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“How Could You Leave Me Alone When the Room Was Full of Men!”

Gender and Self-Representation in
Louisa May Alcott's *Hospital Sketches*

*[Civil War narratives feature] metaphoric transfer of civil war from
an external, political realm to inner conflict over sexual choice and
the proper gender roles.*

—Margaret R. Higdonnet, “Civil Wars and Sexual Territories” (1989)

IN LOUISA MAY Alcott's *Hospital Sketches* (1863), a text that mixes the travel narrative, letters, and sketches based on her Civil War nursing experience, the hospital is a gendered location of voyeuristic observation: wounded male soldiers stare passively at female nurses who maternally bathe them and observe the weakened male body with little fear of sexual interpretation or interaction. The form of the hospital sketch freed Alcott—as the hospital itself freed the woman nurse—to handle male bodies and to have male/female physical contact without directly invoking male and female sexuality for herself or her nineteenth-century U.S. readership. The hospital sketch positioned the woman writer to consider culturally constructed, significantly desexualized notions of gender in ways prohibited by less clinical, and so potentially more sexualized, narrative forms. As the published author of a collection of children's tales (*Flower Fables* [1854]) and adult stories—her work had appeared in the *Atlantic*, the *Boston Commonwealth*, and the *Olive Branch*, among others—Alcott had consciously striven to learn literary strategies of successful writing in order to have her stories published, particularly in the *Atlantic*.¹ Though these rhetorical strategies valuably allowed experimentation with form and audience, they did not furnish

a model for a woman writer to explore sociosexual complications of a woman nursing hospitalized men. Just as conventions for transporting food and treating the wounded required adaptation in wartime (Jones xix, xxi), so did literary conventions of more peaceful times.

As part of her pioneering work on Alcott, Madeleine B. Stern has shown that Alcott's writing in this period—*Hospital Sketches* was published the same year as the first of Alcott's pseudonymous gothic thrillers—was “especially productive for an author essaying a variety of genres” (*Critical Essays* 2). In my reading, Alcott's use of a pseudonym for those thrillers and her use of the hospital location in *Hospital Sketches* show her experimenting with gender and literary forms. In the thrillers Alcott, as the ungendered A. M. Barnard, could write about sex without anyone knowing it; in *Hospital Sketches* Alcott, by controlling representation of the hospital, could avoid writing about sex without anyone missing it. In both, the generic choice gave authority to write: a woman writer could anonymously invent gothic thrillers or relate a somewhat fictionalized account of her maternalistic nursing experiences without disrupting readers' comfortable view of her sociosexual status.

The first chapter of this study focuses on Sarah Kemble Knight's early-eighteenth-century *Journal*, its constructions of women's voice and domain, and the relation between the text's 1825 publication and other nineteenth-century U.S. women's texts. The second chapter employs Fanny Fern's early periodical writing to shed light on intersections of genre, reconfigurations of the (female) self, and establishment of a sustained relationship between Fern and readers. Knight's writing privately and Fern's writing anonymously allowed them at times to write transgressively. Alcott, whose authorship of gothic thrillers was undiscovered in her lifetime, wrote *Hospital Sketches* under her own name. Like Knight and Fern, Alcott wrote autobiographically and was aware of the choice to write privately or anonymously. But unlike Knight and Fern, in *Hospital Sketches* Alcott wrote publicly as—more or less—herself.

Alcott's generic choice of the hospital sketch and her use of a fictive persona in *Hospital Sketches* occur at the intersection of form, gender, and agency, a location familiar to other women writers in this study. For example, as discussed in chapter 2, Fern's pseudonymous writings combine the autobiographical and fictive for greater authority, even though readers' generic expectations of literary papers—where Fern's periodical writing typically appeared—might well have prompted them to read Fern's work as strictly nonfictional. The next chapter in this study, following this discussion of *Hospital Sketches*, examines S. Emma E. Edmonds's use of an often bewildering mix of the fictive and auto-

biographic, as well as Mary Livermore's and Annie Turner Wittenmyer's choices to write fairly straightforward nonfictional accounts of their war experiences. Such movement between the fictive and autobiographic in these women's Civil War reminiscences suggests choices made by female writers regarding how they wished to be heard and viewed by audiences. Extending previous chapters' examinations of women, self-writing, and nineteenth-century U.S. publication, and with attention to discussions conducted in subsequent chapters, in this chapter I investigate Alcott's uses of the fictive and autobiographical in her considerations of female (self-) representation and sex-gender identity.

Criticism of Alcott's works has noted her prolific literary output and use of a range of literary forms. Elaine Showalter calculates Alcott's output at "at least 270 works in every genre from poetry to tragedy" (Introduction x). Alcott's productivity and wide use of genres have been linked to the double-voicedness that feminist literary criticism has identified in women's writing. Discovery and subsequent publication of Alcott's anonymous sensational writing revealed Alcott's dual literary life and supported readings of her double-voicedness. The result has been that literary critics typically locate Alcott's sensational tales in one category and her works in other popular forms—children's books, domestic texts, fairy tales, historical essays, sentimental texts—in another (Cappello; Douglas; Showalter, Introduction). These binaries are tempting: how many readers of *Little Women* have read one of the anonymous gothic thrillers for the first time and thought that the secret, passionate voice must be Alcott's "real" voice?

I depart from such readings, however, in my belief that this categorization obscures generic contours of the body of Alcott's writings. Alcott's literary productions are too varied—and the narrative voice of works such as *Little Women*, *Eight Cousins*, *Rose in Bloom*, and other children's books too strong, despite Alcott's own ambivalence about these and other works—to be reduced to such uncomplicated binary categories. Alcott's extensive writings are, I think, less adequately contained by double-voicedness than by generic multivocality, a resistance to writing solely in any one style and a gift for writing across generic boundaries. Additionally, I see these movements across forms as enabling Alcott to portray a range of female representations.

Richard H. Brodhead, contextualizing Alcott's career, described her inclination toward generic multivocality as aided by her "com[ing] to her career at the time when literary boundaries were being socially organized," a moment when writers had "an array of literary possibilities and had several publics and several models of authorship equally avail-

able to them." A rise in publishing "outlets she personally had access to reflects, more generally, the proliferation of literary vehicles . . . that helped make literary writing a commercially viable career" (*Cultures of Letters* 106, 80, 77). Despite early use of these opportunities, Alcott later poignantly recognized family and cultural strictures regarding her writing: "To have had Mr. Emerson as an intellectual God all one's life is to be invested with a chain armour of propriety. . . . And what would my own good father think of me . . . if I set folks to doing the things I have a longing to see my people do?" (Madeline B. Stern, *Critical Essays* 42). Such remarks can be used to support readings of the anonymous voice of the gothic thrillers as the "true" voice, the one that could not be spoken by the Alcott constructed by her family, their Concord circle, and the many readers of her popular, signed works. I would add, however, that they also reflect Alcott's anxieties of publication and weary awareness of public expectations and scrutiny of her writing/self. Working in a range of genres expanded Alcott's possibilities for writing out fictive stories of selfhood.

Alcott's extensive choice of literary forms—available through her inclination and through literary circumstances of the time—allowed her to reveal, in a Foucauldian sense, more than she would in any single literary form.² Yet Alcott's mix of fiction and her own experiences as seen in *Hospital Sketches* also allowed her to elide (self-) examination of her sexuality. Alcott experimented with gender and form in order to privately write or publicly not write about male and female sexuality. Martha Saxton sees Alcott's nursing experience as deeply fearful, forcing her to "repress her terrors [of men] and be physically intimate with many males," trauma which led, during her recovery from illness, to hallucinations that revealed "hideous fears of rejection and violence" (257). Saxton relates an incident of Alcott's recovery when Alcott, delirious and momentarily left alone, crashed out of bed. When her sister May came to help her, Alcott berated her, yelling, "How could you leave me alone when the room was full of men!" (257).³ Alcott's use of the hospital sketch permitted her to evade issues of sexuality, especially when the room was full of men. This intersection of gender and form freed Alcott to construct an alternative sex-gender identity for a white middle-class woman in the nineteenth-century United States.

Much has been written and conjectured about the ambiguous, contradictory constructions of sexual identity and gender in Alcott's life and writing.⁴ Alcott herself complicates conjectures, having told Louise Chandler Moulton: "I am more than half-persuaded that I am a man's soul, put by some freak of nature into a woman's body . . . because I have fallen in love in my life with so many pretty girls and never

once the least bit with any man" (49). In this 1882 interview Alcott seems to construct herself on the then-emerging Krafft-Ebing biological model of sexual orientation as an "invert," a woman whose body is occupied by a man's soul.⁵ Such sexological models and studies would, as Joseph Bristow writes, eventually play "a major role in enabling sex to be debated more widely and seriously at all levels of society" (15). A crucial legitimacy would be provided by sexological studies that would later authorize public discussions of sex and sexuality. Alcott's remarks in 1882 imply a gender definition based on sexual attraction and suggest that her attempts to find a coherent gendered subject position were lifelong ("so many pretty girls" over the years) and persistent ("more than half-persuaded" by recent theories of sexual orientation). The maternal, chaste figure of Tribulation Periwinkle whom Alcott had scripted twenty years earlier in *Hospital Sketches* marks an early moment of Alcott's considerations of gender construction.

My discussion of Alcott's work in *Hospital Sketches* is followed by consideration in chapter 4 of other manifestations of U.S. female alternative sex-gender construction in women's Civil War writing. The chapter 4 discussion of S. Emma E. Edmonds's *Nurse and Spy in the Union Army* examines Edmonds's living and writing as "Frank Thompson" as a much more potentially disruptive alternative sex-gender identity of the kind that we see Alcott tentatively beginning to explore in *Hospital Sketches*. Further, chapter 4's subsequent examination of two other women's Civil War memoirs—Mary Livermore's *My Story of the War* and Annie Turner Wittenmyer's *Under the Guns: A Woman's Reminiscences of the Civil War*—unpacks wartime observations of self-defined conventional women as they represented and responded to less conventional women who cross-dressed as male soldiers. Taken together, these texts situate the U.S. Civil War as, among other things, a cultural workshop for experimenting with and writing about female cross-dressing. Alcott's work in *Hospital Sketches* serves as a preliminary stage of this exploration.

I.

I never began the year in a stranger place than this . . . leading a life of constant excitement in this greathouse surrounded by 3 or 4 hundred men in all stages of suffering, disease & death.

—Louisa May Alcott, January 1863 journal entry

Sections of *Hospital Sketches* that draw on the travel narrative reflect Alcott's familiarity with and revisions of literary conventions of the

female traveler role. As Mary Suzanne Schriber writes in her study of women's travel, "[t]ravel mattered in nineteenth-century America for both men and women, but it mattered particularly for women and their observers because of gender" (45). With few exceptions, antebellum women's travel narratives characteristically had partaken of then-current discourses for treating gender by "present[ing] the narrator as feminine" and using "lengthy descriptions of the domestic" (Mills 4). Such narratives also typically marked the female traveler as eschewing unconventional experiences. The antebellum U.S. woman's narrative of travel in Europe and the Near East focused on well-known historical sites. Nina Baym observes that these narratives privileged the familiar and avoided "experiences nobody had ever had before" in favor of "see[ing] what others had seen, know[ing] what others had known, feel[ing] what others had felt" (*American Women Writers* 132).

Alcott's construction of the train and steamboat journey of Tribulation Periwinkle, her fictive persona in *Hospital Sketches*, to Washington, DC, furnishes an informative contrast to Sarah Kemble Knight's travel narrative. Separated by over 150 years, Knight and Alcott are nonetheless linked by their ability and inclination to write about their journeys on the way to then-uncommon experiences for women. Differences in cultural and geographical travel conditions of the eastern United States (or for Knight what will become the United States), between the eighteenth and nineteenth centuries emerge starkly in a comparison of Knight's and Alcott's descriptions. For example, Knight's narrative of her trip involves more danger and autonomy than does Alcott's construction of Trib's travels. In Knight's portrayals of her bargaining to hire a guide, traveling alone or as the only woman among male travelers, and journeying through the wild, we see the travel conditions available at the time to a white woman of some economic means and class status. Knight's descriptions of other travelers (as opposed to people living in places through which she passes) appear fairly infrequently because the New England landscape had not yet been subjugated to provide for regular middle-class travel. Indeed, Knight's journeying via postal routes points to the somewhat more established travel of mail than of people at that time. As I argue in the first chapter, women and men who observed Knight on her journey had limited means for understanding how to correctly classify a white woman of some identifiable status who traveled alone. For their understanding and also for her own self-understanding, Knight had to classify herself for them, in her behavior and in the pages of her *Journal*.

Over a century and a half after Knight's travels, Alcott began her own journey at a time when travel for white women had become both more common and more restrictive. Alcott's construction of Trib's behavior on her journey, as well as the way Alcott wrote about that journey, emerges from strictures that then implicitly governed female travel. Compared to Knight's eighteenth-century trip, Trib's journey reflected significantly improved travel conditions in the nineteenth-century United States as well as—despite increased travel restrictions—greater acceptance of white women's travel. Trib's journey by train and steamboat did not take her into the wilderness or along routes designated more for mail than for people. Nor is Trib mistaken for a prostitute. However, the range of behavioral possibilities available to Alcott in her writing about Trib's journey was, perhaps ironically, much more limited than those available to Knight as she wrote about her own trip. Unlike Knight, Alcott had to fit Trib's behavior within fairly narrow parameters precisely because travel had become more conventional.⁶ That is, appreciably more fellow travelers observed Trib's behavior at any given moment than were present to observe Knight's travel behavior. Trib was visible to her numerous fellow travelers as a white woman of a certain class status. Beyond that, however, she was marked by the invisibility—a quality rarely if ever assigned to Knight on her travels—of a white woman classified as conventional traveling during a time when female travel was somewhat acceptable. Taken together, travel sections of Knight's *Journal* and Alcott's *Hospital Sketches* reveal in broad terms that as female travel became to some degree more common, more convenient, and less dangerous—and so to some extent socially sanctioned—cultural restrictions governing such travel increased correspondingly.

Not surprisingly, concerns of gender and conformity inform travel portions of *Hospital Sketches* and Knight's *Journal*. As discussed in the first chapter, Knight uses what she perceives as disruptive behavior of other women to aid in her self-construction as a proper woman. In Knight's portrayals of women, she is almost always more conventional and of higher class status than they are. In the travel section of *Hospital Sketches*, Alcott only briefly gestures toward Trib's fellow female travelers. In both texts the main female traveler (Knight, Trib) exhibits little or no sympathy with other women. No like-minded, democratic union of females is activated by shared travel in these texts. This is not to suggest that such temporary female communities might not have formed in Federalist America at various times and for various reasons. However, Knight and Alcott, both of whom reached womanhood with

uncommon qualities and desires for women of their times, constructed female travels as solo journeys largely independent of the support of women. If a travel-generated alliance of females existed in Knight's or Alcott's experiences, it appears to have been untranslatable, and indeed unrepresentable, for them in their autobiographic narratives.

In *Hospital Sketches* Alcott multiply deploys and defies conventions of the travel narrative. The travel section of *Hospital Sketches* is a conventional preparation for the less conventional hospital sketch to come in the text, one less bound by fixed gender roles. Alcott constructs Trib, her Dickensian fictive persona, as the stereotypical spinster traveler whom critics would later characterize "as indomitable, eccentric and mostly rather crazy" and as a revision of that stereotype (Mills 32). Trib has conventionally feminine and masculine characteristics, and she describes the domestic as well as the political, personal, and public. Further, Trib confidently travels alone. Alcott's portrayal of Trib's unaccompanied journey recognizes, as Schriber rightly observes, that "female vulnerability, codified in conduct books, fiction, and the press, was a rhetorical and actual obsession in Victorian America" (79). By "satiriz[ing] the need for escorts," in Jane E. Schultz's reading, Alcott mocks that obsession ("Embattled Care" 116). Alcott's revision of the women's travel narrative intersects with the nursing narrative in *Hospital Sketches*: opening with and then interrupting the more familiar form of the women's travel narrative works to unsettle readers with humor and to prepare them for the unfamiliar, unsettling nursing narrative that follows. Schriber writes that Alcott's use of the travel narrative corresponds with other "women's texts of travel [that] make gender visible at certain sites as women work their way into the world of travel writing and around the constraints of gender" (61).

Reading the nursing sketch that follows Trib's travels in *Hospital Sketches* in conjunction with the travel narrative of Knight's *Journal* makes plain that both literary forms serve as sites for women to write their autonomous behaviors. In each case the generic circumstances necessary (travel and nursing) allow the woman writer to position herself or her female persona as superior to or independent of other women. In both literary forms uncommon experiences away from home are employed in an attempt to make the female self legible on its own among or without other women. In Alcott's *Hospital Sketches* and Knight's *Journal*, as well as in other works discussed in this study, the compulsion to write the female self emerges from and is abraded by prevailing gender assumptions inhabited, promoted, and resisted by other women.

Other women's Civil War nursing experiences were published, but Alcott's was one of the earliest accounts.⁷ This absence of an immediate literary model is matched and explained by the absence of an experiential model. In antebellum America, only women affiliated with religious orders were permitted to nurse professionally. Schultz provides valuable context in her discussion of women beginning to figure into an increasingly professionalized medical discourse before the Civil War, having been "excluded from medical networks on the basis of a biological determinism that cast them as unfit" ("The Inhospitable Hospital" 366). Additionally, as Carroll Smith-Rosenberg argues in her groundbreaking work on Victorian sex and class roles, the mid-nineteenth-century movement by "well-connected physicians . . . to upgrade standards within the medical profession and simultaneously to defend their practices against rural and irregular physicians" also served to limit women's roles in professionally practicing medicine as doctors, midwives, or nurses (230). The next chapter's reading of Civil War reminiscences by S. Emma E. Edmonds, Mary Livermore, and Annie Turner Wittenmyer supplements this discussion in its examination of women's public and private roles in the war effort despite—and at times because of—their tightly restricted participation in the medical professions.

At the time of *Hospital Sketches*, forty-two-year-old Florence Nightingale embodied the figure of the female army nurse.^{8,9} Her Crimean War service as well as her influential works *Notes on Nursing* (1859) and *Notes on Hospitals* (1859) led contemporaries to identify her "with the reform of hospitals and military medicine as much as with nursing" (Charles E. Rosenberg 1). Nightingale had a compelling "concern with cleanliness and ventilation" in hospitals, as well as a passionate commitment to advocating her nursing philosophy and methods in writing (2). Her texts authorized female nurses to practice these methods and to promote them in writing. Alcott read Nightingale's *Notes on Nursing* in preparation for nursing, and her remarks about hospital conditions in her writing align with Nightingale's views and convictions (Hawkins 4).¹⁰ In *Hospital Sketches* Trib approvingly notes "the long, clean, warm, and airy wards" of a neighboring hospital and the "draft of fresh air flowing in."¹¹ From her position as a self-described "used up nurse," she rebukes "any hospital director" who disagrees with these practices. She also lovingly describes Dorothea Dix, Superintendent of Union Army nurses, as "our Florence Nightingale" (55).

Conventions established by Nightingale's writing also contributed to the breakdown of convention afforded by the Civil War. When war broke out, entrenched resistance from the federal government and male

medical establishment seriously hampered women's early efforts (more than twenty thousand women applied for work in Confederate and Union military hospitals) to earn money, seek adventure, or express patriotism by volunteering to nurse the wounded (Schultz, "The Inhospitable Hospital" 363). Mary Livermore in her nursing retrospective, *My Story of the War: A Woman's Narrative* (1889), discussed in the next chapter, explicitly compared early stages of the Civil War with the Crimean War: "All (there) were tied up with official formalism until Florence Nightingale, with her corps of trained nurses and full power to do and command, as well as advise, landed at Scutari, and ordered the store houses opened" (qtd. in Thompson 76). Nightingale's groundbreaking representation of effective female nursing in her writing facilitated the U.S. government's and the male medical establishment's eventual capitulation to women's war nursing.¹²

Alcott would also have been familiar with the July 1862 visit of Ralph Waldo Emerson's daughter, Ellen Tucker Emerson (for whom Alcott had first imagined the stories of *Flower Fables* [1854]), to Portsmouth Grove Army Hospital (which housed "1700 or more sick and wounded soldiers") in Newport, Rhode Island, several months before Alcott left for Washington. Alcott probably would have read Ellen's at times lengthy letters to family members about her visit ("It took me all day to write it [her previous letter], and my arm ached"). Ellen's observations of and conversations with soldiers ("How well they talk!") reflected her Union zeal: "They are, so many of them, patriotic and fiery through their sickness that I was wholly satisfied with them, and very much elated after my talks with them." She also recorded a parenthetically clarified gendered moment when tea was distributed "to nurses (soldiers of course) who carried it to their men" (Gregg 291, 284, 291, 275).

Hospital care of male soldiers by female nurses is seldom as central in other Civil War nursing narratives as it is in *Hospital Sketches*. Subsequent nursing narratives are longer, written by women whose war service was not quickly cut short by illness as was Alcott's, and more extensive, including descriptions of travel to battles and hospitals, fundraising, administration of nursing efforts, distribution of supplies, and difficulties in obtaining appropriate food for the wounded. Narratives written after the war tend to be self-consciously aware of the historical moment in accounts of meetings with Ulysses S. Grant, postassassination retrospectives on Lincoln, and focus on the war's end.

Hospital Sketches most obviously sets the tone for subsequent women's nursing narratives in S. Emma E. Edmonds's *Nurse and Spy in the Union Army* (1865), discussed in the next chapter. *Nurse and Spy* twice

quotes "Miss Periwinkle" (75–77, 237) and in at least two other sections plagiarizes parts of *Hospital Sketches* with minor alterations and without attribution (238–39, 250–51).¹³ However, aspects of *Hospital Sketches*—for instance, constructions of wounded soldiers as boys by the nurse/writer and constructions of the nurse/writer as mother or sister by soldiers (and the writer herself)—that may seem to set the tone for subsequent nursing narratives are so prevalent in Civil War narratives generally that *Hospital Sketches* seems more representative than initiating of a discourse for treating gender that resulted from opportunities for female travel, work, and self-invention provided by the war. Women's energetic Civil War involvement is documented in works such as Frank Moore's *Women of the War* (1866), which contains over forty chapters on individual women and women's war efforts (with no mention of Alcott), and Linus P. Brockett and Mary C. Vaughan's *Woman's Work in the Civil War* (1867), nearly eight hundred pages of small print with sections on individual women administrators, organizers of aid societies, and volunteers in non-nursing capacities, which briefly mentions Alcott (her first name misspelled as "Louise") and *Hospital Sketches* in an extensive list in the book's final section (793). Focusing on female Civil War hospital nursing, *Hospital Sketches* accurately captures an emerging discourse for treating gender that is perpetuated and sustained in subsequent nursing narratives.¹⁴

II.

[The nurse] must have a respect for her own calling. . . . [S]he must be a sound, and close, and quick observer; and she must be a woman of delicate and decent feeling.

—Florence Nightingale, *Notes on Nursing*

In late 1862 Alcott wrote in her journal: "November. Thirty years old. Decided to go to Washington as a nurse if I could find a place. Help needed, and I love nursing and *must* let out my pent-up energy in some new way" (Myerson et al., *Journals* 110). Arriving at the Union Hotel Hospital in 1862 immediately after the bloody Battle at Fredericksburg,¹⁵ Alcott served as a nurse for six weeks and then contracted typhoid fever. She returned home to New England, near death. Once recovered, she edited and revised her war letters to her family, also drawing on the brief private journal she had kept while in Washington.¹⁶ For her fictive self she used Tribulation Periwinkle, a woman who goes to Washington to nurse in a Civil War hospital. The resulting sketches, published in

the antislavery Boston *Commonwealth* in spring 1863, “met with instant success and were copied in papers all over the North” (Jones xli). After their serial publication Alcott added two new chapters; the collection was then published as a book, which was also well received. The success of *Little Women* (1868, 1869) led to a new edition, *Hospital Sketches and Camp and Fireside Stories* (1869), which contained *Hospital Sketches* and eight stories. The version of *Hospital Sketches* available in *Alternative Alcott* (1988) emerged during these multiple generic adaptations.¹⁷

In the first chapter of *Hospital Sketches*, Trib’s hectic self-definitions as she decides to enlist invoke a sisterhood of nurses led by both Miss and Mrs. Generals (“we hear no end of Mrs. Generals, why not a Miss?” [4]). Once she has been accepted and is ready to leave for Washington, however, sex-gender identity is foregrounded in her comparing herself to “boys going to sea” (4) and to “the soldier who cries when his mother says ‘Good-bye’” (6), as well as her hugging her family “without a vestige of unmanly emotion” (5). As Trib boards the train, her presexual nature is established in a partial assertion of conventional femininity: “I clutched my escort in a fervent embrace, and skipped into the car with as blithe a farewell as if going on a bridal tour” (6). Aligning herself with a prehoneymoon bride, Trib draws on social approbation afforded women who marry. Her comparison likewise signals impending loss of virginity and initiation into sexual matters. Lest this female persona be confused with Alcott—and suggest Alcott’s own sexual nature—the text assures us of Trib’s authenticity. The “remarkably elastic” nature of the travel narrative allows Alcott to include travel notes to “convince the skeptical that such a being as Nurse Periwinkle does exist, [and] that she really did go to Washington” (Schriber 58, 12). Trib, intended to veil Alcott from the public, is, however, a temporary fictive representation. At the end of the text Alcott mixes irony and femininity to end Trib’s “bridal tour.” Self-conscious in her retrenchments from Trib’s unconventional experiences, Alcott then writes Trib’s epitaph.

On her journey Trib defines herself as subject to misreading, sometimes by others (“I’m a bashful individual, though I can’t get anyone to believe it” [6]) and sometimes by herself (“I’m a woman’s rights woman . . . [but] I was now quite ready to be a ‘timid trembler,’ if necessary” [9]). Once she arrives at the hospital, she observes that it is a place of observation, where she will be subject to close (mis)reading by male strangers, “all staring more or less at the new ‘nuss,’ who suffered untold agonies, but concealed them under as matronly an aspect as a spinster could assume, and blundered through her trying labors with a Spartan firmness” (21).¹⁸ That Trib reads male scrutiny as sexual is revealed by

her response. She attempts to protect herself (a self-defined "spinster") from gazes she reads as sexualized by promoting a false reading of herself as a matron—that is, according to her implicit definition, as a non-spinster—a sexually experienced, though asexual ("Spartan"), woman.

Alcott's adoption of multiple roles in *Hospital Sketches* (beginning on the first page with Tribulation Periwinkle) aligns with Fanny Fern's use of a range of personae in her early periodical writing. However, while Fern and Alcott assume a variety of roles in their texts, they diverge regarding use of a conventionally understood feminine voice (a heightened version of what Trib names a "timid trembler" [9]). Fern nimbly adopts such a voice—with varying degrees of the sexual and flirtatious—when it suits her subject and perceived audience. Indeed, Fern relishes her ability to perform the feminine convincingly and so to persuade readers, or at least give them pause, regarding her identity. A not insignificant portion of Fern's pleasure in this act is her understanding that the persona of a demure woman can be as authoritative as the various male personae she adopts at other times.

In *Hospital Sketches*, however, while Alcott exhibits her own glib fluency with a range of personae, the role of the sexual female is markedly absent. In its place Alcott assigns an asexual mutability to Trib. Though her use of the asexual can be understood in a variety of ways, I read it as a substitution for the sexual that is pivotal to her project in *Hospital Sketches*. To even briefly feminize and so sexualize Trib would critically interrupt Alcott's considerations of gender construction in the text. The feminine performance that Fern is amused to (de)activate invokes the type of female that Alcott/Trib is not (and cannot, will not, be). The inability to occupy feminine cultural spaces without dis/ease motivates Alcott/Trib's desire to nurse in the war. That temporary national location is where she hopes to explore—as she cannot at home—an alternative sex-gender identity for a white middle-class woman in the nineteenth-century United States. I do not mean to suggest, however, that the personae Alcott adopts in *Hospital Sketches* conceal a coherent self. Though Fern and Alcott differ significantly in their uses and inhabiting of a feminized role, the "I" Alcott declares in *Hospital Sketches* is as multiple and as performative as Fern's.

Other authors in this study negotiated demands of compulsory femininity with choices that are compelling in their own right. For instance, Knight adopted a feminine voice in her text in an attempt to conventionalize her unconventional behaviors. S. Emma E. Edmonds wrote of temporarily passing as a man and so was able to avoid those gendered demands for a time. Mary Livermore and Annie Turner Wittenmyer

wrote texts invested with insistence on their conventional behaviors and womanhood. In all cases, these white women writers negotiated a desire to publicly declare a self with their vexed awareness of prevailing constructions of femininity.

After Trib fears she was being eroticized in the male gaze and tries to desexualize herself in response, she attempts to desexualize wounded men with her own gaze and rhetoric, seeing them as “our brave boys; as the papers justly call them,” their suffering making “one glad to cherish each as a brother” (22). Drawing on authority of news reports, Trib moves from constructing the wounded patients as boys to embracing them as brothers, both readings seeming to allow only nonsexual adult affection. When subsequently told to order the men to strip and to bathe them (“Come, my dear, begin to wash as fast as you can. Tell them to take off socks, coats and shirts, scrub them well, put on clean shirts, and the attendants will finish them off, and lay them in bed” [23]), Trib is confronted by the near-naked (and potentially sexualized) male body. The itemizing of garments makes clear the men will keep their pants on, but at the same time suggests how much of the male body will be exposed. Though references to amputated male limbs are common in *Hospital Sketches* as well as in other Civil War nursing narratives, the male body in its entirety—as opposed to severed parts of that body—is rarely invoked. Its provocative presence here suggests Trib’s (and Alcott’s) thinly suppressed anxieties and fearful interest concerning physical contact with men. These concerns are somewhat muted by the comic examples Trib prefers to the reality that leaves her at a loss for words (“If she had requested me to shave them all, or dance a hornpipe on the stove funnel, I should have been less staggered; but to scrub some dozen lords of creation at a moment’s notice, was really—really—” [23]). Trib again turns to rhetoric that endeavors to desexualize (“there was no time for nonsense” [23]) in order to reconfigure the potentially sexual reality of a woman bathing half-naked male strangers. She chooses “a withered old Irishman” (23) to bathe first, and his comic remarks result in

a general grin, at which propitious beginning I took heart and scrubbed away like any tidy parent on a Saturday night. Some of them took the performance like sleepy children, leaning their tired heads against me as I worked, others looked grimly scandalized, and several of the roughest colored like bashful girls. (23–24)

Trib’s proffered reading of herself has moved from bride to matron to parent, while her renderings of male patients have moved from boys

to brothers to children to female children. These constructions resist desexualization except for the "grimly scandalized" men who, like Trib, recognize the erotic potential of their situation but, ill-positioned to prevent it or protest against it, are unable to reconfigure it. Unlike Trib—and unlike men who are not wounded and hospitalized—they are not in command. As male patients they forfeit authority over their bodies and the sexual sensibilities that they held in the more overtly sexualized world outside the war hospital.

By the time she has finished bathing the men, Trib has taken rhetorical control of their (chaste) physicality ("having got the bodies of my boys into something like order" [29]). She basks in what she now views as their unerotic gaze, their faces "lighting up, with smiles of welcome, as I came among them, [I] enjoy[ed] that moment heartily, with a womanly pride in their regard, a motherly affection for them all" (29, 32). Trib's construction of herself as mother and woman is at least temporarily established as Alcott ironically and self-consciously reintegrates Trib into sex-gender conventions. In her satisfaction Trib is convinced that the stripped men have been desexualized by/for her. Likewise, the act of her bathing them has, by her implication and by what she assures herself is the now nonsexual nature of their observation, desexualized her for them.

Earlier in the text, Trib reads passive observation by male patients as predominantly sexual and responds by attempting to revise the men and herself in their eyes. She confesses, however, to her own surveillance while the men sleep, gazing at them more closely than she would dare when they could return her stare and limiting her gaze to their faces:

Many of the faces became wonderfully interesting when unconscious. Some grew stern and grim[;] . . . some grew sad and infinitely pathetic, as if the pain borne silently all day, revenged itself by now betraying what the man's pride had concealed so well. Often the roughest grew young and pleasant . . . letting the real nature assert itself. . . . I learned to know these men better by night than through any intercourse by day. (34–35)

Observation of individual male patients in other Civil War narratives is typically limited to brief, pious deathbed scenes. However, in Alcott's hands, clinical conventions of the hospital sketch and her use of them to endeavor to desexualize male patients allow Trib to consider culturally constructed notions of gender ("man's pride") while staying away from

male sexuality. For Trib, sleep frees men from prevailing gender constraints that require them to conceal pain and what she constructs as their “real nature[s].” During waking interaction, compulsory gendered behaviors prevent her (and, ostensibly, any observer) from knowing the men in this way. In nighttime observation, however, gender constraints are temporarily loosened by sleep, allowing Trib to more fully “know” the men. Her nighttime observation is not a Foucauldian regulatory gaze of surveillance policing a captive population. Rather, Trib covertly studies men to determine how gender figures into their identities and, by implication, into her own identity. She may limit her reading to the men’s faces rather than their full bodies because the bodies are covered (and so less readable) or because such observation in the absence of professional necessity (bathing, bandaging) could provoke a sexual reading and could resexualize the male bodies she has been at pains to desexualize. Her privileging and reading of men’s faces is a private act, stripping the men of emotional concealment, just as public bathing stripped them of physical concealment.

Trib fears sexual implications in the daytime gazes of male patients. Her initiation of the nighttime gaze marks her reading of the gaze as sexually chaste, while also signaling the agency the hospital encourages in her. Moving beyond her previous limited experience of women and men, Trib recognizes an opportunity to explore gender construction—a subject central to her tentative self-definition. Her monologic nighttime gaze at the men begins the emotional interaction for which Trib traveled to Washington. That intercourse must be fully realized for Trib to lose her emotional virginity. To accomplish this, Trib must engage in dialogic, emotional intercourse with a conscious, mature man who, like her, evades issues of (his) sexuality.

This male counterpart, John, soon arrives, preceded by praise from another patient, which increases Trib’s desire to observe him:

I had some curiosity to behold this piece of excellence, and when he came, watched him for a night or two, before I made friends with him; for, to tell the truth, I was a little afraid of the stately looking man, whose bed had to be lengthened to accommodate his commanding stature; who seldom spoke, uttered no complaint, asked no sympathy, but tranquilly observed what went on about him. (38)

Trib refrains from immediately approaching him due to the implicit maturity of his imposing height and dignified behavior. His silent observation and his lack of complaint or supplication are read by Trib as a

withholding that resists her construction of male patients. Her physical description of him contains none of her characteristic humor and instead anticipates the pain that for her will desexualize him:¹⁹

A most attractive face . . . as yet unsubdued by pain; thoughtful and often beautifully mild while watching the afflictions of others, as if entirely forgetful of his own. His mouth was grave and firm, with plenty of will and courage in its lines, but a smile could make it as sweet as any woman's; and his eyes were child's eyes, looking one fairly in the face, with a clear straightforward glance, which promised well for such as placed their faith in him. (39)

John's being seriously wounded, and thus stationary, allows Trib again to take advantage of her professional status and gaze at the male face, this time in repose if not in sleep. Trib observes the captive mature maleness that she would otherwise avoid and studies that maleness further. Her examination reveals a face combining typified qualities of man ("grave and firm," "will and courage"), woman (a mouth "as sweet as any woman's"), and child ("child's eyes"). The reading Trib imposes on John's face crosses boundaries of gender and age, suggesting John's face as Trib's ideal human face. Trib's reading of John's face promotes a belief in natural human goodness, a quality heightened by the lack of human goodness that has resulted in the need for the war hospital.

Descriptions of John in *Hospital Sketches* as a "dying statesman or warrior," and in death as "a most heroic figure," modify Alcott's more class-specific observations in the journal she kept while in Washington, which see John as "what we call a common man, in education and condition, to me [he] is all I could expect or ask from the first gentleman in the land. Under his plain speech & unpolished manner I seem to see a noble character" (Myerson et al., *Journals* 39, 45). Alcott's journal typically records experiences later significantly expanded in *Hospital Sketches*, except in this instance where, in the move from private journal to published sketches, references to John's class status are condensed and coded. In Amy Lang's considerations of class status in the mid-nineteenth-century United States, Alcott's editing of her original comments regarding John corresponds with "the new awareness of class distinctions among Americans at midcentury and the increasingly problematic nature of social classification" (3). The journal comments signal Alcott's awareness of class divisions and recognition of John's class status as lower than her own. Subsequent abbreviation and revision of Alcott's class-specific descriptions of John in *Hospital Sketches* point

to subordination of class issues, reflecting, as Lang correctly argues, “the characteristic, even definitive, denial of class by the nineteenth-century middle-class” (10). This editing is crucial to Alcott’s establishment of shared class status between John and Trib that will enable her to develop their emotional intercourse. Class difference, coded as it is, functions as an essential component of Alcott’s literary ability to violate conventional norms of femininity.

After Trib learns that John is dying, visible signs of his suffering allow her to embrace him physically and emotionally. He looks “lonely and forsaken,” and he weeps, but this does “not seem weak, only very touching, and straightway my fear vanished, my heart opened wide and took him in, as, gathering the bent head in my arms, as freely as if he had been a little child, I said, ‘Let me help you bear it, John’” (40). When he responds gratefully, Trib asks why he had not sought comfort earlier, seeking (and receiving) reassurance that his emotional independence was not a rejection of her and her nonsexual nursing aid. Satisfied, she concludes with a significant step in self-characterization, seeing herself in his eyes as “the poor substitute for mother, wife, or sister[,] . . . a friend who hitherto had seemed neglectful” (41). For the first time, Trib characterizes herself as wife, as sexual partner, and touches a male patient for emotional reasons. Trib participates in what Harriet Blodgett defines as “*womanliness* in culturally approved terms [that] carries the satisfaction of being needed, of having others dependent upon oneself for nurturance” (159). Had Trib touched John outside of her professional duties before she knew he was dying, her touch could have been (self-) read as erotic. Now, as a result of her knowledge and emotional reaction to his impending death, her touch can be (self-) read as female tenderness, allowing Trib to characterize herself as a wife substitute.²⁰

Generic boundaries of the hospital sketch authorize an emotional intercourse between Trib and John. Less clinical, and so necessarily more sexualized, genres would resist or further complicate such interaction. Even so, in referring to John as “the manliest man among my forty” who nevertheless said, “‘Yes, ma’am,’ like a little boy” (41), Trib veers from man to boy and sexual to less sexual in her characterizations of him. Trib’s intimacy with John is complicated by her fear-inflected binary of sexualized and desexualized. As she attempts to construct a female/male friendship that extends beyond the body and emphasizes comradeship between a man and a woman of like spirits, her reading reveals John as a male rendering of Trib herself. Both John and Trib are thirty years old; both are described as “bashful” (41, 6); Trib’s androgynous physical description of John could also serve as a description of

herself. John is a son essentially married to his mother (John wears her ring that "she gave [him] . . . to keep [him] steady;" and he "must be father to the children and husband to the dear old woman, if I can" [42]), while Trib is a daughter whose mother wails at her leaving and sees her off to war as though she were a son. Both go to war for primarily personal reasons that suggest their gendered roles: Trib because she "wants something to do" (3), John because "I wanted the right thing done" (42). Trib asks John if enlisting wasn't as bad as marrying—that is, since either would result in his leaving the family that relies on him. Because soldiering had long been a choice for men, while women volunteering for wartime nursing in the nineteenth-century United States had only recently become acceptable, Trib needs John's gender-specific reading of (male) enlisting to arrive at her own reading of (female) volunteer nursing. By her question Trib seeks affirmation from John for the social worth of military service. Alcott makes it plain that Trib connects the act of enlisting to the act of marrying, suggesting that, to her, enlisting to serve in the war—as soldier or nurse, as man or woman—could be understood as a culturally sanctioned, asexual substitute for marriage.

Similarities between John and Trib that cross or elide gender boundaries culminate in John's death. John's doctor assigns Trib the task of telling John he is dying, because "women have a way of doing such things comfortably" (39). The male doctor's choice of Trib is appropriate, but not for his gendered reasons. Both Trib and John privilege toughness and independence, seeing these as valuable qualities that have allowed them to negotiate life's hardships successfully. The strength and self-reliance they share make Trib the fitting bearer of the information that these serviceable qualities cannot save John from fatal wounds that resulted from his choice to enlist. Likewise, Trib's strength and independence will not save her from physical risks associated with her choice to nurse. After John weakens and dies at the end of chapter four—in a scene abstaining from religious pieties and sentimental language repeatedly found in deathbed scenes of subsequent Civil War nursing narratives—chapter five begins with Trib's own near-fatal illness.

The literal death of John the soldier parallels the professional death of Trib the wartime nurse. John is the last person Trib nurses before she falls ill, becomes a hospital patient herself, nearly dies, and returns home, "end[ing] my career as an army nurse" (60). The primarily asexual (and so for Trib mostly nonthreatening) emotional exchange between John the patient and Trib the nurse within the wartime hospital allowed Trib to consider similarities between cultural positions of white, nineteenth-

century U.S. adult women and men. Implicit comparisons between female nursing and male soldiering, and between roles of devoted adult daughter and devoted adult son, suggest a larger exploration of gender construction. However, this exploration occurs in the temporary location of the wartime hospital where women are permitted to work only because the need is dire and where all men and women are at high risk of illness and death. If Trib's considerations of gender construction are related to the site and conditions that allow her to think them, then such thoughts are as unconventional, temporary, and dangerous as the war hospital itself.

Trib's exploration of gender construction depends on Alcott's foregrounding of asexuality. While gender and sexual power regularly drive nineteenth-century U.S. social and cultural arrangements, in the world of *Hospital Sketches* the asexual shapes Trib, Alcott, and the fragmenting nation. In Alcott's hands, the neglected, disdained asexuality commonly assigned to spinsterhood (Alcott's, Trib's, and other women's) and to the emerging role of the female nurse is a transformational force. Asexuality brings Alcott's authorship into being, is essential to Trib's loss of emotional virginity, and expands the role of nurse/author. Indeed, the asexual nurse/author is activated in the text as crucial to the divided nation. In *Hospital Sketches* Trib's nurse/author role is extended "into the larger symbolic one of the guarantor, like her patient John, of democracy itself. Like Whitman, but in a somewhat less erotic way, Trib and John are the wound-dressers of the nation." In her inspired recognition of the latent potency of asexuality and, correspondingly, in her rejection of its habitual disparagement, Alcott revises "asexuality into a stance of national sympathy."²¹

The U.S. Civil War served as the de facto workshop for such revision. Though masculine sexual power determined social control, wartime disorder resulted in a temporary lessening of hegemonic vigilance. Thus, even while cultural agents (officials in the federal government and the male medical establishment, among many others) remained alert for deviations from the normative, slippages nonetheless occurred. My next chapter discusses S. Emma E. Edmonds's successful wartime performing of the masculine and Mary Livermore's and Annie Turner Wittenmyer's observing and recording of other women's failed attempts at such performances. The comradely friendship between Trib and John emerges from and is allowed by this same wartime moment. Trib and John are Americans from different U.S. geographic regions who travel to war to serve the Union. Their asexual, patriotic bond gestures toward the common equality Abraham Lincoln once imagined for the

post-Civil War United States. After her rich but brief and interrupted war participation, Alcott in *Hospital Sketches* imagines how the asexual might contribute to, might be valuable in, and indeed might be essential to the next stages of democratic nation building.

That vision, as well as Trib's nursing, ends abruptly when, during her illness, Trib's father arrives to take her away from the hospital: "at the sight of him, my resolution melted away, my heart turned traitor to my boys, and, when he said, 'Come home,' I answered, 'Yes, father;' and so ended my career as an army nurse" (60). The presence of Trib's father soon after John's absence through death demonstrates the father's replacement of John as the man with whom Trib is most closely associated. The text self-consciously retreats from Trib's emerging independence and professionalism. John was not a relative by blood or marriage, was unknown to Trib's family and friends, was of lower class status than Trib, and was unmarried and so potentially sexualized, all of which made Trib's close connection to him unconventional and inappropriate when viewed by the world outside the hospital. Her father's much more conventional and acceptable authority likewise conventionalizes Trib, returning her to her subordinate role of child (non-adult, non-nurse). The arrival of the father—just "the sight of him"—leads Trib to reject her patients as well as her newfound understanding of herself.

Trib's behavior after her father appears (she yields fully to him; she "melts" into physical and emotional weakness) indicates recognition that she is returning, willingly if not happily, to an accepted female norm. While I do not wish to unduly emphasize the progression of female autonomy followed speedily by debilitating illness, this sequence of events invites speculation. That Trib's illness occurs directly after liberties afforded her by the war hospital suggests severe penalties for female independence. Significantly, Trib's war experiences closely mirror Alcott's own. Alcott, while nursing in Washington, DC, wrote letters home, kept a journal about her experiences, and then contracted typhoid. To put it plainly, Alcott nursed, wrote about it, and, as a result, almost died. She never regained her prenursing good health or that measure of autonomy. In the text of *Hospital Sketches* that Alcott assembled and wrote after she recovered from illness, she meticulously replicates that punitive progression.

The disciplinary in Alcott's life was soon augmented by the terrifying when, as cited earlier in this chapter and referenced in the chapter title, during her recovery Alcott experienced a delirious fear of being left alone (that is, without another woman) "when the room was full

of men" (257). A few months later, however, Alcott would write of Trib's satisfied viewing of rooms full of men as sons/brothers in *Hospital Sketches*. Trib's platonic self-construction as mother/sister to men is destabilized by Alcott's postnursing panic. Near-fatal illness rendered as punishment for female independence mixes with a hallucination of men so threatening as to cause fearful agitation. Without diminishing the force of these gendered scenes, I argue that they are lesser symptoms that emerge from the larger governing disorder of Alcott's lifelong domination by her egotistic father, Bronson Alcott. In Alcott's wartime experience and in *Hospital Sketches*, the father arrives unannounced, uninvited, unwelcome.²² He not only disrupts Trib's/Alcott's independence; he peremptorily ends it ("When he said, 'Come home,' I answered, 'Yes, father;' and so ended my career as an army nurse" [60]). His very appearance terminates Trib's/Alcott's rich participation in possibilities of gender, asexuality, and nation building.

Though Trib agrees to leave with her father, this rejection of the hospital and of nursing is ultimately emotionally incomplete. She "shall never regret the going, though a sharp tussle with typhoid, ten dollars, and a wig, are all the visible results of the experiment; for one may live and learn much in a month" (60).²³ Her pensive naming of nursing as an "experiment" points to her return to conventionally gendered (i.e., non-experimental) life.²⁴ Trib's remark, implying that wartime nursing produced other, less visible results than illness, money, and a wig, suggests that the living and learning she experienced remain alive to her, private and unavailable for glib listing. Alcott's mix of humor, irony, and wistfulness problematizes the overt content of her text as she approaches and yet retreats from an alternative sex-gender identity for a white middle-class woman in the nineteenth-century United States.

A child's deferring to the parent and a woman's loss of hair are conventional forms of disempowerment.²⁵ Thus, the arrival of her father at the hospital coupled with her hair loss due to illness work to diminish Trib. Previous attempts to desexualize in the text were reactions to the unsettling possibilities of Trib or her patients being viewed as sexual. Here, neither the arrival of her father nor the loss of her hair is presented as a reaction to sexuality, a need for Trib to be seen as asexual. Instead, both are reminders of Trib's subordinate place (to her father, to the gender-specific ways women are read) in the hegemonic structure that tolerates the temporarily necessary aberration of the war hospital. Trib partially scripts female hair loss as a wartime sacrifice, an injury not unlike a wound that she has sustained in service to her country: "though a sadly womanish feeling, I take some satisfaction in

the thought that, if I could not lay my head on the altar of my country, I have my hair" (61). Still, Trib has lost possibilities of soldiering and war nursing on some sort of equal level. Her feeling is "sadly womanish"; she has been denied the patriotic opportunity to give her life for her country. Like Susan B. Anthony, Trib must learn that "women can neither take the ballot nor the bullet" (qtd. in Young, *Disarming the Nation* 15).²⁶ Alcott's comments on the sacrifice of Trib's hair are inflected with characteristic wryness and irony, again complicating the text. Having positioned Trib to temporarily evade cultural assumptions, Alcott can only uneasily reinscribe her in those norms.

Revision—and resistance to revision—of Trib's wartime nursing continues with the poem concluding the "Off Duty" chapter of *Hospital Sketches* on the "death" of Nurse Periwinkle:

Oh, lay her in a little pit,
With a marble stone to cover it,
And carve thereon a gruel spoon,
To show a 'nuss' has died too soon. (61)

Alcott employs ironic humor in this mock epitaph as she self-consciously retreats from the (self-) representation of Trib and its value to her. The four-line verse, with its rhyming couplets, indirect diminutive portrayal of Trib (her body requires only a "little pit"), and slang rendering of "nurse," attempts to return to the more lighthearted tone of prehospital sections of *Hospital Sketches*. This rhetorical movement fails, complicated as the text is by the serious treatment of John's death and—despite the poem's insistence on equating Trib's leaving the hospital with Trib's death—by Nurse Periwinkle's recovery. The Trib/nurse identity, now promoted as a no longer useful, fictive self-representation, is dismissed with mock mourning. Trib the nurse who went on the equivalent of a bridal tour begins to be conflated with Alcott the self-identified spinster.

The denial of Trib must not obscure the chain of events in and out of *Hospital Sketches* that preceded it: Alcott's illness cut short her nursing experience, killing her possibilities for nursing and for assuming a larger role in the world opened to her in the war hospital. As Alcott's possibilities died with her contracting typhoid, Trib, the fictive representative of those possibilities, dies, too. Alcott has recorded and now silences another female representation. However, Trib's voice, as with the range of female voices recorded in texts by Sarah Kemble Knight and Fanny Fern discussed in earlier chapters, remains available in the

text itself. The poem's "too soon" points not only to the short tenure of Trib's nursing experience but also to the premature death of possibilities that ended with illness and a return to conventional life. The self-conscious playfulness of the ending poem is contradicted by pressures that combined to make Trib leave the hospital. Only when debilitated by disease, confronted with her father's compelling presence, and unable in her illness to draw strength from her fragile new identity does Trib succumb to the comforting lure of her old identity. Only then is Tribulation Periwinkle reconfigured into Louisa May Alcott.²⁷

The personae of Trib—nurse, patriot, woman at large in the wider world—served to veil Alcott from the public, to ensure that Trib's freedoms were not confused with Alcott's acceptance of her own social restrictions. Once the use of the nurse as a representation of the self had been forced to end, the text produced about that experience needed to be realigned with conventional cultural values of readers if it were to succeed. Serial publication of the sketches privileged Trib's hospital experience. However, when the sketches were collected as a book, Alcott added two new chapters—"Obtaining Supplies" and "A Forward Movement," which became the first and second chapters—describing Trib's journey and reinforcing the more conventional travel narrative aspect of the text.²⁸ For instance, a *Commonwealth* reader would have been introduced to Alcott's hospital writings with the first published sketch, "A Day," which opens as Trib is called to bathe the wounded; a *Hospital Sketches* reader would have begun with Trib's decision to "enlist" and the description of her travel to Washington, not reaching the sexually complicated scene of "A Day" until the book's third chapter. Such revisions reshape the original sketches' predominant focus on the autonomy of the nursing experience of this middle-class white woman. These alterations display Alcott's understanding of genre as what Frederick Jameson has described as a "social contract" between any "writer and a specific reading public" (160). Alcott's modifications of *Hospital Sketches* recognize the efficacy of generic adaptation and demonstrate her awareness of readers' assumptions.

Later revisions continue these strategies, showing Alcott's successive use of letters, sketches, travel narrative, book, and collection, each gradually modifying and reframing her nursing experience. For the 1869 *Hospital Sketches and Camp and Fireside Stories*, Alcott followed advice to edit a description of a negligent hospital chaplain—"by taking out all Biblical allusions . . . the book may be made 'quite perfect,' I am told. Anything to suit customers" (Myerson et al., *Journals* 164). She also agreed to the reissue of the "nonfictional" *Hospital Sketches* with

"fictional" stories that challenge the experiential authenticity of her original sketches. The first stories—"The King of Clubs and the Queen of Hearts" and "Mrs. Podgers' Teapot"—which follow *Hospital Sketches* are light-hearted, peacetime romances, situating *Hospital Sketches* as fiction among other fiction. Later, the war hospital death of wounded Murray in "The Blue and the Gray" and Nurse Hale's attitude in "A Hospital Christmas" mirror John's death and Trib's experience, further penetrating *Hospital Sketches*'s permeable boundaries between fiction and non-fiction. From the first sign of the sketches' success, Alcott's revisions steadily conventionalized her unconventional female experiences so that reader-customers would purchase her product. A portrait of Alcott's economic reliance on income from her writing and her concomitant status as family breadwinner emerges from these modifications. Incisively alert to readers' generic expectations and gender assumptions, Alcott progressively, pragmatically, and ironically conventionalized the text of *Hospital Sketches*.

However, this rhetorical movement to align the text with common gender biases should not be overrated or misread. To unduly emphasize these revisions may obscure *Hospital Sketches*'s multiple alignments of the nineteenth-century U.S. white woman writer and woman nurse. This compelling conflation was initially activated by the professional guidelines of female nursing and female writing that permitted a significantly desexualized approach to female/male interaction. That is, the female nurse attended to hospitalized men whose illnesses enabled others to view them as childlike in their physical infirmity. The nurse served in a professional capacity (not private, not conventionally feminine) and was, by regulation, typically a matron or a spinster. Presented as a matron or spinster professionally interacting with men solely because they were patients, the female nurse could be perceived to be as chaste as the men to whom she tended. This dual desexualization of male patient and female nurse afforded an uncommon space in nineteenth-century U.S. culture where a white woman could asexually participate in and observe female/male interaction. Correspondingly, the female author could write about men whose physical and/or emotional characteristics led her and readers to perceive such men as weak and so sexually disempowered. The female author wrote in a professional capacity (like the female nurse, not private, not conventionally feminine) and so in her texts could use her authorial license to render herself or her persona(e) chaste. Dual desexualization of female writer and male subject enabled the woman writer, like the woman war nurse, to asexually participate in and observe female/male interaction.

Second, in their professional relations with men, the female nurse and female writer were less likely to be viewed as defiant in their behaviors. The female nurse selflessly served and attempted to save men's lives. After establishment resistance to women's nursing was overcome, subsequent decades would come to see nursing as a socially sanctioned profession for women. In Civil War women's nursing, we see very early stages of this progression toward eventual cultural acceptance of the female nurse. The female writer's profession allowed her opportunities in her work to conceal her identity, mix the fictive and the autobiographical, and promote her behavior as conventional. These camouflaging strategies confounded (dis)approving classification of the female writer. In both cases, degrees of acceptance and pretense partially liberated the female nurse and female writer from the most pressing anxieties of social censure regarding their professional work with men.

Finally, in nursing and writing, women could evade considerations of their sexuality. In their work, in the ways detailed above, the female nurse and female writer could substitute the asexual for the sexual. The asexual allowed the female nurse and the female writer to work outside conventional feminine cultural spaces. Asexuality thus enabled expansion of roles of the female nurse and the female author. In both cases, then, such women could observe women and men together without foregrounding the sexual.

Taken together, the professional and the asexual mixed for the female nurse and the female writer, enabling a rare and valuable exploration of men and women outside an insistence on the sexual. To return to *Hospital Sketches*, just as readers saw Trib considering similarities of men enlisting, women volunteering to nurse in wartime, and either men or women choosing not to marry, so the text finally suggested similarities between women who could nurse men without necessarily sexualizing them and women who could write about men without necessarily sexualizing them. The hospital sketch appropriated the war hospital and representation of the female war nurse for the woman writer. This use of a liminal location where men and women could read each other without eroticism enabled Alcott more freely to explore nineteenth-century U.S. gender construction and the complex network of powers that constrained and defined white middle-class women and Alcott herself.²⁹

Alcott's enlistment as a nurse enrolled her directly into the assembly of liminal locations caused by the Civil War. Within the divided national space, elements of the professionalization of nursing and the transformation of the sex/gender system met in the temporary war hospital and conflated with Alcott's nurse/soldier/mother self-definitions to invite

her examination of her gendered identity. Alcott, just turned thirty years old, was, like the nation, also negotiating liminality, attempting to locate herself within a larger patriarchal, heterocentric culture. Turning to her investigations of literary categories and her reliance on the writing act, in *Hospital Sketches* Alcott feminized the Civil War narrative for herself. Individualizing the war narrative as she individualized her male patients, Alcott reconfigured possibilities of gendered identity. For her, the work of that reconfiguration would ultimately do no more than contribute to her disappointment and frustration at the circumscribed and conflicted life she later led—devoted daughter, exhausted writer, driven breadwinner. However, for some readers—women and men fettered by prevailing sex-gender assumptions—*Hospital Sketches*, with its sometimes masked gendered reconfigurations, can be read as doing its own kind of work. Though distanced from other women and races in its most immediate discourse, *Hospital Sketches* contributes to the larger dialogue of gendered writing on systems of domination by marking Alcott's wartime testing of middle-class cultural confines during a moment in the nineteenth-century United States when previously fixed boundaries—between states, genders, and races—suddenly seemed mutable.

The next chapter's discussion moves from the more tentative considerations of sex-gender identity seen in *Hospital Sketches* to representations of white women who more fully inhabited such roles by cross-dressing as male soldiers during the Civil War. I first draw on S. Emma E. Edmonds's record of her military service as "Frank Thompson" in *Nurse and Spy in the Union Army* to examine cultural implications of white women's successful wartime cross-dressing. I then turn to scenes of women's cross-dressing in post-Civil War reminiscences by Mary Livermore in *My Story of the War* and Annie Turner Wittenmyer in *Under the Guns: A Woman's Reminiscences of the Civil War* to analyze differences in public responses to representations of women's cross-dressing in decades following the war.