dominated by the courtesan, Dilaram, “yawning, blowsy, ill kempt,” with an “indescribable grace” and a sharp wit. Spatially, the
novel maps the areas of bazaar, brothel, hospital, zenana, and the interior of the Arbuthnot's residence, Government House (Nushapore's centre of imperial power), continually negotiating anxieties about boundaries, which threaten to shift and unfix themselves through the spread of plague.

The action of *Voices in the Night* unfolds against the background of the colonial administration's attempts to check the spread of plague in the bazaars and cantonments of Nushapore. Steel's novel is extremely topical; in the 1890s, because of major plague epidemics, the British government in India had implemented stringent anti-plague measures, which included compulsory segregation and hospitalization, the right of forced entry into Indian houses, even if it implied violating the seclusion of women, along with a massive campaign to cleanse or flush out the bazaars with disinfectants. Before the transmission of plague became clear, the bodies of the colonized were regarded as the source of infection (Arnold 210). Though few Europeans came down with the disease, they were haunted by anxiety; an 1899 address in *The Lancet* blamed the encroachment of the disease on trade and expressed the fear that it would travel from India through Egypt into Europe (Simpson 699). For the colonized, resistance to plague regulations which treated their bodies as "state property" (Arnold 211), became linked with political dissent, and it is this situation which Steel so compellingly dramatizes in her novel.

In *Voices in the Night*, while the local Governor, Sir George Arbuthnot, vacillates as to whether he should institute such measures, his wife Grace has hidden in her jewel box a secret letter from her father outlining the British Government's official intentions. When the box is stolen, and the letter is believed to have disappeared into the depths of the bazaar, Grace's indiscretion prompts the "natives" to strategize their resistance and begin planning counter-measures against the plague regulations. Throughout the novel, Grace, delicate, languid, elegant, and unhappily married, is uncomfortably positioned, as she conceals her unconscious collusion with the "natives" from her husband, desperately trying to recover the letter. While struggling with her guilty secret, she senses a strange connection or affinity with
the courtesans or dancing girls in the bazaar, an affinity which impinges on her regulated life as imperial wife and mother:

As she passed up the wide stairs... the open window let in a sound. . . . The most restless sound in the world. . . . it came faintly, indefinitely from the distance and darkness of the city. She could see through the murk and shadow, the light of flicker and flare on the circling faces round the shrilling voice or posturing figure of a woman. (142)

The “insistent throbbing” from the bazaar produces a “passion of unrest” in Grace which can only be suppressed by watching her sleeping son (a little jingoist-in-training) who, as yet uncontaminated, embodies the “spirit of the (conquering) race”(142-44). Grace’s antithesis is the ideal colonial governess Lesley Drummond — practical, “lacking sentiment... ordinary woman,” who assists the novel’s hero, Jack Raymond, to foil the Indian insurgents protesting the anti-plague measures, in the process proving herself an efficient guardian of empire. Earlier, both Grace and Leslie find themselves hosting a tea party in what had formerly been a courtesan’s pleasure garden:

It was a quaint place, tucked away between two angles of the city wall for greater convenience in secret comings and goings to secret pleasures; and it was all the quainter now because of the Englishwomen sipping tea on the steps of the gilded summer house, the Englishmen calling tennis scores in what had been the rose water tank, in which kings’ favourites had bathed, and on which they had floated in silver barges. (235)

The atmosphere of the garden overwhelms and disturbs Leslie, assaulting her senses: “What was she, Lesley Drummond, doing there in that garden whose suggestiveness seemed to stifle her?” While Leslie struggles against the garden’s unsettling seductiveness, Grace, enjoying an adulterous flirtation, seems to welcome its dangerous sensuality: “the scent of the garden drifted in unchecked, and mixed with the faint scent of heliotrope from Grace Arbuthnot’s dress (243).”

It is the Indian women in the novel, however, whose bodies not only become the location of the threat of disease, but also vehicles through which the discourse of infection is translated into that of insurgence. The British colonials in Voices in the Night...
are haunted by echoes of the Indian Mutiny of 1857, in which courtesans and bazaar prostitutes were supposed to have played a crucial role by disseminating rumors and urging the mutineers on by taunting their masculinity. Veena Oldenburg’s perceptive research on nineteenth-century Indian courtesans has shown that in many cases they supported the rebellion financially as well. Besides, they could weaken the British military substantially by transmitting venereal disease and other infections, a problem the imperial government sought to control with the Indian Contagious Diseases Acts of 1864, establishing a system of licensed prostitution by means of which women were periodically examined. In *Voices in the Night*, the courtesan Dilaram, refusing to submit to the licensing system, instead actively stirs up unrest by spreading rumors that the British are using the plague to “search respectable houses” to kidnap young women for licensed brothels.

Most Indian courtesans received training in classical music and dance, actively shaping/producing culture in the process. Steel’s courtesans are always dancers or “nautch” girls. Emma Roberts, author of *Scenes and Characteristics of Hindustan* (1835), observed that it could be a lucrative career for some:

> Many of the nautch girls are extremely rich, those most in esteem being very highly paid for their performances; the celebrated Calcutta heroine already mentioned receives 1000 rupees nightly, whenever she is engaged. (Qtd. in Dyson 348)

Several travel narratives claimed that the girls were asked to sanitize their dancing in front of an audience composed of European women. Writing in 1777, Jemima Kindersley commented that “it is their languishing glances, wanton smiles, and attitudes not quite consistent with decency, which are so much admired (qtd. in Dyson 336).” Despite this, female observers of the nautch (with some notable exceptions) expressed a level of discomfort with the public display of the female body. Though these accounts agree that the nautches are not “indecent,” they nevertheless condemn the performances as meaningless and grotesque. Performed in the “bazaar” areas as well as in private homes, the nautches constantly crossed borders. They sometimes involved cross dressing as well. Consider, for example,
Burton’s version of the nautch, in which the principal dancer resists the male gaze and the girls perform a “melodrama” in male dress, “confusing” the sexes:

You feel that there is something in her look which spurns rather than courts ardent eyes. . . . Now for the ballet, or melodrama, the favourite piece of the evening. The ladies all equip themselves in manly and martial dresses. (Qtd. in Dyson 354)\(^\text{16}\)

At the core of Steel’s narrative are two spectacular performances which mark the exotic female body as not only excessive and infected, but also as a site where revolt is articulated and reformulated through the threat of infection. The first is the erotic self-display of the courtesan/dancer Sobrai Begum. A former princess who has escaped a respectable but dull life of genteel poverty to enter a licensed brothel, Sobrai constructs a spectacle of herself as a public woman, dancing before the British soldiers “with a fierce exultation” and an unrestrained yet dignified sensuality (162). As an upper-class woman turned prostitute, her body ruptures hierarchies precisely because it is unclassifiable. During the dance, she comes face to face with Grace Arbuthnot, who happens to be passing by. Despite her husband’s attempts to distract her from this display, Grace sees “in the flesh” what she had earlier envisioned “in her mind’s eye” (162), as the courtesan’s spectacular body attempts to assert its visibility. For Grace, Sobrai’s exhibitionism intensifies and actualizes the allure of the unsanitized space, providing a momentary glimpse of an unregulated female body drawing its energy from the “contamination” of the overcrowded bazaar. The discovery of Grace’s stolen pearls in Sobrai’s room further destabilizes the boundaries between their bodies, creating an uneasy sense of physical/emotional exchange and shared culpability, which reinforces Grace’s feelings of guilt, collusion, and contamination.

The second performance takes place in the zenana of another economically disadvantaged Muslim aristocrat, Noormahal — a space which is violated as two British men force themselves in to search for plague victims. After years of struggling with her abusive husband to claim an inheritance for herself and her child, Noormahal stages her resistance to both patriarchy and impe-
rialism through suicide: “With one cry of ‘Liars’... the slender white figure leaped into the air; and the Nawabin Noormahal, the Light-of-Palaces, went down as she had stood, mocking, defiant, into the depth of the well”(290). Noormahal’s suicide is also connected with a tremendous act of domestic insurgence — refusing her husband entry. There are smaller, quieter acts of rebellion as well — Noormahal and her aging aunt secretly bury the body of a female relative who dies of plague to prevent it from being desecrated by medical inspection. In this novel, the other woman’s body signifies the burden and consequences of defiance — the “contagion” that “fallen” memsahibs have to struggle to avoid is not only that of disease but also of female disorder, communicated insidiously through the native woman’s attempts to intervene in the imperial narrative of her body-as-spectacle.

IV

An earlier novel, The Potter’s Thumb, considered by some of Steel’s contemporaries as her finest work (Powell 72), compulsively redraws the boundaries of harem, bazaar, and the colonial boudoir by probing the tensions and “contagious” affinities that exist between two women — the courtesan, Chandni and the memsahib, Gwen Boynton. The action of the novel unfolds against the initiation of a British irrigation scheme in the town of Hodinuggar. As in Steel’s other fiction, The Potter’s Thumb positions the colonial administration against an impoverished and decaying Indian aristocracy, whose resistance takes shape through women’s involvement in intrigue. This is facilitated rather than hampered by seclusion; like Lady Mary Wortley Montagu and Julia Pardoe before her, Steel is fully aware of the flexibility of the veil: “For the custom of seclusion renders intrigue absolutely safe, since none dare put the identity of a white robed figure to the test, or pry into the privacy of a place claimed by a purdahnishin.” (Potter’s Thumb 42).

Recasting intrigue to reflect defiance, Chandni initiates an ingeniously convoluted plot to steal the key of the sluice gate so that the native inhabitants of the town can divert the water for their own purposes. In this sense, the courtesan’s insurgence drives the narrative and constructs the plot. Prostitute, dancer,
and bazaar woman, Chandni is introduced as a modern Medea haunted by a consciousness of her own power, a mysterious, imposing, hybrid figure in “her trailing white Delhi draperies and massive garlands, a figure which might have stood for some of those strange solemn-eyed statues, half Greek, half Indian” (258). She arranges her own spectacles of subversion through mimicry, giving “a spirited imitation of the way the memsahibs waltzed with the sahib logue” (36). As a courtesan, she negotiates inner and outer worlds with ease, rejecting marriage with vehemence: “She was not going to marry a fool in order to wear a veil and live with a lot of women” (254).

While Chandni presides over the bazaar, the colonial ballroom serves as a backdrop for the elegantly dubious adventurer, Gwen Boynton, who, like the courtesan, must use her sexual power and intelligence to ensure her own survival. Widowed and in debt, Gwen is a perfect example of Tilt’s “fast,” “fashionable” memsahib on the brink of uterine degeneration, manipulating the surface of her body to entrap men: “her evening dresses always had a seamless look, and the lace about her fair shoulders always seemed pinned on with cunning little diamond brooches glittering and sparkling” (28). Gwen’s “seamless” appearance aligns her body with that of the veiled woman; as Steel comments earlier, “the burka is of all disguises the most complete” (27). Flirting with her suitor, Dan Fitzgerald, as she assesses his financial worth, she decides that “if he did not get his promotion, she could not possibly marry him” (27). Because of her debts, which Steel implies arise from her love of luxury, Gwen becomes entangled in Chandni’s web of blackmail and deception, the ultimate goal of which is to disrupt the British irrigation project.

Between them, they drive the budding young imperialist, the naive and earnest George Keene, to suicide; he realizes that Gwen has tricked him in order to obtain the key to the gate of the canal. Significantly, this occurs while he is recuperating from fever in the hills. Gwen Boynton’s connection and complicity with the courtesan is underscored when the former dresses up as an Indian woman, growing uneasily aware of a seductive contagion which re-produces her body as alien, hybrid, indefinable:
It seemed scarcely a minute ago since she had passed swiftly into the solitude of her own room in order to think. She, Gwen Boynton, in native dress, with a white, scared face. . . . Now she had to pass out of that room again as an Englishwoman, and the transition left her oddly undecided. (102)

To quote Bhabha, here Gwen senses her Englishness as a “partial presence,” which, estranged from itself, interrogates its own identity/desire through mimicry (Location 86). Thefts and feverish exchanges dominate the narrative; as in Voices in the Night, the text obsessively enacts the fraught, shared guilt between courtesans and memsahibs. Keys and stolen jewels pass back and forth, mapping covert, barely articulated strategies of resistance to imperial rule.

Steel punctuates the narrative with a song of the bazaar sung by a mad potter, the theme of which is female desire and restlessness: It was a woman seeking something / Over hill and dale, through night and day, she sought for something (95). On hearing the potter’s song, the other Englishwoman in the novel, the practical, efficient Rose Tweedie, feels a “stress, a strain, a desire such as she had never felt before” (96). In the end, Rose, like Lesley Drummond in Voices in the Night, surrenders to the dictates of domesticity in the service of empire, allowing herself to be transformed into the ideal colonial wife. Rose plans her “pretty” garden and drawing room to the strains of “Rule Britannia” (329), while Chandni contemplates the power and pleasure of intrigue: “Every atom of her blood came from the veins of those who for centuries had woven a still finer net of woman’s wit around the intrigues of their protectors” (291).

Ultimately, Gwen and Chandni’s transgressive actions go unpunished, while the representatives of imperial duty and moral rectitude in the novel, Dan Fitzgerald and George Keene, both perish. Even though her plans to sabotage the colonial infrastructure eventually backfire, Chandni ends up with three thousand rupees, priceless stolen pearls, and a position of power in the world of bazaar and court intrigue; Gwen Boynton is conveniently “left free to marry for position without remorse” (350). The contaminated bazaar, with its courtesan’s houses and zenanas, continues to haunt the margins of the colonial bou-
doir as the text reveals its surreptitious pleasure in, and desire for, tacit rebellions.

Although she became involved in the suffragette movement later in life, Flora Steel clearly saw herself as contributing to the “civilizing” impulse of empire, both through her efforts to “educate” Indian women and as an imperial wife. In *The Complete Indian Housekeeper and Cook*, she reminds her readers of the analogy between effective household management and a benevolent imperialism: “an Indian household can no more be governed peacefully, without dignity and prestige, than an Indian empire” (9). For Steel, domestic roles were subsumed within and served to buttress the overarching agendas of empire. Following this trajectory, Rebecca Saunders has interpreted the death of Alice Gissing, the unconventional, “fallen” memsahib in *On the Face of the Waters*, as punishment: “Steel here is as much the tool of imperialism as any memsahib. Alice is sacrificed to women’s larger role of helping Englishmen control Indians” (314). However, in the two novels I have discussed here (and particularly in *The Potter’s Thumb*), Steel avoids such acts of closure. Steel’s construction of both British and Indian women’s bodies in these novels as battlegrounds where the conflicting drives of infection, resistance, and empire compete for mastery allows her to indulge her own clandestine fantasies of contagion. Not surprisingly, then, it is her exoticized female bodies which claim their right to agency. The “partial presences” and equivocal spaces produced through encounters between memsahibs and native courtesans reveal the colonial female novelist grappling with the profoundly disturbing implications of her place within imperial history.

NOTES

1 For a discussion of the miasma theory of disease and the spread of cholera in the nineteenth century, see Bynum.
2 For a more comprehensive list of works, see Arnold 24.
3 For accounts of colonial prostitution, see Ballhatchet 10-67; Banerjee passim.
4 See Kennedy; Chaudhuri, “Memsahibs and Motherhood.”
5 I am referring here to Foucault’s use of the term “docile” in *Discipline and Punish: The Birth of the Prison*. Foucault defines a “docile body” as one which is both “subjected” and “intelligible” in the sense of being classifiable or readable.
For analyses of the zenana in transition, especially in nineteenth-century Bengal, see Malavika Karlekar, *Voices from Within* and Meredith Borthwick, *The Changing Role of Women in Bengal, 1849–1905*.

For a survey and analysis of the work of the Dufferin Fund, see Arnold 260–68.

Surprisingly little work has been done on the material practices governing the lives of European women in the colonies. Moreover, the focus remains on India. See Pat Barr, *The Memsahibs; Margaret Macmillan, Women of the Raj; Antoinette Burton, Burdens of History; and Margaret Strobel, European Women and the Second British Empire.*

See Powell 44; Powell comments that “inevitably her writing was often compared with Rudyard Kipling’s, a standard against which the veracity of her material was measured.”

Saunders provides a reading of the role of “fallen memsahib” in *On the Face of the Waters* (303–24). There is very little published criticism of Steel’s novels, and almost all assessments focus on her Mutiny novel. See for instance, Sharpe 85–110; Parry 100–30; Paxton 5–30. Hennessy and Mohan look at the short story “Mussumat Kirpo’s Doll,” (the subject of which is child marriage), to situate Steel within the “liberal colonial tradition of outrage in the face of indigenous practices,” which ironically, at the same time “necessitated” imperial rule and the civilizing mission (323–54). For a recent discussion of the New Woman in *Voices in the Night*, see Paxton, *Writing Under the Raj* 207–14. Although Paxton does comment on the sexual independence asserted by the Indian courtesan, Sobrai, she reads this figure as primarily signifying “abjection” rather than resistance (213–14).

Stoler uses this term to describe “bourgeois white identities” in flux. She concludes that although these identities were unstable, stereotypes of the racial other continued to be fixed and unchanging. It seems to me that such a sharp dichotomy undermines her earlier contention — images of the racial other, as I hope to show here, were by no means as “fixed” as has been assumed, and instead, existed in a peculiarly ambivalent reciprocal relationship with those of whiteness, and especially of white women. See *Race and the Education of Desire* 163.

The connection between the bazaars and colonial prostitution is traced in Ballhatchet 10–39.

Oldenburg’s brilliant essay on nineteenth-century and present day Indian courtesans provides an excellent starting point for re-evaluating the courtesan’s role in patriarchal cultures. Singh also comments on the subversive staging of identity by nautch girls (104–14).

For a detailed account of the Indian Contagious Diseases Acts and the controversy surrounding the licensing system, see Ballhatchet 40–67; Banerjee 51–72.

Roberts’s comments and other accounts of the nautch are excerpted in Dyson. After conducting a series of interviews with present day courtesans in Lucknow, Oldenburg has drawn the conclusion that many of these performances continue to parody/subvert marriage and socially sanctioned heterosexual relationships. “These routines, studded with subversive and irreverent jokes and obscene gestures, are performed like secret anti-rites” (41–42).

The term “purdahnishin” means “woman in purdah” (seclusion).

Bhabha sees the “partial presence” of the colonial subject emerging from “a discursive process by which the excess or slippage produced by the ambivalence of mimicry . . . does not merely rupture the discourse, but becomes transformed into an uncertainty.” In Steel’s fiction, mimicry cuts both ways, as colonizers and colonized constantly mimic each other.
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WORKS CITED


Sharpe, Jenny. * Allegories of Empire: The Figure of Woman in the Colonial Text.* Minneapolis: U of Minnesota P, 1993.


———. *The Potter’s Thumb.* London: Heinemann, 1894.


