



Soul Sleepers: A History of Somnambulism in the United States, 1740-1840

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Soul Sleepers: A History of Somnambulism in the United States, 1740-1840

A dissertation presented

by

Kristen Anne Keerma Friedman

to

The Department of History

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for the degree of

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History

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Abstract

The strange behavior of somnambulists in the United States between 1740 and 1840 attracted the attention of different emerging professional groups, each of which sought the authority to explain what the condition revealed about the role of volition in governing the human mind, and by extension, the body. Clergy, physicians, and lawyers fought with one another for interpretive rights over the embodied knowledge that somnambulists produced while in their paroxysms. Theologians hoped to use the trance state to appropriate knowledge about the afterlife from the entranced people who claimed their souls had journeyed there. Physicians wished to use somnambulists as instruments to prove theories of mind, including the basis of phrenology. They attempted to fit somnambulism into a diagnostic category with limited success. Lawyers attempted to use the embodied knowledge gathered from somnambulistic acts to create rules managing intent and culpability. Somnambulists themselves asserted authority over containing their own conditions by resisting professional attempts to use their bodies as portals to their unconscious mind.

The group most successful at resistance was that of female somnambulists, each of who showed evidence of possessing a dual consciousness. The women whose cases are covered in this dissertation represent the broad failure of any profession to gain ultimate authority over explaining the problematic behavior posed by somnambulists. This dissertation also traces the history of how somnambulists came to be associated with criminality through their primary association with the “night season,” a cultural

framework that colonial Americans imposed on their environment to regulate disorderly conduct, especially on the part of women, young men, blacks, and Native Americans. In the United States, somnambulism was seen as a natural phenomenon. In contrast to European artificial somnambulism (a byproduct of animal magnetism), somnambulism in the United States revealed attitudes about what standards an interpreter of nature ought to hold.

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I began this project in 2007 when I wrote a Master's degree at McGill University on the history of humane societies and suspended animation. The concept of the ambiguously dead body fascinated me and I entered my Ph.D. program hoping to further explore the many unanswered questions remaining after the completion of my M.A. thesis. As I began to research each area of suspended animation that intrigued the humane societies, I became fascinated by somnambulism. It was a liminal physical state that also positioned the soul on the boundary between life and death. I wanted to know more about how early Americans thought about the voyages of the soul, the meaning of mind, and the strange powers somnambulists exercised before astonished crowds. These are the questions that motivated the writing of this dissertation.

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~ Kristen Keerma Friedman

Cambridge, Massachusetts, May 2014.

INTRODUCTION: NEGOTIATING SOMNAMBULISM

From approximately 1740 to 1840 in the United States, somnambulists – commonly known as sleepwalkers – presented a constellation of vexing behaviors that demanded interpretation.¹ A collection of case studies on somnambulists during this period reveals a set of negotiations between various sources of authority vying for the right to explain somnambulism. Ministers, doctors, gentlemen philosophers, and lawyers with competing visions on the relationship between body and mind each sought to wrest interpretive control from one another, as well as from their somnambulistic subjects in order to assert comprehensive knowledge over a strange human manifestation of American nature. Drawing on the scholarship that examines the human body as an “instrument of knowledge” in early America, this dissertation contributes to our understanding of who had the right to impose classification on natural occurrences and how.²

The competition for authority over the interpretation of embodied phenomena has a rich history in colonial and early republic America. As Susan Scott Parrish argues, the colonies were a site for the “fabrication of facts” for dispatch to the centers of knowledge production in Britain for analysis and calculation. Anglo-Americans had different ways of producing knowledge. The translation of that knowledge into text, image, and other graphic forms resulted in “conflicting representations” and contested facts.³ The epistemological regime of American curiosity was

¹ While colonial America is covered in some of the material, the majority focuses on post-1790.

² In the past ten years there have been a number of works that have explained colonial American practices of science and knowledge production. There has also been a move in the field of history of science to define the American Enlightenment as an analogous, but different epistemological shift than that of the European Enlightenment. Delbourgo uses the example of electrical experiments to explore how, in exerting control over spontaneous effusions of nature, Americans “opened a path toward enlightenment, toward rational understanding and control, yet also to wonder and the unpredictability of strange new experience.” James Delbourgo *A Most Amazing Scene of Wonders: Electricity and Enlightenment in Early America* (Cambridge: Harvard University Press, 2006), 4.

³ Susan Scott Parrish *American Curiosity: Cultures of Natural History in the Colonial British Atlantic World* (Chapel Hill: UNC Press, 2006), 7, 15. Parrish’s argument that the American colonies were “places of intense epistemological struggle and negotiation” and therefore “especially relevant to the study of the history of the

already established by the early-nineteenth century when somnambulists found themselves at the center of a contest for authoritative interpretation.⁴ How did somnambulism interact with the practice of authoritative knowledge making in the early United States?

Sleepwalkers were intermediary figures during a transitional period in the history of American professionalization in the early nineteenth century. Their actions sometimes echoed the supernatural worldview held by many colonial Anglo-Americans. Seeing while blind, the enjoyment of clairvoyant abilities, unusual physical strength and dexterity, as well as access to forbidden, or secret realms of knowledge were activities reminiscent of the Puritan world of mystical signs and prodigious punishments from a wrathful God. In the years of the new republic, however, wonder did not enjoy its earlier privileged status as scientific and medical professionalization advanced. The stakes in making a durable and credible interpretation had changed. While robust professionalization within increasingly bureaucratic institutions was not properly established until the mid-nineteenth century, differences between ministers, physicians, and lawyers' modes of knowledge making were already evident by the mid-1830s.⁵

This dissertation addresses how theological, medical, legal, learned, and individual assertions of authority over somnambulism failed to achieve broad assent. Each contender in the battle to define somnambulism and, by extension, gain power over the right to explain the

Enlightenment" provides a colonial historical background for the question of contested authority over strange powers.

⁴ Though specific in scope, examining the contest between somnambulism its authoritative explanation, my project draws on the critical scholarship on the sociology of knowledge production, for example, Steven Shapin *A Social History of Truth: Civility and Science in Seventeenth Century England* (Chicago: University of Chicago Press, 1994).

⁵ There is an established literature on the sociology of professionalization in many fields, which explains the ways in which associations based on shared knowledge are formed and managed. See Andrew Abbott, *The System of Professions: An essay on the Division of Expert Labor* (Chicago: University of Chicago Press, 1988); Eliot Freidson, *Professional Powers: A Study of the Institutionalization of Formal Knowledge* (Chicago: University of Chicago Press, 1988); Samuel W. Bloom, *The World as Scalpel: A History of Medical Sociology* (Oxford New York: Oxford University Press, 2002).

unconscious mind and the mechanism of volition, attempted to force somnambulism into classificatory frameworks without lasting success. Sleepwalking was a phenomenon that could not be easily categorized or satisfactorily explained with pre-established theories. The case studies in this work show how multiple professions attempted to turn a naturally occurring bodily condition into a diagnostic object. The stories of the sleepwalkers reveal many types of resistance to the attempt to classify, the most significant being female resistance to male authority over their own minds. All somnambulists stood firmly between the domestic oddity and the classically mad. But the female somnambulist in particular represented many things to the people who encountered her: she was an affront to male, professional authority, a natural curiosity, a portal into the unconscious mind, and a danger to those who could not anticipate her actions. The women somnambulists who feature so prominently in this work were also engaged in a struggle for authority: as patients, social deviants, and religious outliers, these women tell a story of American women seeking authority over themselves. Unlike the professional men attending them, some of these women achieved it.

In colonial America, the roots of theological assertions of authority and explanations for the phenomenon of mind-body separation are most evident in the conflict between clergy and trance-visionaries over who had the most direct, and therefore, most credible base of knowledge. In early colonial America, women and men who suffered from bodily convulsions, incoherent speech, and showed a proximate knowledge of dark things were diagnosed with demonic possession by tightly knit Puritan elites. People in liminal states who professed secret knowledge of realms beyond the visible or empirically demonstrable were tarred with accusations of witchcraft and sentenced, in some cases, to death, for consorting with the devil. Challenges to theological authority were met with measures that aimed at social control in the disintegrating

religious experiment of Puritan theocracy. Trances as a category of suspended animation are part of the history of the body and bodily expressions of religious ecstasy. What I attempt to explain in the first two chapters of this dissertation is how suspended animation in the form of trance was a site of locally embodied knowledge production about theological questions, suggesting in the process the possibility of links between seventeenth-century possessions and Great Awakening trances as related states. A full exploration of this connection lies beyond the scope of this work.⁶

Trances were markedly different from possession. The entranced, whose souls traveled to the afterlife, posed a direct challenge concerning who should use ecstatic bodily states to make pronouncements on moral status to religious communities. The Great Awakening fractured the dominion of Puritan counsel, allowing more people to use their bodies to express personal claims to spiritual self-knowledge. This contest between apparently dead trance travelers and a clerical elite struggling to maintain its authority shifted expectations. No longer could a person convulse and so easily be condemned as a witch. Religious trances were deeply tied to the social context of awakenings. Other sources of authority deferred to the clergy to sort out the facts from the fables. Trances, however, weakened the binary power relationship between the elites and their congregations, allowing seekers of medical authority in the process to begin to explain unconsciousness in non-theological terms. The Reverend William Tennent, discussed in chapter

⁶ Anne Taves, *Fits, Trances and Visions: Experiencing Religion and Explaining Experience from Wesley to James* (Princeton: Princeton University Press, 1999) multi-denominational exploration of forms of enthusiasm during the eighteenth and early-nineteenth centuries. David D. Hall, *Worlds of Wonder, Days of Judgment: Popular Religious Belief in Early New England* (New York: Alfred A. Knopf, 1989) has provided the most helpful interpretation of Puritan culture and epistemologies of wonder which has provided a cultural context for this period of the pre-history of trances. I have also relied on Carol F. Karlson, *The Devil in the Shape of a Woman: Witchcraft in Colonial New England* (New York: W.W. Norton, 1987) for her analysis of how possession was interpreted in a broader cultural setting and John Demos, *Entertaining Satan: Witchcraft and the Culture of Early New England* (New York: Oxford University Press, 1982) for a more complete history of the social factors involved in the Salem witch trials.

two, provides an example of this subtle shift in how concerned clerics and doctors each sought to explain the trance state in their own terms.

Trance narratives were popular from the revolutionary era to the end of the eighteenth century. By the time the genre returned in the Second Great Awakening, the first generations of post-revolutionary American medical doctors had been trained in the theories and practices of the Edinburgh school. Since the Second Great Awakening circumscribes part of the contest between religious and medical authority during the early nineteenth century, it is worth establishing the approach I take reflects that of Jon Butler. Butler's analysis of the origins of American Revivalism is worth engaging with on this point. Butler, not finding the term "Great Awakening" in any nineteenth-century historical accounts, suggests that it is an "interpretive fiction" that was imposed upon the cluster of revivals that occurred during the late 1730s and 1740s. Leading up to the 1740s, Butler argues that the "state church tradition" of Anglicanism shaped church practices through 1740 through "coercion, territoriality, and public ceremonialism." Declension in church membership and a new configuration of the "spiritual couple" – one that positioned women as the primary member of the congregation were major American characteristics that emerged during the period between 1680 and 1740. Butler's claim that religious pluralism made revivalism possible through doctrinal variation, regional distance, and enhanced the status of ministers is perhaps too inclusive to explain the mechanism of revival, but does best accurately describe the state of religious practice during the period.⁷ Religious pluralism allows us to make a more definite comparison with American physicians, showing how their adoption Enlightenment theories – especially those describing the mechanical process of physiological vitality – helped to affirm their collective identity. Suspended animation was a

⁷ Jon Butler, *Awash in a Sea of Faith: Christianizing the American People* (Cambridge: Harvard University Press, 1990), 165, 170, 171-180.

topic of great interest to physicians as it encouraged empirical exploration of the “vital fluids” which, for the most part, could only be investigated using experimental apparatus.

Somnambulism first appeared as a medically endorsed state of suspended animation in the 1780s. It was at this point that physicians, though still working within the eighteenth century model of medical labor, began to collectively argue for the primacy of their explanations of liminal states, such as trances. Humane societies in England, Europe and the United States were formed with the goal of restoring the apparently dead to life. Paradoxically mercenary and humanitarian, the American humane societies were modeled after the 1784 British Royal Humane Society. These consortiums of physicians and benevolent citizens were dedicated to raising funds to reward members of the community who restored life to the apparently dead. The Institution of the Humane Society of the Commonwealth of Massachusetts laid out a solemn claim: “the boundary line between life and death, or the distinguishing signs of the latter, are objects to which the utmost effects of the human capacity have never yet attained. Nor can we, with any degree of certainty, pronounce, that an animal is dead, until the most unequivocal proofs of putrefaction have been furnished.” The boundary in question was otherwise known as suspended animation, and this made itself known frequently in a variety of forms. These forms included trance, catalepsy, drowning, suffocation, and somnambulism. Though somnambulism did not prove to be a state from which people needed restoring, the humane societies instructed society to protect them from dangerous situations, as they were still vulnerable to untimely death.⁸

⁸ M.A. DeWolfe Howe, *The Humane Society of the Commonwealth of Massachusetts: An Historical Review 1785-1916* (Cambridge: Riverside Press, 1918), 10. The Humane Societies put forth a number of initiatives that resulted in the establishment of life boats, rescue shelters on beaches, the Coast Guard, CPR, artificial resuscitation, and a general social imperative to save a life rather than succumb to God’s will.

Physicians were often themselves religious men who served dual roles in the community ministering to bodies and souls. Richard Bell argues that humane societies were “the associational embodiment of sensibility, that social, outwardly directed mode of feeling that encourages people to recognize their connection to others and to be moved by every species of human suffering.”⁹ Physicians tended to adopt this ethos at least as part of their public image, if not in their private practice. The physicians who play significant roles in the case studies on somnambulism were associated with the culture of medical benevolence of which the humane societies were emblematic. As Bell shows in his history of suicide during the early republic era, the assertion of medical authority over private selves (suspended or not) was prevalent and institutionalized through membership in such societies as well as on a national scale. The physicians who sought to demonstrate public command of their patient-somnambulists expressed a patriarchal benevolence similar to that of the humane interventionists. This was especially true of their female patients. As female somnambulists asserted a right to act and to speak, whether or not their agency could be visibly and affirmatively observed, their physicians hastened to act as guides to their otherwise suspended identities and shepherd their bodies through public spaces. Through physicians’ writings on female somnambulists, we gain access to a picture of the forms of resistance female somnambulists were using to preserve their personal identities and autonomy in spite of their condition.

The somnambulists whose stories make up the majority of this work were female patients over whose conditions male physicians claimed interpretive authority. Rachel Baker, Mary Reynolds, and Jane Rider extended the limits of female agency by leveraging the medical authority that accompanied the act of diagnosis. Physicians published widely and took their

⁹ Richard Bell, *We Shall Be No More: Suicide and Self-Government in the Newly United States* (Cambridge: Harvard University Press, 2012), 81.

patients on lecture circuits to establish their position as producers of medical knowledge on somnambulism. This performance in turn helped to legitimize the new professional impetus to diagnose concrete, indisputable somatic conditions. By circumscribing somnambulism with explanatory theories derived from nervous physiology, phrenology, and insanity, medical men were also insuring the credibility of their claims to name diseases accurately and establish their place in nature.

These women spoke publicly about religion and acted in ways that defied the social limitations placed on female agency. In paying attention to attending physicians' claims, I aim to interpret these women's mediated words and to situate their acts of daily resistance within women's social worlds. In working with the autobiography of Mary Reynolds as well as the male-authored writings on all three female somnambulists who figured in this dissertation, I have built upon Carroll Smith-Rosenberg's key insight: "I believe we must approach such writings with dual vision. These letters and diaries provide us with a unique opportunity to hear women's words directly not filtered through a male record. Male voices have so often drowned out or denied women's words and perceptions that the rediscovery of women's unique language must be our first priority – and our first defense, as women scholars against the undue influence of theories formed in ignorance of women's experiences."¹⁰

The contest between theologians and physicians for authority over controlling the absent, or suspended soul – which would be referred to as "volition" or "self" in the early nineteenth century cases – became more sharply delineated in the first decades of the nineteenth century as

¹⁰ Carroll Smith-Rosenberg, "Hearing Women's Words: A Feminist Reconstruction of History" *Disorderly Conduct: Visions of Gender in Victorian America* (New York: Oxford University Press, 1985), 29. Laurel Thatcher Ulrich's recreation of the work and private lives of American women has allowed me to analyze female behavior against the grain. I found *Good Wives: Image and Reality in the Lives of Women in Northern New England, 1650-1750* (New York: Random House, 1982), to be especially important in how I thought about the lives of these women, especially since so many of the details of daily living were omitted from their records.

social separations between the professions grew more commonplace. Physicians published widely and took their somnambulist patients on lecture circuits to establish their position as producers of medical knowledge by explaining the behavior put on display. This performance, in turn, helped to legitimize the new professional impetus to diagnose concrete, indisputable somatic conditions. By circumscribing somnambulism with explanatory theories derived from nervous physiology, phrenology, and insanity, medical men were also insuring the credibility of their claims to name diseases accurately and establish their unchanging place in nature.

Rachel Baker, who preached in her sleep, and Mary Reynolds whose alternate identity openly defied the ministerial figures and the doctors who tried to constrain her liberty, capture a shift in power by which physicians won the fight to align somnambulism within their broader project of classifying diseases of the body and mind. While Baker attracted followers who professed strong religious beliefs, she did not fit the mold of the women preachers who lived in her era and the century before her. Rachel Baker's case is a puzzling anomaly, given the historical context for preaching women during her lifetime. Because Baker did not make any claims to authority over religious matters, she presents the established literature on female preaching practices in eighteenth-century America with a marginal, but important problem. Because Baker did not conform to the social negotiations inherent in female preaching across denominations, her affiliation with preaching signaled a point of conflict between two cultural trends: renewal of religious devotion and scientific secularization. Her somnambulism was a commodity that could give specialized access to God to religious authorities, or specialized access to the unconscious mind to more secularized physicians. Baker's relationship with Samuel Mitchill determined the weighting medicine would be given in endeavors to make sense of somnambulism. The literature on female preaching has made it very clear by both omission and

argument that Baker would likely not have searched for revival in the wilderness. Brekus, Larsen, and Juster all show that it was not extraordinary for women to exhort or preach during the eighteenth century. Though it was not normative either, women preachers had an established presence and network of support predating Rachel Baker by decades. What is unusual about Baker is that she did not seek out this network, nor did this widespread community of inspired women seek her out.¹¹ While Baker went on a tour of various homes of learned gentlemen and society women as an object of display and great curiosity, she did not inspire committed devotion, nor did she wish to. Her case exemplifies the waning interest on the part of religious leaders in claiming illicitly preaching women as their own prophets.

Both physicians and ministers were constant observers of Baker's somnambulist sermons but were forced into an ideological détente by Baker herself. Although Baker rejected the idea that women ought to be allowed to preach publicly and minister to congregations, her sleep-spoken dialogues denied any attempts by audience members – whatever their ilk – to diminish her own authority on the matter of moral, God-willed conduct. While her more devout followers attempted to prevent medical intervention to treat her condition, it was ultimately a family member who claimed to have cured her. The negotiations between families, physicians, and religious counselors often determined the treatment outcomes for somnambulists during the first two decades of the nineteenth century. Cultural structures were a definitive factor in shifting the balance of professional authority.

¹¹ Catherine A. Brekus, *Strangers and Pilgrims: Female Preaching in America, 1740-1845* (Chapel Hill: UNC Press, 1998); Susan Juster, *Disorderly Women: Sexual Politics and Evangelicalism in Revolutionary New England* (Ithaca: Cornell University Press, 1994); Rebecca Larsen, *Daughters of Light: Quaker Women Preaching and Prophesying in the Colonies and Abroad, 1700-1775* (New York: Alfred A. Knopf, 1999).

Two social factors contributed to physicians gaining control over interpreting somnambulism. The Second Great awakening yielded a vast and unpredictable field of potential messengers and prophets, many of whom could wield their charisma to induce enthusiasm in congregants seeking a more liberal path to spiritual salvation. The diversification of religious possibilities during the long period of the Second Great Awakening only served to heighten the pluralistic religious culture of the newly forming states. Jon Butler's argument about this nascent pluralism is the most convincing explanation for how revivals and proliferation of sects could be culturally possible. As there was no dominant church in the American colonies for most of the eighteenth century, and itinerancy exposed people in remote areas to new ideas, it was harder to centralize congregants, making sect membership more appealing.¹² The lack of central religious authority diminished the likelihood of a church obtaining interpretative mastery over the challenge to free will and volition posed by somnambulists.

At the same time, medicine was beginning to cohere into a more stable profession. While doctors often lacked social prestige and relied on a canon of treatment cobbled together from folk remedies, local knowledge, philosophical treatises, and practical skills, they were also contributing to an epistemological change in how diseases were defined. Doctors were by no means anti-religious. Rather, like scientific practitioners they persisted in the belief that in describing and explaining nature, they were attending to the structures of Creation and exalting God by doing so. This goal was more commonly articulated in the physical sciences, however.¹³

Many physicians in American metropolises identified themselves as learned gentleman philosophers as well. They sought status in their own communities and intellectual approval from

¹² Butler, *Awash in a Sea of Faith*.

¹³ George Daniels, *American Science in the Age of Jackson* (New York: Columbia University Press, 1968), 192-200.

their teachers and renowned colleagues across the Atlantic. If a doctor practiced in New York, Philadelphia, or Boston, and aimed to emulate Benjamin Franklin and offer rational accounts of an American nature previously thought to be prodigious and wonderful in character, he was almost certain to hold membership in philosophical societies, literary circles, and trade in curiosity as well as in lancets and emetics. Though whiggish in structure, George Daniels' account of science in Jacksonian America usefully reminds us that, "during [this] period American scientists evolved from a disorganized group of amateurs without common goals or direction into the professional body that they [would] become by mid-century."¹⁴ This allowed physicians to define themselves collectively against literary scribblers, collectors, and philosophers. Having a stake in a specialized form of knowledge not only helped physicians climb socially, but also created an interest in defining the specific somatic boundaries and expectations of illness.¹⁵

During the eighteenth century the clergy searched entranced bodies and the recollections of returned souls for mystical signs of prophesied events. As a direct antecedent to somnambulism, trance narratives provided a great deal of interpretive leeway. Somnambulism was easier to observe as it was a mechanical expression of the impulses of the unconscious mind.

¹⁴ Daniels, *American Science*, 7. Hindle argues that eighteenth-century American doctors were virtually all trained within the framework of the Scottish Enlightenment, thus gaining an advantage in the practice of natural history and the ability to practice in many natural historical and philosophical pursuits. Hindle emphasized the importance of transatlantic training after the American Revolution and commented on the varied roles doctors played by invoking the humane societies as an example. One can find a good description of the pre-professional medical societies that were active during the years 1780-1820 in Brooke Hindle, *The Pursuit of Science in Revolutionary America 1735-1789* (Chapel Hill: UNC Press, 1956).

¹⁵ Shryock's foundational study of how modern medicine came into being during the nineteenth century provides further understanding of how Americans, trained in France and Britain, used their status as periphery-dwellers to nurture a robust ambition in gaining training and international status. Richard Harrison Shryock, *The Development of Modern Medicine: An Interpretation of the Social and Scientific Factors Involved* (Madison: University of Wisconsin Press, c1936). America's importance as a laboratory for testing European theories remained strong in the first few decades of the nineteenth century. Daniels writes: "although theoretical noncommitment was the more frequently mention, there was yet another, and perhaps in the long run more important sense in which the claim that America was a testing ground for European theories was true." Daniels, *American Science*, 10.

Physical signs of pain, discomfort, or contortion preceded somnambulistic episodes. Armed with knowledge of anatomy and convincing theories of nervous physiology, doctors were able to point to the physical oddness of somnambulistic behavior and speculate that bodily disorder could help in forming a diagnosis for the dysfunction of the unconscious and secret mind. Diagnostic confidence did much to soothe the unease people felt when dealing with a seemingly rational somnambulistic actor, who, nonetheless, showed no evidence of possessing volition or conscious agency.

But what can we say about diagnostic confidence in a period where diagnostics within medicine were scattered and highly disorganized? Physical symptoms could indicate any number of known diseases, or, they could be suggestive of a new and unpredictable condition. Prior to the mid-nineteenth century, doctors relied on a synthesis of disease knowledge gathered from theoretical sources, family reporting, and patient reporting. The clinical relationship that is so familiar to us now did not exist during the thirty years when somnambulists eluded diagnostic classification. “In crafting an explanatory framework,” Charles Rosenberg has written:

“physicians employ a sort of modular construction, using intellectual building elements available to their particular place and generation. But the resulting conceptions of disease and its hypothetical origin are not simply abstract knowledge, the stuff of textbooks and academic debates. They inevitably play a role in mediating doctor-patient interactions. In earlier centuries lay and medical views of disease overlapped to some extent, so that shared knowledge tended to structure and mediate interactions between doctors, patients, and families.”¹⁶

The medical quest for authoritative descriptions of the workings of the mind, achieved through successfully diagnosing and treating somnambulism, was part of a wider change in the practice of medicine. Rosenberg’s assessment that “the first three quarters of the century had

¹⁶ Charles Rosenberg and Janet Golden, eds. *Framing Disease: Studies in Cultural History* (New Brunswick: Rutgers University Press, 1992), xviii.

provided a series of intellectual building blocks, cumulatively suggesting a new emphasis on disease as a discrete entity” describes the trend physicians were participating in as they approached the phenomenon of somnambulism and tried to wrestle it into concrete, somatic terms with predictable treatment outcomes.¹⁷

Somnambulism seemed like an obvious candidate for medical explanation. The physicians who encountered it stressed that while they did not know precisely what caused it or why it occurred in some people and not others, they were certain it was the expression of a disordered mind – specifically a malfunction in the organ of volition, which phrenologists had posited alongside at least twenty-six other organs in the brain. Somnambulists were social outsiders with apparent access to hidden levels of consciousness and secret knowledge that even the most dedicated and insightful scientists could not grasp. The diagnostic experiments that were done on sleepwalkers, were, in part, an attempt to reintegrate the wandering individual with the absent will back into the social order. Rosenberg captures the essence of the social necessity of diagnosis: “the act of diagnosis links the individual to the social system; it is necessarily a spectacle as well as a bureaucratic event.”¹⁸ Even in the 1810s through the 1830s, diagnosis was part of the spectacle of somnambulism. Some physicians tried to diagnose a derangement in the somatic function of sleep; others looked to phrenological explanations for heightened responsiveness in organs of the brain that had become disconnected from their brethren. Diagnostics were also a spectacle within a spectacle: somnambulists performed for audiences in public and domestic spaces while doctors used their specialized knowledge to reveal the machinery behind the trick.

¹⁷ Charles Rosenberg, *Our Present Complaint: American Medicine, Then and Now* (Baltimore: Johns Hopkins University Press, 2007), 44.

¹⁸ Rosenberg, *Our Present Complaint*, 32.

For medical authority to overrule patients, physicians had to navigate the art of diagnosing somnambulistic conduct as a discrete disease entity while capitalizing on the unusual performances of their patients. The curious somnambulist who could see through blindfolds and playing cards was a necessary diversion for the treating physician, who pointed to their public behavior as it was on display and didactically explained the strictly somatic mechanisms behind the astonishing feats of the unconscious actors. Somnambulists are important in to the history of diagnosis within the field of the history of medicine because their cases show how doctors began to craft the late-nineteenth century practice of using disease entities to perform “cultural tasks, most conspicuously to naturalize and legitimate conceptions of difference and deviance.”¹⁹ In studying the history of somnambulism in American medicine, we see that while doctors began to use diagnostic practices to explain and categorize deviance, they ultimately failed to assert complete authority over their somnambulistic subjects.

By the 1830s physicians had yet to successfully create a diagnostic container for the problematic conduct of somnambulists. They could not use somatic theories and anatomical knowledge to explain away the association that had developed between criminality and somnambulism over the past forty years. Somnambulists were often classed as mentally deranged, but no amount of rhetorical stretching could convince the medical profession or the public that they were insane. Their physical actions were simply too rational and deliberate, even if presence of mind was obfuscated.²⁰ While American mind doctors and asylum

¹⁹ Rosenberg, *Our Present Complaint*, 28.

²⁰ Norman Dain, *Concepts of Insanity in the United States, 1789-1865* (New Brunswick: Rutgers University Press, 1964), 60. There is a great deal of literature covering the history of psychiatry in the United States, especially in the early nineteenth century. This history of somnambulism does not reveal any new insights into treatment for moral disease. Jane Rider, the one somnambulist who was placed in an asylum, was confined due to convenience. The negotiations between authority and patient over social control in cases of somnambulism are quite different from those discussed by historians of psychiatry who looked at asylums as tools of social control.

superintendents, Norman Dain argued, “began to think that the immediate cause of insanity was often the morbid irritation of the nervous system rather than inflammation of the blood vessels, as Rush’s followers had assumed” during the nineteenth century, no historical actor made a convincing case attributing insanity and somnambulism to the same family of nervous irritation. Social control over somnambulists was exerted through professional authority over defining a particular set of behaviors and adjudicating its effects on society. Institutions, such as asylums, and cures, such as moral treatment were not used as agents of social control in incidents of sleepwalking.²¹

Because of the long history joining somnambulism with criminality, the growing legal profession, in attempting to address and satisfactorily explain somnambulistic murder (and more abstractly, the requirements for intent) sought to impose legal authority over sleepwalkers because they were dangerous to themselves and to society. Somnambulists were often active in the dark, during “the night season,” and both imperiled themselves as well as others. Craig Koslofsky’s work on the ways in which the nighttime shaped cultural and social relations in early modern Europe discusses parallel developments to those considered in this dissertation, especially on the topics of street lighting, sleep, and prohibitions on gendered and racial conduct during the night.²² A secondary topic of this dissertation addresses how and why somnambulists became associated with criminal conduct and physical danger.

²¹ David J. Rothman, *The Discovery of the Asylum: Social Order and Disorder in the New Republic* (New Brunswick: AldineTransaction, c1971, 2008) and Andrew Scull, *Social Order/Mental Disorder: Anglo-American Psychiatry in Historical Perspective* (Berkeley: University of California Press, 1989) represent two conflicting positions in the revisionist movement within the history of psychiatry on the role of the patient and their suffering in the more abstract project of social control of the insane through institutionalization. The complex and ongoing intellectual debate over the correct way to interpret the history of psychiatry within the boundaries of social control and power relations is not directly relevant to my argument, but is an important part of the historiographical context when considering the meaning of social negotiation in the history of medicine and mind.

²² Craig Koslofsky, *Evening’s Empire: A History of the Night in Early Modern Europe* (Cambridge: Cambridge University Press, 2011).

The final contest to establish professional authority over somnambulism happened in the courtroom. At stake was the assignation of authority over what to do with the amoral citizen who threatened society through their lack of volition. The *Prescott* case – the first time the sleepwalking defense was used in a murder trial in American legal history – is the subject of chapter five. The trial narrates the hierarchical power struggle between the rule of law and the recognized importance of medicine in managing socially deviant behavior. Medical witnesses played an exceptionally important role in the trial. The doctors who were called to testify argued with the lawyers, who were eager to use the case to clarify the boundaries of legal intent, about what somnambulism suggested about free will and the capacity of the mind to form intent to commit crimes against society. Medical witnesses were subordinate to the legal authorities in the case, but were not without the power of persuasion in fixing an outcome and stabilizing a position in medical knowledge for somnambulism. The trial reveals a fascinating negotiation of emerging professions, clarifying for the public just what jurisdiction lawyers and doctors ought to have over managing and punishing their behavior. Interestingly, neither legal nor medical authority was strong enough to concretize somnambulism. The jury was contaminated and the trial was repeated with no satisfactory knowledge outcomes for either law or medicine.

Ultimately, naturally occurring somnambulism was an irresolvable condition. Somatic medicine was not sufficient to explain invisible agents of human behavior. Legal concepts defining intent and criminal conduct could not encompass the rational-irrational figure of the sleepwalker. Ministers had long fallen to the background when somnambulists stopped making incendiary religious knowledge claims. Natural somnambulism failed to sustain itself as an object of legitimate professional inquiry and acquisition when confronted with its artificially induced counterpart: artificial somnambulism or animal magnetism. In animal magnetism, the

source of control was evident and volition was rendered unproblematic by the clear and forceful control of the magnetizer. In a transatlantic history of unconscious states, natural and artificial somnambulism were pitted against each other as candidates for the best representation of the role of will in the function of mind. Americans chose to explore natural somnambulism, and struggled to capture the wayward condition with specialized knowledge and the professional authority derived from that, instead of relying on a universally accessible command of invisible magnetic fluid.

Somnambulists appear in many places in Anglo-American and European history from the late-eighteenth century to the end of the nineteenth century. They were fixtures in literature, subjects of surprising and salacious newspaper articles, living objects presented publicly for curious inquiry, and provocative medical patients. This dissertation examines the stories of somnambulists in early-nineteenth century United States: some appear briefly as flashpoints in the daily news; others are the central protagonists in murder trials. Some are fictional characters acting out the anxieties of early republic settlers attempting to establish a foothold on the Western frontier. The somnambulists whose stories tell us the most about struggle for authority over the mind lacking governance, however, are women.

Chapter one examines the history of crimes in the night season to establish the nighttime as a habitat for somnambulists. It introduces the chapbook *The Prodigal Daughter* as a device for understanding the context of religious authority in situations where people claimed to experience a disconnection between mind and body. Chapter two examines the trance state and the meaning of trance narratives in contests for individual versus theological authority over religious experience and the shifting meanings of the body in relation to published representations of the landscape of the afterlife. Chapter three is the case study of Rachel Baker, the sleeping preacher.

It examines her relationship with her physicians, her family, and religious authority, showing how authority was negotiated between interested parties during the transitional early nineteenth century. Chapter four examines the second case study: that of Mary Reynolds, who showed evidence of possessing multiple personalities, brought to consciousness through strange episodes of sleep. Reynolds case reveals a story of increasing medical professionalization and the tensions between doctor and patient over which party had the right to authority over self and memory. In chapter five I examine the negotiations between medical and legal authority by analyzing the *Prescott* case and comparing fictional visions of violent male somnambulists to real-life counterparts as a way to highlight the drastic changes in professionalization that occurred between 1796 when *Edgar Huntly* was written to 1833 when Abraham Prescott killed Sally Cochran in his sleep. In the sixth and final chapter, I relay the case study of the Springfield Somnambulist Jane C. Rider. Her somnambulist experience was concurrent with the Prescott trial. Her story shows an analogous attempt at controlling somnambulism within medicine and social policy, as Rider's doctors confined her to an asylum for the purpose of making further experiments. Rider's case reveals the multiple problems female somnambulists bore as women in Jacksonian America.

CHAPTER ONE: ABROAD IN THE NIGHT SEASON

A Prodigal Daughter

Once upon a time, there was a “strange and wonderful” young girl.²³ Spoiled rotten by her parents, the daughter disobeyed social mores and went abroad in the nighttime. Unable to curtail her night rambling, her distraught parents attempted to punish her. She was confined to her room and fed only bread and water. One night the devil appeared in her room disguised as a Gentleman. The devil asked her why she was so full of sorrow and she replied that “my parents cruel are to me / and keep me here to starve in Misery.”²⁴ Offering the girl his services in exchange for her servitude, the devil convinced her that if she pretended to be repentant and humble, she would soon have opportunity to poison her parents and be revenged. Her parents were treated to an angelic vision, warning them of their imminent deaths and imploring them to forgive their prodigal child. Her nefarious plot foiled, she fell into a swoon.

Despite their best efforts her parents “could not bring her Spirits to revive” and so began to prepare for a funeral. The bereaved parents returned their daughter to the dust, and as the coffin was placed in the open grave, they began to hear “bitter groans.” They “observed the

²³ *The Prodigal Daughter; being a Strange and Wonderful Relation of a Young Lady in Bristol, who because her Parents would not support her in her Extravagance, bargained with the Devil to poison them. – How an Angel informed her Parents of her Design. --- How she lay in a Trance four Days. – How she came to life again, &c. &c.* (Boston: [Thomas Fleet] c1736?); Clark Garrett, *Spirit Possession and Popular Religion: From the Camisards to the Shakers* (Baltimore: The Johns Hopkins University Press, 1987), 80. The original printing is from approximately 1730, pre-dating the Great Awakening. It is a glimpse into Puritan familial life and a parable for the dangerous, unconscious lives of women. Scholars have established an American provenance for this tract, but it was likely set in Bristol, England due to the dense transatlantic connections between evangelicals in Bristol and the American colonies. George Whitfield, one of the most influential itinerant evangelical preachers in the American colonies, spent a significant amount of time developing his preaching retinue in Bristol prior to his American tour. John Wesley also honed his skills in Bristol. The English town was a hotbed of revivalism and evangelical fervor. Clarke Garrett recounts that “John Wesley, meanwhile, after much hesitation and prayerful discussion, had accepted Whitefield’s invitation to come to Bristol in order to continue the work that the latter’s emotional preaching had begun there.” The pamphlet’s setting likely appealed to evangelicals when the first revivals began.

²⁴ *The Prodigal Daughter*, 6.

dismal Sound / Come from the Body just laid in the Ground, / The Coffin then they did draw up again, / and in a Fright they opened the same.”²⁵

They carted her home in her coffin and made her sit in it as she admired her “winding sheet.” Fondling her shroud, the girl asked the Minister to have a seat as she “would tell him Wonders which were shown / Unto her, since her Soul had too it’s flight / She had seen the Regions of Eternal Night.”²⁶ After her soul departed her body it was dropped in a “lonesome wild Desert” and “briery Woods, which dismal were and dark.” As she ran through the woods, the briars tore her through her flesh and her “Gore did run.” She was shown the gates of heaven, and severely chastised for whoring and swearing.²⁷ She was then treated to a good long look at hell. The girl was returned to her senses by the sound of Satan’s “hideous roar” where she was able to relay her tale from the coffin, took sacrament, and went to bed. The moral was then admonished: “Children your Parents honour and obey, / And then the Lord will bless you here on Earth; / and give you a Crown of Glory after Death.”²⁸

The Prodigal Daughter was a parable to warn people into obedience and good behavior. At the crux of this fable is a mystery. The narrative of the afterlife was not an uncommon experience for eighteenth-century Anglo-Americans or their British counterparts. While *The Prodigal Daughter* was not a children’s story – those had yet to come into being – youth in the colonies did misbehave. Philip Greven’s study of childrearing in eighteenth-century colonial American families reveals the extent to which evangelical parents relied on disobedience as a barometer of bad behavior. One can see the dynamics between parent and child in the *Prodigal*

²⁵ *The Prodigal Daughter*, 11.

²⁶ *The Prodigal Daughter*, 12-13.

²⁷ *The Prodigal Daughter*, 14.

²⁸ *The Prodigal Daughter*, 15.

Daughter in Greven's argument: "tenderness and indulgence were the Achilles heel of discipline in evangelical families... Salvation depended upon their ability to maintain family discipline, authority and order, uncompromised by too much tenderness."²⁹ Night walking was a rather peculiar problem that inflected the daily cycles of American life from first settlement through the instantiation of public gas lamps and beyond (though gas lighting was an offsetting factor, rather than a terminal solution). *The Prodigal Daughter* is a window into an early American world where mischief in the night season was the context for trances, and later somnambulism.

Trances threatened the social order and common understanding of vitality. The trance was a state of suspended animation that subverted volition and, in the eighteenth century, defied religious control. Trance narratives, which would become immensely popular after the first Great Awakening, were more than paper fairy tales about the afterlife. They were an alternate means of publishing bodily transgressions committed by those without conscious volition. If one happened to have the misfortune to miss being audience to a trance, then they could still experience the same delirious fear and usurpation by reading about a subversive split between body and mind. Female trance-goers were the greatest threat to social order posed by incidents of suspended animation in the nighttime. Trances and trance narratives gave women a new opportunity to step outside of their socially proscribed selves and speak their minds in a public fashion. Night walking and somnambulism facilitated this through the eighteenth and early-nineteenth centuries. Trances, then somnambulism, exculpated women from the slur of "whoring" that accompanied night walking.

Night walking and trances were strange bedfellows in eighteenth-century America. Trances, with their religious associations, would dominate explanations for night walking and talking through the end of the eighteenth-century. Due to their entrenched place in human

²⁹ Greven, *The Protestant Temperament*, 34.

history, trances were an accepted and understood occurrence associated with religious ecstasy, spirit possession, and magic. With advances in physiology and medical exploration of animal vitality during the Enlightenment, trances were relegated to the realm of the purely spiritual as somnambulism was ushered into modern medical inquiry. For Anglo-Americans, the trance was a state of being that captured the wonder of onlookers. The specter of the undead body prematurely buried spoke to the pervading uncertainty over real death and the emerging question of self and, by extension, self-control. The question of self-control, or volition, would become central to emerging constructions of the self in the post-Revolutionary years, when patriots struggled to etch out an American identity as a stronghold against British forces.

The popularity of *The Prodigal Daughter* from its first printing in Boston in the early 1730s, to its 29th printing in 1820 evidences the investment Americans had in reconciling the meaning of the dead-alive body with new explanations of the unconscious mind. The twenty-nine separate editions indicate a long-standing interest in the relationship between disobedient women and states of suspended animation as well. The extraordinary work of Welch in compiling every imprint of all children's literature prior to 1821 provides one with a sense of the proliferation of *The Prodigal Daughter*.³⁰ As a text alone, *The Prodigal Daughter* makes for a most compelling study in material history. Welch was able to trace the first known imprint to the Boston publishing house of Thomas Fleet Sr., the Heart and Crown, which dominated printing in Boston from 1731-1758, and continued on under his sons Thomas and John Fleet, who maintained the firm from 1758-1779. The firm underwent a rebranding in 1780 when its name was changed, out of patriotic sentiment, from the Heart and Crown, to the Bible and Heart.³¹ Welch was able to date *The Prodigal Daughter* with a high degree of probability to the time

³⁰James A. d'Alté Welch, *A Bibliography of American Children's Books Printed Prior to 1821* (New Haven CT: American Antiquarian Society and Barre Publishers, 1972), 342-357.

range 1737-1741. By examining the wood-cuts published in the pamphlet, Welch discovered, by cross-referencing Evans' Early American Imprints bibliography, that one of the arbitrary cuts in *The Prodigal Daughter* (i.e. not related to the content as the others were) first appeared in a tract by Edward Wigglesworth titled *A seasonable Caveat against believing every spirit* (Boston: Printed For D. Henchman, 1735).³² By studying the nicks caused by use over time in the

³² Welch, *Bibliography*, 343. The story of the woodcuts from the earliest known edition of *The Prodigal Daughter* reveals a story about black artisanal labor in Boston during the 1730s and 1740s. Following the research of Sinclair Hamilton, *Early American Book Illustrators and Wood Engravers, 1670-1870 in the Princeton University Library* (Princeton, NU: Princeton UP, 1958), 21-25, Welch examines the provenance of the woodcuts original to *The Prodigal Daughter*. Thomas Fleet Sr., *The History of Printing in America, with a Biography of Printers, and an Account of Newspapers* 2 vols. (Worcester: American Antiquarian Society, 1874), 99. It was this work that Welch relied on for his research on Thomas Fleet Sr.'s woodcutters. The material below can be sourced to a compilation of Benjamin Franklin Thomas's memoir of his father and the original text of *The History of Printing: Benjamin Franklin Thomas, Memoir of Isaiah Thomas* (Boston, 1874); Isaiah Thomas, *The History of Printing in America With a Biography of Printers and an Account of Newspapers* vol. 5. (Albany: J. Munsell, 1874).

Hamilton claimed that the cut of the Prodigal Daughter in her coffin, with the minister and her mother standing over her with a candle, the image of the devil dressed as a gentleman, and the cut of the parents in their bed being visited by the Angel were most likely made by one of Thomas Fleet's slaves. Benjamin Franklin Thomas wrote of his father, Isaiah Thomas that, "At this period [1758-1761] there were few persons in Boston who could 'cut' on wood or type metal. Thomas Fleet, the printer of the *Boston Evening Post*, was also a rival of Fowle in the printing of ballads. Fleet had a negro who illustrated his ballads by cuts. Young Thomas was induced to try his hand in decorating those printed by Fowle. He 'cut' about an hundred plates, rude and coarse indeed, 'but nearly a match,' he says, 'for those done by the negro.'" Isaiah Thomas had evidently apprenticed with Fleet's rivals Samuel Draper and Zechariah Fowle, starting on June 4th, 1756. When relations between Draper and Fowle, a "printer and pedler of ballads and small books" dissolved their partnership, Thomas Sr. "from this time seems to have had the principal charge of the business of the office. He did the work in his own way, corrected the press as well as he could, and when the form was ready, Fowle having no other help, assisted him at the press."

Isaiah Thomas had this to say about the work of wood-cutting during the years in which *The Prodigal Daughter* was most likely first published: "But the principle performances of Fleet, until he began the publication of a newspaper, consisted of pamphlets for booksellers, small books for children, and ballads. He made a profit on these, which was sufficient to support his family reputably. He owned several negroes, one of which worked at the printing business, both at the press and at setting types; he was an ingenious man, and cut on wooden blocks, all the pictures which decorated the ballads and small books of his master. Fleet had also two negro boys born in his house; sons, I believe, to the man just mentioned, whom he brought up to work at press and case; one named Pompey and the other Cesar; they were young when their master died; but they remained in the family, and continued to labor regularly in the printing house with the sons of Mr. Fleet, who succeeded their father until the constitution of Massachusetts, adopted in 1780, made them freemen."

Sinclair Hamilton believed that the woodcuts for *The Prodigal Daughter* were made either by Pompey Fleet, or his father, as the initials on the cuts read P.F. My colleagues at Harvard University, Gloria Whiting and Caitlin Hopkins have both done enlightening work clarifying the question of slave artisanship in the field of material history and making a case for the true identity of "P.F." Whiting's ground breaking paper: "The Prodigal Daughter: Race, Gender, Religion, and Rebellion in Eighteenth-Century Boston" (unpublished) examines the cut showing the Prodigal Daughter sitting in her coffin speaking of her journey to the afterlife and the life of Peter Fleet, Thomas Fleet's slave. Whiting was able to track down the full signature of P.F. - that of Peter Fleet - the father of Pompey and Cesar. Whiting finds that the author of *The Prodigal Daughter* was most likely Reverend William Williams of Weston, MA, who was the pastor of the local church from 1709-1750, and whose sermons are appended to the chapbook in many cases. Whiting was able to exclude Pompey and Cesar as authors of the woodcuts as they were born in 1743 and 1747, respectively.

individual woodcuts, Welch was able to determine that the first edition of text could not have been published after 1762. Evans, according to Welsh, listed the first edition as being published in 1736. The evidence provided by the integrity of the woodcuts seems to support the correlation between Welch and Evans' analyses.³³ The other twenty-eight editions that Welch catalogues and compares have a variety of variations in the woodcuts and exact wording used. He notes that Benjamin Mecom at the New-Printing Office in Boston made the second printing in 1758. The approximate third printing, 1768, in Boston boasts woodcuts that may have been copies made by Isaiah Thomas.³⁴

Art historian Barbara E. Lacey argues that the moral content of *The Prodigal Daughter* signals a significant change from contemporary comparative parables. The story breaks from what Lacey calls "orthodox Puritan accounts" of the "conversion experience" by including both religious and secular messages. Citing influences from Hogarth's series of paintings, *A Harlot's Progress* (1731), folklore that reinforces the image of the Gentleman disguised as a devil, and popular novels such as Samuel Richardson's *Pamela* (1740) and *Clarissa* (1748), Lacey suggests

Caitlin Hopkins' article, "Pompe Stevens, Enslaved Artisan" *Common-Place* 13 no. 3, (Spring, 2013) examines the wider context of enslaved engravers in the eighteenth century through the analysis of gravestone cuttings found in New England cemeteries. By focusing on the life of Pompe Stevens, Hopkins continues the work of extracting the private lives of African American slaves in colonial America from the objects they left behind. Hopkins briefly looks at the woodcut of *The Prodigal Daughter*, but Whiting's paper provides the deep history and depth of the lives of those who printed *The Prodigal Daughter*.

³³ Welch, *Bibliography*, 343.

³⁴ Welch, *Bibliography*, 344, 345-357. Jill Lepore, *Book of Ages: The Life and Opinions of Jane Franklin* (New York: Alfred A. Knopf, 2013), 127-131. The subsequent printings are as follows. Because most, if not all of the prints are undated, the dates are approximations by Welch: Providence, [1768]; Boston, [1769]; Newport, 1770; Boston [1772]; Danvers, 1776; Worcester, 1778; Boston [1790]; Boston [1790]; Boston, 1794; Boston, 1797; Hartford, CT, 1799; New York, 1799; Boston, [1802]; Boston, 1807; Providence, 1808; Windham, CT [pre-1811]; Greenfield, MA [pre-1811]; Boston, 1812; Boston, 1813; Boston, 1814; Hudson, NY, [1816]; Boston, 1816; Philadelphia [1819]; Philadelphia [1819]; Philadelphia, [1820]. There is one with no imprint and no date that Welch believes is a fragmented copy of a Philadelphia issued printing. Benjamin Mecom used *The Prodigal Daughter* as a way to increase circulation for the magazine he started in 1758, the *New-England Magazine of Knowledge and Pleasure*. Due to his eccentricity, Mecom earned the nickname "Queer Notions" after one of his magazine column titles. To see *The Prodigal Daughter* in this printed context suggests that by 1758, it was both a useful filler for magazines in a market lacking both readers and writers, but also something of a weird story as well.

that *The Prodigal Daughter* reflects societal expectations for marriage. The similarities between the content of the novels and folktales are speculative, and not entirely convincing. Lacey suggests three common readings of *The Prodigal Daughter*, one of which follows the traditional Puritan ethos of child-rearing and obedience, the other which reflects medieval cautionary tales, reflective of the lives of saints.³⁵ The third reading is punctuated by secular elements, stimulated especially by John Locke's propositions on child rearing in the context of the *tabula rasa*.³⁶ While Lacey's overall claim that chapbooks like *The Prodigal Daughter* indicate a print-based dilution of Christianity, the popularity of the text itself as a hard look at premature burial and the trance state as a gateway to the afterlife demand a reading that takes into account the interplay between female disobedience and the power-endowing trance-state.

Night-Walking

The anxiety over night walking – the nighttime cavorting that made the prodigal daughter morally vulnerable to Satan's gentleman-caller routine – made trances especially attractive to curious audiences. The entranced were stationary in body and astral in mind. Their souls were beyond them while they were encased in a trance. Those who were out and about during the night season were thought to be deviant, unnatural, and uninhibited. Aside from the common vandals and drunkards, colonials found themselves grappling with the problem of female volition. The term "night-walkers" sometimes referred to prostitutes or their potential customers. Women who went abroad in the night season were expressing their wanton, perverse desires. They were skirting the safety of their male protectorates for a carnal jaunt amongst society's most rapacious members. The criminal problem of night walking which seduced good youth

³⁵ Barbara E. Lacey, *From Sacred to Secular: Visual Images in Early American Publications* (Newark: University of Delaware Press, 2007), 57-60.

³⁶ Lacey, *From Sacred*, 60-62.

from a righteous path and posed an insidious danger to colonists navigating the pitch black terrain of a mixed-race population on contested land underlies the early associations between not-yet-named states of suspended animation and the uncontrolled country of the nighttime. Volition-less bodies in trance states expressed a kinship with the disorder of the night. Bodies out of control were the vectors that might push a society thrashing through Great Awakenings to ruin.

Since the first ships landed in Massachusetts Bay Colony – and even before that in the outer banks of what is now Virginia, the “night season” was a dangerous time, sown of sorrow and bountiful in its depravity. Unfaithful wives such as Catharine Gridley, of Farmington, Connecticut “kept unseasonable hours” with other men and were witnessed cavorting with their adulterous lovers “together in the night season.”³⁷ Thieving wives like Anne Eddy of Smithfield, Rhode Island, behaved in “a very improper Manner, in departing from [the House in the Night-Season]” with all the “Household Goods.”³⁸ “Evil minded persons... wantonly and maliciously” broke the windows of Samuel Penhallow’s home in Portsmouth, New Hampshire, no fewer than “three different times in the night season.”³⁹ “Black land turtles” were released into “the rooms and apartments” infested by rats and mice. When the turtles were allowed to “crawl over the floor during the night season” the vermin would “take there [sic] departure.”⁴⁰ Salaciousness, nuisances, and vermin were all part and parcel of the nighttime. Unhappy women, naughty boys, and hungry rats were the least worrisome creatures creeping about after the sun went down.

³⁷ *Connecticut Courant*, (Hartford, CT), October 31, 1774, 2.

³⁸ *The United States Chronicle*, (Providence, RI), May 5, 1791, 4.

³⁹ “20 Dollars Reward,” *The New Hampshire Gazette, or State Journal and General Advertiser* (Portsmouth, NH) October 5, 1786, 4.

⁴⁰ “Method to drive away Rats, Mice, &c,” *Prisoner of Hope* (New York) July 5, 1800, 66.

Disgruntled husbands and property owners were angry enough to publish their grievances in local papers, one curmudgeonly man going so far as to try to embarrass his pestilent gate-breakers into criminal admission with a letter to the editor of the local paper. Bothered by mischief-makers who insisted upon tearing down his fences intended to “ornament the street and the town” the man railed that on “the first night off go the urns on the posts, then follow half a dozen of the pickets, and on the third the hinges of the gate are broke, if the gate itself is not carried off.” Annoyed to damnation, the writer of the letter took it “for granted that none of these people can read” and thus begged the editor to solicit them to purchase his property from him rather than stealing it.⁴¹ Government authorities were not so readily put at ease.

On December 1st, 1703, a Province Law for Massachusetts Bay Colony was passed that would remain in effect until it was repealed on March 10, 1797 with “An Act for keeping Watches and Wards in towns, and for preventing Disorders in Streets and publick places.” The 1703 piece of legislation was titled “An Act to Prevent Disorders in the Night.” It was enforced, just not against disordered sleepers. The 1703 act declared that “Noe Indian, Negro, Molatto, Servant or Slave may presume to be absent from the families whereto they Respectively belong, or be found abroad in the Night time after Nine a Clock; unless it be upon some Errands for their respective Masters or Owners.” The punishment for unlawful night trolling without “a good and Satisfactory Account of their business” was a night in jail, followed by an appearance before a Justice of the Peace at the “House of Correction” who would evaluate their misbehavior and sentence them to no less than a public whipping by a constable, “not exceeding Ten Stripes,” and

⁴¹ “Male Night-Walkers,” *Connecticut Herald* (New Haven, CT), March 28, 1815, 3.

if a crime against person or property had been discovered, then the sentence of death by gallows, hard labor, or solitary confinement was possible.⁴²

Native Americans, Blacks, mixed-race people, and servants were publicly listed for nearly a century as the most dangerous persons abroad in the night season. Reasons for fearing the marginalized, enslaved, and otherwise helpless people who might have had very good reason to trespass upon their masters' other property and peace of mind, run the gamut of everything from anxiety over slave insubordination and rebellion, to Indian raids and kidnapping, to the rape-trope of the savage black man violently taking the chastity of white women. Slapping a curfew on the class of people who labored involuntarily may have invested the ruling elite with a sense of false security, but it did not prevent the majority of its intended subjects from carousing in the dark.

Other pieces of legislation indicate that “An Act to Prevent Disorders in the Night” was not fulfilling its promise of a safe and white nightscape for residents of town and country alike in any of the colonies. Also passed in 1703, but repealed on January 6, 1753, was “An Act to Prevent the Breaking or Damnifying of Lamps Set up in or Near Streets, for Enlightening the Same.”⁴³ If anyone was caught willfully breaking, removing, or damnifying any lamp intended to keep the streets and lanes bright and free of disorder and damnification in general, they would be subject to a fine of five pounds and the costs of prosecution. The second strike came with a

⁴² For the full legislative article, see: Ellis Ames et. al., *The acts and resolves, public and private, of the province of the Massachusetts Bay: to which are prefixed the charters of the province. With historical and explanatory notes, and an appendix. Published under chapter 87 of the Resolves of the General Court of the commonwealth for the year 1867*, vol. 2 (Boston: Wright & Potter, 1869-1922). For the text of the repeal of “An Act to Prevent Disorders in the Night” see *The Laws of the Commonwealth of Massachusetts, from November 28, 1780 to February 28 1807. With the Constitutions of the United States of America and the Commonwealth, prefixed*, vol. 3 (Boston: Manning & Loring, 1807), 775. It is important to keep in mind that many of the Province Laws for Massachusetts Bay were mandated by the British parliament and thus applied to all of the British colonies in North America.

⁴³ *The acts and resolves, public and private, of the province of the Massachusetts Bay*. Refer to volume 2 for the original Act and volume 3 for the repeal.

heftier fine of 10 pounds to be paid within six hours of apprehension with the further punishment of six months imprisonment. If the lamp damnifier happened to be a “ negro, Indian, or molatto servant” he or she would be subject to a fine of being “publicly whipped, not exceeding ten stripes, and upon a 2d or any after conviction, not exceeding twenty stripes.”⁴⁴ The pervasive belief that Africans, and to a lesser extent, Irish-Catholic indentured servants were a savage, heathenish, rough-shod form of the human species in need of discipline and correction likely quashed any questions over the practicality of such a penal differential, especially in light of evidence suggesting that not only were African slaves, Indians, and mulatto servants unlikely to smash lamps and raise hell, but were sometimes even incapable of doing so.

An example can be found in an advertisement published by a bereaved master, Ruler Richardson, of Amelia, Virginia, who had been deprived of his “property.” The “property” was a person who had in effect, stolen himself by running away. The Virginia born slave, Sam, who had belonged to one Nathaniel Friend, prior to Ruler Richardson, was described as having “a remarkable Scar on his breast, which seems as if occasioned by the Lash of the Whip, his sides and Back are much scarified by Whipping... is very dim sighted, and in the Night Season, almost entirely deprived of sight.”⁴⁵ Brave Sam, thief of himself, must have endured multiple whippings, and perhaps, loss of vision, for some species of subordination other than skulking around blowing out candles after 9 p.m.

There were cases where the “Act to Prevent Disorders in the Night” seemed apropos. In 1792, the house of the Widow Esther Witmore, of Middleton, Connecticut, had been broken into,

⁴⁴ “An Act to Prevent the Breaking or Damnifying of Lamps Set up in or Near Streets, for Enlightening the Same.” *The acts and resolves...* vol. 3, 645. For a brief discussion of the use of this act to further restrict the movement of slaves in New England, see Christopher L. Tomlin, “The Ties That Bind: Master and Servant in Massachusetts, 1800-1850” *Labor History* 30(2): 193-227.

⁴⁵ “Run away, or stolen, the 1st of December,” *Virginia Gazette* (Williamsburg, VA) April 1, 1775, 4.

robbed, and burned. Mrs. Wetmore and “a negro girl” had been visiting an acquaintance, Colonel Phillip, when the house succumbed to disorder. They shortly discovered that “A Mulattoe fellow who called himself Dick Goold, from New York, who had lived a short time as a servant in Col. Phillip’s family” had burgled their household. Goold had been “out that night and when interrogated, confessed. He and two accomplices had crept “towards the house with a lantern concealed” and while he waited, his fellow thieves, stole what they wanted and set fire to the house. The two villains remained at large, and Goold was convicted, although doubt was cast on his guilt when the house of a magistrate, Matthew Griswold burned down after his incarceration.⁴⁶

Certain kinds of candles also proved a danger of another kind. “An Act for Further Preventing All Riotous, Tumultuous and Disorderly Assemblies or Companies of Persons, and for Preventing bonfires in any of the streets or lanes within any of the towns of this province,” passed January 6, 1753, complained of the “many and great disorders” allegedly committed by “tumultuous companies of men, children, and negroes, carrying about with them pageants and other shews through the streets and lanes of the town of Boston.” Not only were these children, rowdy men, and blacks the most vicious kind of marauders, but they were also guilty of “demanding and exacting money by menaces and abusive language” and having an air of general “horrid profaneness, impiety and other gross immoralities.” If these horrid and grossly immoral children and slaves were out and about in disguise between sun-set and sun-rise behaving mobbishly, they were subject to a fine of forty shillings and imprisonment “not exceeding one month.”⁴⁷

⁴⁶ *The Argus* (Boston, MA) March 30, 1792, 2.

⁴⁷ *The acts and resolves...* vol. 3, 647-648.

Though the act itself does not mention bonfires outside of its title, the implication of arson prevention abounds. Not only was it illegal to extinguish lamps, but also to light them, excluding the circumstance that you found yourself entirely alone in the dark. Other acts, such as “An Act providing for the Punishment of Incendiaries, and the Perpetrators of other malicious mischiefs,” and “An Act providing for the Punishment of the Crimes of Burglary, and other breaking and entering of Buildings” both stressed that fire-setting, raping, killing, theft, or any other kind of felony-mongering was explicitly a problem of the night-season, and if committed then, was to be punished with either a life-time of hard labor, or death, respectively.⁴⁸

“An Act for keeping Watches and Wards in Towns, and for preventing Disorders and Streets in publick Places” not only repealed “An Act to Prevent Disorders in the Night” but vested night-watch men with the authority and responsibility to “see that all disturbances and disorders in the night after ten o’clock, and persons whom they shall have reason to suspect of any unlawful intention or design” were securely imprisoned for the duration of the season, until morning brought their meting out of punishments. Watchmen and Constables did not have an easy time of it either. They were instructed to “walk the rounds in and about the streets, wharves, lanes... to prevent any danger by fire, and to see that good order is kept, taking particular observation and inspection of all houses and families of evil fame.”⁴⁹ Regardless of vigilance by watch-men of the laws both under colonial jurisdiction, and then the jurisdiction of the republic, mischief was done in the night season, and it was done fearfully and frequently with most paths of crime, rape notwithstanding, at least some of the time, leading back to the burglary of another’s property. Anyone out and about at night was suspect.

⁴⁸ *The Laws of the Commonwealth of Massachusetts* vol. 3 (Boston: Manning & Loring, 1807), 345-346.

⁴⁹ *The Laws of the Commonwealth of Massachusetts* vol. 2 (Boston, Manning & Loring, 1801), 773.

“Property,” for people living in the eighteenth and early-nineteenth century, had a far broader meaning than our general attribution of the word to material things. People often found themselves defenseless and divested of goods after nefarious types, such as convicted thief David Smith, “burglariously entered” their homes. Mr. James McFarland of Worcester had his house “broken up, and several articles of clothing carried off.” Mrs. Tanner’s home was penetrated, it being “also entered in the night, and several cheeses, cash, &c. taken.” Smith, operating with an unnamed “villain” dared to break the house of J. Caldwell of Barre while he and his wife slept, awaking to find a watch missing, and drawers rifled, and money gone. Victims of night burgling agreed that, “these pests of society may be taken, either dead, or alive to grace a gallows.”⁵⁰ In New York, “gangs of footpads” roamed the city, mugging unsuspecting citizens like one Dr. Bradhurst, who upon “refusing to deliver his watch and money” was shot at with a pistol “loaded with two balls, which penetrated his left breast, and came out at his right.” Though willful in preserving his property, the indignant doctor was merely lucky to have not been mortally wounded.⁵¹ Men were not the only pestilent snatchers capable of breaking houses.

In Boston in 1790, “some Female Night-Walkers” “forcibly entered” the house of “the Widow of the late Rev. Thomas Gair” and stole a “Copperplate Bed Counterpane,” an object invested with great value and labor. Copperplate was a learned style of handwriting meant to standardize script in an industrializing market economy. The counterpane, likely stitched by Widow Gair herself, would have been inscribed with her own handwriting and used to decorate

⁵⁰ “Information of Burglaries,” *Massachusetts Spy* (Boston, MA) July 8, 1774, 3.

⁵¹ *Massachusetts Spy*, (Boston, MA), May 6, 1784, 3.

the bed. The prostitutes not only stole Mrs. Gair's artistry, but did it with a "Light burning in the Room" and "left a bonnet in the passage way" in return.⁵²

Eighteenth and early-nineteenth century nightwalkers were typically considered to be one of two kinds of people: prostitutes, or general thieving hooligans who contributed to the peril of the night season. Good citizens wished to protect "what little property we have still left" from the "pimping spies and night-walkers, who strive to fatten on the spoils of their suffering fellow citizens."⁵³ Nightwalkers were a menace. They resorted to "houses of bawdry and incontinency." They were "eves-droppers" who pushed carts into ponds and wrote "filthy words and figures."⁵⁴ Aside from stealing watermelons, and peeping in windows – the purview of gentlemen nightwalkers, people feared and disdained prostitutes, who were not without their criminal inclinations.

A Boston Police Court record from 1823 allows us to peep into the kinds of behaviors women were arrested for. During the week of August 23rd alone, nine women were arrested for being "wanton and lascivious persons in speech, conduct and behaviour." Three for "being common night-walkers," and three for "being common railers and brawlers."⁵⁵ By the 1820s, the fate for female nightwalkers could be particularly unsavory. Social reform had taken hold of the juridical imagination and "the hardened though youthful wretches" hauled in off the streets in the night-time were sentenced "to the workhouse, as a House of Correction, for the term of six months." For many, this was a life sentence, as conditions in the houses of correction drastically

⁵² "Burglary," in *Herald of Freedom* (Boston, MA), October 19, 1790, 42.

⁵³ "Extract of a Letter from a Gentleman in Portland, to his friend in Boston, dated Portland, Jan. 14, 1809." *Greenfield Gazette*, January 23, 1809, 3.

⁵⁴ *Connecticut Herald*, (New Haven, CT), March 28, 1815, 3.

⁵⁵ "Boston Police Court," *Alexandria Herald* (Alexandria, VA), September 1, 1823, 3.

reduced one's life expectancy, though it was cast as the best possible compromise for the "peace of the town" and the "best good of the subjects."⁵⁶

While white men and women, with few exceptions, resorted to "petit larceny," lewdness, and poisonous plots, black men and mulattos were almost universally accused of committing the violent crimes in the nighttime. White "ruffians" had been known to "attempt to murder" by knocking down helpless women and leaving them to revive and crawl "unassisted and unobserved" to their houses where they took to their beds, but the main targets of legislation preventing violent disorder were nearly always black or mixed-race men, and they were typically accused of succeeding in their attempts at alleged crimes.⁵⁷

In 1794, the fourteen-year old daughter of a "creditable family in Vassalborough, by the name of Tilton," was walking home from her sister's house when she was accosted in the woods. She was "overtaken... by a negro man, who after committing a rape, murdered her and hid her body under a log, and covered it with rotten wood." The neighbors of the Tilton family, given undisclosed "certain circumstances" identified the unnamed suspect, who allegedly confessed and was taken into custody.⁵⁸ Suspicion, as much as skin color, marked suspects, who by law, were already feared predators of the night-season. In 1823, sixteen years after the abolition of the slave trade, "a negro man by the name of Benjamin Stewart" was imprisoned "on suspicion of having murdered a Mrs. Oberholzer."⁵⁹

A case described as "truly shocking to humanity," was one discovered by candlelight. Mrs. Oberholzer was attacked in her bed while a little girl slept in the same room. Awakened by

⁵⁶ "Police Court," *City Gazette and Commercial Daily Advertiser* (Charleston, SC) June 22, 1825, 2.

⁵⁷ *The Columbian* (New York), April 22, 1816, 3.

⁵⁸ "A Murder," *Dartmouth Centinel* (Hanover, NH) June 16, 1794, 3.

⁵⁹ "Shocking Murder," *Baltimore Patriot* (Baltimore, MD) September 19, 1823, 1.

the sound of struggle, the girl ran to her neighbor Mr. Zimmerman, for help. He “proceeded to the place with a candle, and finding a window hoisted, held in the light, and asked who was there?” According to Mr. Zimmerman, Benjamin Stewart “rose from the bed” and demanded passage or he would “shoot him dead.” For reasons unknown, Zimmerman needed to return to his house for another candle, and when he arrived back at what was now a crime scene, Mrs. Oberholz was dead, “with evident strangulation marks on her neck.” The “circumstances connected with this transaction” left “no doubt but a rape was committed in the first instance”; Stewart was identified by Zimmerman and imprisoned.⁶⁰

Like the murdered Tilton girl, and Mrs. Oberholz, Sally Talbott was another victim of not only the night-season, but the disordered night-walkers whom the courts had tried so vigilantly to restrain. Sally, “of the tender age of twelve years old,” and an only child, “was ravished and murdered.” These “horrid crimes” were “supposed to have been committed” by a Mulatto fellow who happened to live in the same town, by the name of Jack Battis, who fled his persecuting prosecutors. His description was much like that of the slave who stole himself in the night-season: “said mulatto is 19 years of age, 5 feet 7 or 8 inches high, broad face, large flat nose, thick lips, speaks slow and moderate, and a little thick, has remarkable large feet, and short wooly hair (Salem Gazette).” As a stock description of nearly any African American male on the run, this list of traits could have been made to apply to any number of men. Why Jack Battis was chosen as the perpetrator remains a mystery.⁶¹

The courts were far more certain of the facts in cases involving white men committing unspeakable deeds in the night season. William Lathrop, unlike Benjamin Stewart, was given

⁶⁰ “Shocking Murder,” 1.

⁶¹ “Horrid Rape and Murder!” *The Annals of the Times* (Kennebunk, ME), July 5, 1804, 3.

due process of the law and awarded “several very respectable witnesses,” the adversarial process, and trial by jury rather than testimony by candlelight and imprisonment. *The Hudson Gazette* reprinted Lathrop’s thundering judgment from the court. Lathrop was granted a discourse with judicial authority in the public space of the courthouse and newspaper. Benjamin Stewart was not. Lathrop was told, with due process of law, that he was “indicted and convicted of a rape, upon the person of Anna Makens, accompanied with circumstances of peculiar aggravation and horror.” Lathrop’s “brutal purpose” was to rape and to strangle. His crime against society as a “married man, with several children” was to “basely” take advantage of her “husband’s absence to perpetrate the crime.” He burgled “the house in the night-time.” He breached “his marriage vow” and “ruined a virtuous woman; polluted the bed of her husband, and robbed the family of its domestic happiness.” This was a most “complicated act of wickedness,” singular in the “annals of juridical history.” Lathrop was determined guilty by “the court, the jury, the bar, and spectators” who all concurred in “a fixt belief” that he committed the crime of rape.⁶² Stewart had no such opportunity to exercise a defense.

Anna Makens was not allowed to speak for herself in her testimony against Lathrop. The presiding judge, speaking for Anna, offered up Lathrop a stunningly incisive list of charges that gave the public insight into the private pain of a rape victim. Lathrop was a “creature... unfit for society” and “more depraved than the savage that roams the wilderness”; he was “worse than a murderer.” His crime left “the sufferer possessed of existence” and embittered with the memory of the violence done to her. Lathrop’s rape was a rape not just of Anna Makens but also of societal values. Anna was bereft of her social network and the ability to confide in her family and friends. She lost her essential, domestic personhood: her marriage bed was corrupted, her

⁶² “Domestic Affairs,” *Hudson Gazette* (Hudson, NY), September 29, 1801, 2.

innocence ripped from her, and her identity as a mother, neighbor, friend, and relation suppressed.⁶³ Lathrop “like a monster... feasted on [her] misery.” He showed no remorse. Sentenced to hard labor for 21 years, five of solitary confinement, the shame of being a prisoner-ward of the state, Lathrop, unlike Benjamin Stewart, and Anna Makens, was granted the liberty to defend himself before society.

Vandalism, carousing gangs, theft, abuse, rape, and murder: this was what awaited people after the sun went down. Crimes of opportunity afflicted both urban and rural populations, despite the presence of night watchmen in urban alleys and town squares. The night season was fraught with danger: widely published Acts of Disorder instructed citizens to specifically beware the alleged savages among them: blacks, Native Americans, and mixed race people. This was an act of reification as well as warning: it could not be undone in the fervid imaginations of settlers, then citizens, who feared what could not be seen except by fickle candle light. The night seasons provided a habitat for somnambulists and a place in the social order for them. The nighttime was when disorder reigned and marginal members of society used their volition in dangerous, harmful ways. When somnambulists became more widely visible, it seemed natural to associate them with their criminal counterparts and predecessors who overruled order after dark. This association between somnambulism and criminality became a lasting one.

⁶³ “Domestic Affairs,” 2.

CHAPTER TWO:

ENTRANCED: THE AFTERLIFE OF SOUL SLEEPERS

Cavorting and Exhorting

Trance narratives that contained the component of the uncontrollable, unresponsive body tapped into the broader socio-legal context of bad doings during the night season. The entranced body was seen as a potentially dangerous entity as well as a source of embodied knowledge production. Clerical authorities seeking control over the knowledge produced by entranced bodies sought to impose moral control over the immoral body immersed in the deviance of the night season and the right to interpret the visions of the afterlife that trance travelers brought back with them. Distinguished from a vision or a dream, the entranced body was esoteric and unnatural. It was a wonder to behold, and a sign that the soul had made its departure. While there were three general, consecutive states of disorderly bodies that afflicted both women and men throughout the colonial period, there was also a degree of overlap between states such as demon possession during witchcraft, and dreaming with the trance state.

While trances were themselves an in-between state, the trance itself can be positioned between two other colonial American states used to explain the body in suspension prior to the introduction of suspended animation into the transatlantic medical worldview. Prior to an appearance of abundant trance states in early the early American colonies, spirit possession was the primary explanation invoked to explain trance-like states.⁶⁴ As bodily trances became the

⁶⁴ Garrett argues that spirit possession is a type of theater that helped to incite religious excitement and propel revivalism through theatrics. I do not find that the theatrical argument applies to my broad argument, but is nonetheless an interesting perspective.

preeminent vessel for travels of the soul during the revivals of the 1730s and 1740s, spirit possession was cast aside as the authoritative reason behind women speaking out of turn.

Before women in colonial America demonstrated a propensity to use trances as a means to speak about their emerging inner lives and to exhort publicly about the afterlife and salvation, we can identify a precedent in the incidents of spirit possession among American women prior to the first Great Awakening. The long and textured history of spirit possession is beyond the scope of this project, however it is worth pausing to consider the extended history of colonial American women whose out-of-control bodies compelled them to speak as individuals in the public sphere – mainly the meetinghouse and the courtroom – about matters of significant spiritual importance.

Carol Karlsen's book *The Devil in the Shape of a Woman: Witchcraft in Colonial New England* (1987) claims that although the Great Awakening signified the permanent decline of Puritanism in New England and the correlated power of witchcraft, a corollary behavior appeared in the young and/or female adherents of revivalism that "produced physical responses... that resembled those of the possessed." Karlsen notes that the "Awakening's leaders plucked these brands out of the burning without the intermediate step of exorcizing their demons." Rather than resisting the Devil and suffering the consequences, those who resisted God would pay the price of their bargain. As Mary Beth Norton shows, women accused of witchery often described meeting the devil in the form of a black man. Many of these young women claimed to have met a black man in the night season, or on the frontier, which led to their moral undoing.⁶⁵ At the height of the witchcraft epidemic in Salem in the late seventeenth century, the possessed would

⁶⁵ See Karlsen, *The Devil in the Shape of a Woman*; Demos, *Entertaining Satan*; Mary Beth Norton, *In the Devil's Snare: The Salem Witchcraft Crisis of 1692* (New York: Alfred A. Knopf, 2002), 80-81. Norton discusses the testimony of Abigail Williams who claims that she had met the devil, which she described as a black man. She allegedly met the devil "on the Maine frontier" just prior to the renewal of the Wabanakis tribe's attacks on the English in the region.

be afflicted by convulsions, uncontrollable emotions, and, at times, they would fall into trances or suffer from bodily paralysis. Some of the earliest reports of possession dating to the 1670s in Connecticut recall “strange fits, with violent, contorted body movements; prolonged trances, and paralyzed limbs...”⁶⁶ Women who were marked as witches were accused of “night wandering” – a vocation in which they “forced themselves sexually on unwilling men.”⁶⁷ Karlsen suggests that because possession was accepted within Puritan culture as a happenstance, resistance to possession did not come from disbelief; rather exorcism rituals of young women who were supposedly possessed involved convincing them that the danger of demonic possession was an external phenomenon.

If a young woman came to believe that the possession was a manifestation of her internal self, then she was at her most vulnerable to accusations of witchcraft. Karlsen’s broad interpretation of women speaking out after their bodies were wrenched out of their self-possession was one of religious rejection. She maintains that many of the women subject to accusations of spirit possession and witchcraft were dissatisfied with the public roles assigned to them within their Puritan communities. Possession was one means of resisting ministerial authority and expressing personal resentments.⁶⁸ Key to Karlsen’s observation was that women possessed were physically unable to speak. Her vivid description of “their tongues curled upward towards the roofs of their mouths, or curled downward and outward to extraordinary lengths” stopping speech and provoking gestural outrage is suggestive of a coming change in how women

⁶⁶ Karlsen, *The Devil*, 11, 232.

⁶⁷ Karlsen, *The Devil*, 224.

⁶⁸ Karlsen, *The Devil*, 242, 244-247.

would use their bodies to generate speech during the Great Awakening and onwards.⁶⁹ One of the last recorded demonic possessions coming from Puritan culture is thought to have occurred in Boston in 1741 to a woman by the name of Martha Roberson or Robinson.

A merchant, Captain Joseph Pitkin, a New Light and participant in revivalism, had heard that a diabolical force had possessed Martha Roberson. When he arrived in Boston, she sought him out and invited him to her home where he reported that she told him the Devil was disturbed by his coming to town and would make it known. Martha was to be his mouthpiece. Martha had been a participant in George Whitefield's conversions and joined the Old South Church as a result. When Gilbert Tennent came through town, Martha went to hear him preach and felt the devil possess her immediately. Tennent reportedly left the sermon saying that a member of the audience was possessed by the devil and went on to lead a communal exorcism. After hearing this story, the demon in Martha showed himself to Pitkin and he proceeded to attempt to exorcise her of it. Others in Boston were praying for Martha's release to no avail. Pitkin was unable to help her, and eventually Martha recovered herself, married and lived an otherwise normal and anonymous life. This anecdote, first related by Elizabeth Reis in her article "'The Devil will roar in me anon: ' The Possession of Martha Roberson, Boston, 1741,'" (1998) reveals a change in how women's afflicted bodies were the subject matter of a religiously motivated change in the perception of women's inner lives.⁷⁰ The revivalist impulse to exhort about personal experience

⁶⁹ Karlsen, *The Devil*, 249. Elizabeth Reis, *Damned Women: Sinners and Witches in Puritan New England* (Ithaca: Cornell University Press, 1997), looks at how gender distinctions in Puritan culture affected the outcome of how men and women would take responsibility for their sins and perceive the pre-existing corruption of their souls, making women more likely than men to engage in witchcraft accusations and manifestations.

⁷⁰ Elizabeth Reis, "'The Devil will roar in me anon: ' The Possession of Martha Roberson, Boston, 1741,'" *Spellbound: Women and Witchcraft in America* ed. Elizabeth Reis (Wilmington: Scholarly Resources, 1998), 99-118. D. Brenton Simons summarized Reis's scholarship for popular consumption in *Witches, Rakes and Rogues: True Stories of Scam, Scandal, Murder, and Mayhem in Boston, 1630-1775* (Beverly: Commonwealth Editions, 2005), 32-39. For a more scholarly argument on the transition from possession narratives to outward displays of

enabled trance narratives and trance experiences to slowly replace accounts of spirit possession. Enthusiasm, though reviled by some, provided a new means by which to express the contents of mind with contortions of the body.

While revealing an opportunity for women to exhort in public, trances also showed a significant change in how Americans saw their own bodies in relationship to the landscape. The trance narratives published during the first Great Awakening differed from those disseminated during the Second Great Awakening. In the 1790s, as opposed to the 1730s and 1740s, there was a much greater emphasis on the physical geography of the afterlife as related in trance narratives. This change in emphasis on afterlife geography reflected a fundamental shift in how people conceived their own bodies. The trance narratives from the 1790s reveal a fixation with finding a place for the body in the afterlife, as well as a place for the soul. Bilocation of body and soul became a much more disturbing prospect once medical theory postulated that the mind (and soul) were material and inextricably attached to the body. Trance narratives were an expression of this unease over the new somatic stance on the constitution of the mind. Suspended animation had allowed people to catch a glimpse of a level of consciousness they had not witnessed before. They had printed, if not eye witness evidence that the soul returned to the body after a brief departure. Angst over being buried alive sharpened as people came to expect that the soul-mind would live on until judgment day even if the body stopped operations. The afterlife, therefore, needed to be construed as a physically comfortable place for the mind and body to wait out the millennia.

Historians have taken the varied literature on visions of the afterlife that appeared in the American colonies throughout the eighteenth century and conflated the term “trance” with

enthusiasm via women’s bodies, see Susan Juster, *Disorderly Women: Sexual Politics and Evangelicalism in Revolutionary New England* (Ithaca, NY: Cornell University Press, 1994).

dreaming. I argue that there is clear and distinct evidence that trance states were seen as separate from, but connected to dreaming. One could dream while in a trance, but in many cases, dreams were viewed as a different category of experience altogether. Dreams were associated with inquiries into sleep, which proliferated towards the end of the eighteenth century in the United States, and excluded trance states. Trances would appear again after the mid-nineteenth century under the umbrella of artificial somnambulism and mesmerism, but they are not comparable to the enthusiastic trances experienced by revivalists and do not explain how naturally occurring trances were the ancestor of early-nineteenth century natural somnambulism. Taves study of nineteenth-century trances is situated after the reintroduction of mesmerism into the United States. While her work is the most comprehensive source on bodily expressions of religious knowledge, she does not examine the eighteenth century trance, choosing instead to focus on how the state of artificial somnambulism informed bodily gestures of religious ecstasy. The eighteenth century material she covers relate to Charles Chauncey's anti-revivalist abhorrence of enthusiastic behaviors. She writes "he was disturbed by the appearance of '*strange Effects upon the Body*' and, with respect to the appearance of 'raptures,' 'extasies,' 'visions,' 'trances,' and 'revelations,'" but does not explore the distinctions between the states.⁷¹

The literature on the history of dreams exposes how separate trance narratives or trance visions were from the act of dreaming. There are four historians in particular who have contributed greatly to the history of dreaming in eighteenth century America and, for the most part, leave trance narratives out of their arguments. For example, Carla Gerona's work "Night Journeys: The Power of Dreams in Transatlantic Quaker Culture," (2004) argues that Quakers, among other visionaries active during the Revolutionary period used what she calls "dream-

⁷¹ Taves, *Fits, Trances, and Visions*, 21-22. I use the term *natural trances* to distinguish religiously motivated trances from those used as gateways to clairvoyance in nineteenth century mesmerism and spiritualism.

work” to find spiritual enlightenment via dreaming. Gerona’s evaluation of published dreams is thorough and descriptive, however, she does not address how trance narratives influenced the culture of dream-work throughout the eighteenth century.⁷² This inattention to trances suggests that Gerona conceptualizes dreams as categorically separate from corpse-like trance states, which were far more unique and less ecumenical than dreaming.

Mechal Sobel’s argument that visionary dreams illustrate a transformation from the collective “we-self” of pre-revolutionary America to a “far more individual and interior one in post-revolutionary America is concerned with the interiority of dreams and what the content of our forbearer’s night-visions had to say about self-fashioning. Sobel takes the trope of Euro-American dream journeys to the afterlife to be a “cultural pattern dream” that stems from John Bunyan’s seventeenth-century prototype in *Pilgrim’s Progress* (1681) and *Grace Abounding* (1666). While I agree with Sobel’s arguments that the publication of dreams helped to advance the interiority of the self in late eighteenth-century America, I also believe that trances must be considered as a similar state. The entranced physical body suggested a separation of body and soul. The soul travelers who returned to their entranced bodies from the afterlife were also developing an interiority of self by exploring a personal vision of the promised kingdom to come without the use of their bodies. The cultural dream patterns of the trance narratives remain similar to those discussed by Sobel, but Sobel’s argument does not take into account how the division between an individual’s body and an individual’s soul contributed to the emergence of interiority and individual identity.⁷³

⁷² Carla Gerona, *Night Journeys: The Power of Dreams in Transatlantic Quaker Culture* (Charlottesville: University of Virginia Press, 2004).

⁷³ Mechal Sobel. *Teach Me Dreams: The Search for Self in the Revolutionary Era* (Princeton: Princeton University Press, 2000), 18, 35-36.

In his article “The Suburbs of Eternity: On Visionaries and Miraculous Sleepers,” (2008) Robert S. Cox presents a densely woven history of attitudes towards sleep as sampled from various writers on the topic who were engaged with dreaming and sleep during the eighteenth century. Cox argues that sleeping was a perilous undertaking. “[A]t night, the spiritual sleeper was prone to enthusiasts and ‘false teachers’ who intended to cheat them of ‘truth’ and rob them ‘of their most precious treasure, viz. an inheritance among ‘the saints in light.’”⁷⁴ Cox avoids making any claims distinguishing the trance from the dream, instead referring to the literature on visionaries who embarked on the pilgrim’s tour of the afterlife, much like the one Sobel refers to. While Cox chooses to focus on the content of visionary narratives such as those of Sarah Alley and Thomas Say, who both specifically referred to their experiences as trance-based, without addressing the bodily state of trance, he does make important headway on a particular point. Cox’s claim that “the transport of the sleeper’s soul laid open the possibility of direct divine revelation” is aligned with my own interpretations of how eighteenth century trance-travelers interpreted their own experiences.⁷⁵

A. Roger Ekirch’s study on the sleep patterns of pre-industrial people in Great Britain provides the most support that dreaming and trances were divided from one another in the world-perception of the transatlantic Anglo-American community of sleepers. Ekirch explains that prior to the onslaught of artificial light in the mid-nineteenth century, people reported a long and pervasive pattern of sleeping in two segments, with a period of meditation between the two for remembering and reflecting on dreams, alongside other activities. It was not uncommon for people to awaken after the first sleep, walk around, have a snack, have sex, or spend quiet time

⁷⁴ Robert S. Cox, “The Suburbs of Eternity: On Visionaries and Miraculous Sleepers,” *Worlds of Sleep* eds. Lodewijk Brunt and Brigitte Steger (Berlin: Frank & Timme, 2008), 53-73, 61.

⁷⁵ Cox, “The Suburbs,” 65.

thinking, before returning to the second segment of sleep, “dead sleep,” which would see the body and mind through dawn. This extensive analysis of segmented sleep inclusive of aware and intentional reflection on dreams is the strongest indicator that the physiological and mental experience of sleep and dreaming had its own familiar structure and habit. To be in a trance was to be in departure from regular segmented sleep. Disruptions to sleep from infants, animals, night carousing, and indigestion, among other human bothers, did affect the quality of dreams, but it does not follow historically that trances and dreams were therefore the same mental experience. Sleep was definitive, bounded by time and cultural conventions.⁷⁶ Trances were anomalies that provoked premature burial and comparisons to corpses. The unease and closeness to death that trances relayed speak more to a general fear of unnatural activities in the nighttime, including deviations from sleep, and a supernatural disconnect of the soul from the body. The distress over the loss of volition that characterized the body-in-trance endured through time to somnambulism, which, as we will explore in the next chapters, was a dangerous evolution of the trance state in the context of the emergence of early nineteenth-century conceptions of the secular mind and the slipperiness of death.

Soul-Sleepers

Typically, dreamers and visionaries slept and there was no doubt that they were sleeping. The possessed were awake, but perhaps not self-aware. The entranced were markedly different. The early colonial period did not uphold the entranced body as a Godly occurrence. Ministers like the brooding Massachusetts Mather dynasty (Increase and his son Cotton) with an ear to heaven and an eyeball on Satan, were enraptured by portentous accounts of dire messages from a wrathful and punishing God. Exposing their profoundly obsessive natures, Cotton and Increase

⁷⁶ A. Roger Ekirch, “Sleep We Have Lost: Pre-industrial Slumber in the British Isles” *American Historical Review*, (April 2001): 343-386. Koslofsky, *Evening’s Empire*, illuminates the meaning of nighttime and the rhythms of sleep in this study on darkness, criminal activity, and the proprietary rulers of the night season.

Mather wrote in their lengthy tract, *The Wonders of the Invisible World: Being an Account of the Tryals of Several Witches Lately Executed in New England* (1693), that trances were the province of witches. “What is their striking [sic] down with a fierce Look?” the Mathers wrote. Growing more rancorous – more horrified – they continued, “What is their making of the Afflicted Rise with a touch of their Hand? What is their Transportation thro’ the Air?” As if this rising hysteria weren’t frightening enough, the obsessive turn of the Matherian mind went beyond what most people would allow into their vision of the world: “What is their Traveling in Spirit, while their Body is cast into a Trance?”⁷⁷ What madness indeed! “Grievously vexed” by witches’ penchant to “render themselves, and their Tools Invisible,” the Mathers also held them responsible for driving cows to insanity, entering their names in a Satanic book, gathering at the call of the Trumpet, appearing to non-witches engulfed in flames and making their accouterments invisible at any possible opportunity.⁷⁸

Early Puritan protestations about the soul in a state of sleep provided the metaphysical foundations for the coming departures of the soul during evangelical trance states in the 1730s and onwards.⁷⁹ In his 1692 essay *A Midnight Cry: An Essay for Our Awakening Out of that Sinful Sleep*, Cotton Mather thundered, “there is a sinful sleep, whereto the souls of men are liable.” The essay was an answer as to what happened to the soul when the body was prostrate in

⁷⁷ Cotton and Increase Mather, *The Wonders of the Invisible World: Being an Account of the Tryals of Several Witches Lately Executed in New England* (Boston MA, 1693), 161.

⁷⁸ Mather, *The Wonders*, 161.

⁷⁹ Catherine L. Albanese, *A Republic of Mind and Spirit: A Cultural History of American Metaphysical Religion* (New Haven: Yale University Press, 2007), 6. Albanese’s definition of metaphysics in the history of American religious experience is a good way to understand Mather’s motivations for exploring the state of the soul in relation to sleep. She writes “For metaphysics, as the term itself vaguely suggests... religion turns on an individual’s experience of ‘mind’ (instead of ‘heart,’ as in evangelicalism). In this context, metaphysical forms of religion have privileged the mind in forms that include reason but move beyond it to intuition, clairvoyance, and its relatives such as ‘revelation’ and ‘higher guidance.’” Based on this explanation of metaphysics as applied to religious experience, I argue that Mather is opening the door to revelation in sleep by exploring psychopannychism.

sleep. “Wee may not Imagine that our Souls do fall into the Sleep of a Senseless Condition when we Dy,” Mather proclaimed.⁸⁰ His visceral horror at the thought of the soul not surviving the body’s return to dust is palpable. “The Opinion of the Psychopannychist, or Soul-sleeper, is too vile a thing for any man to swallow,” he choked out. Psychopannychism was “the doctrine that the soul is in a state of sleep or suspended mental life in the interregnum between death and the final judgment.” Luther theologically supported it, but Calvinists were very much opposed to the notion.⁸¹ Calvinists favored the idea that the soul did not go into a state of suspended animation between bodily death and resurrection. The presence of anti-psychopannychism in colonial American religious thought made it possible for soul journeys to occur, especially during revival trance experiences. Mather was also profoundly concerned with the psychopannychism of the living: “That our Souls do often fall into the Sleep of a Secure Condition, while we Live, is a thing whereof we have, alas, too pernicious, too lamentable Evidences.”⁸² If you were sleeping, your soul was probably not in a state of prayer, making salvation more uncertain. For Calvinists, this was a difficult problem indeed.

According to the professors of faith in early New England, a trance was a sign of evil afoot. To be a soul-sleeper was to be damned eternally. Accounts of ordinary men and women slipping into dreamlike states (including visions and trances) were expressions of a widespread Puritan belief in wonder: the epistemic anchor that lashed seventeenth-century American settlers

⁸⁰ Cotton Mather, *A midnight cry: an essay for our awakening out of that sinful sleep, to which we are at this time too much disposed; and for our discovering of what peculiar things there are in this time, that are for our awakening. In a discourse given on a day of prayer, kept by the North-Church in Boston 1692. By Cotton Mather.. Now published for the use of that church, together with a copy of acknowledgments and protestations made in pursuance of the reformation, whereto we are to be awakened* (Boston: Printed by John Allen for Samuel Philips, 1692), 9.

⁸¹ Mather, *A Midnight Cry*, 9. See Mark Johnston, *Surviving Death* (Princeton: Princeton University Press, 2010), 23.

⁸² Mather, *A Midnight Cry*, 10.

to shadowy beliefs in apparitions of signs, deviations, monstrosities, witchcraft, and thunderous lacerations by a punitive God.⁸³ During the early colonial period, wonder was an epistemological way of interpreting the world. Though gentlemanly collectors of natural specimens would transplant the competing, but companionate, epistemology of curiosity to the new world in the early-eighteenth century, wonder persisted in colonial America well into the 1730s and 1740s. Trances did not yet have a medical explanation, nor were there attempts at explaining the status of the body using medical knowledge. The bodies of the entranced were proof positive of the truth of the righteousness of the awakened soul. Prior to the first revivals, Puritans were preoccupied in making sense of signs and markings on the external body; they believed that such inscriptions were messages from God – or Satan. Personal journeys to the afterlife via the trance state were not yet part of the Christian landscape and would not become so in an affirmative way until the Great Awakening, when one no longer had to be a handmaiden of the devil to endure a trance.

Around the time *The Prodigal Daughter* entered the moral world of New England in the late 1730s, a young man in New Jersey preparing for “the Presbytery as a candidate for the gospel ministry,” over-exerted himself. The intensity of his studies “brought on a pain in his breast, and a slight hectic.” It was not long before he “became emaciated, and at length was like a living skeleton.” Though surrounded by friends, family, and attended by his devoted physician, the young man, while “conversing one morning with his brother, in Latin, on the state of his soul” suddenly “fainted and died away.” Common death diagnostics were employed: the now dead young man was laid out on a board “after the usual time,” and the corpse prepared for

⁸³ Hall, *Worlds of Wonder*, 86-87, on visions and dreams as religious or wondrous experiences in seventeenth-century New England. Ian Hacking defined wonder categorically when he wrote: “Marvels are meanings out of control.” Though he is referring to the incompatibility of marvels and laboratory science, the definition applies well to the long history of wonder in this particular context. Ian Hacking, *Rewriting the Soul: Multiple Personality and the Sciences of Memory* (Princeton: Princeton UP, 1995), 144.

burial. His physician, much aggrieved at the loss of his dear friend, took a morbid morsel of gossip to heart: one of the pallbearers had “observed a little tremor of the flesh under the arm.” This faint quiver of putrefying flesh was adequate grounds for an experiment. The physician thrust his own arm into hot water, warming “to make it as sensible as possible” and then “felt under the arm, and at the heart” of his skeletal companion. Upon discovering “unusual warmth” that no one else could feel emanating from two of the body’s pulse points, he promptly canceled the funeral and insisted that his friend be restored to his bed.⁸⁴

The young man’s brother – also a man of faith – found this unusual preservation to be “absurd, [as] the eyes being sunk, the lips discolored, and the whole body cold and stiff.” The persistent physician tried for three days to restore life to his friend. On the third day, funeral arrangements were once again resumed, and mourners gathered to guide their compatriot to the afterlife. Appalled, the physician begged for a forty-five minute delay in which to administer resuscitation in any way possible. “He had discovered that the tongue was much swoln [sic] and threatened to crack.” His response was an attempt to “soften it by some emollient ointment put upon it with a feather.” The feathering of the not yet festering corpse’s tongue was interrupted by the brother who had come to claim the body for the worms, and having little patience for the desperation of the physician, mistook “what the doctor was doing for an attempt to feed him. Startled by this grotesque behavior, the brother scolded, “It is shameful to be feeding a lifeless corps,” and insisted that the funeral proceed. The corpse, itself apparently shameless, “to the

⁸⁴ Elias Boudinot, *Memoirs of the life of the Rev. William Tennent, formerly Pastor of the Presbyterian Church at Freehold, in New-Jersey: in which is contained, among other interesting particulars, an account of his being three days in a trance, and apparently lifeless. Extracted from the "Evangelical intelligencer" for the year 1806* (Trenton: James Oram, 1810), 10-11. In the mid-nineteenth century this account of a trance would resurface in Archibald Alexander, *Biographical Sketches of the Founder, and Principle Alumni of the Log College. Together With an Account of the Revivals of Religion, Under Their Ministry* (Princeton: J.T. Robinson, 1845). While Alexander’s account of the life of William Tennent Jr. is reputed to be a patchwork of anecdotes, many of which were copied from earlier sources – including Boudinot – it is still an insightful guide to this genre of adulatory memoir of revivalist preachers.

great alarm and astonishment of all present, opened its eyes, gave a dreadful groan, and sunk again into apparent death. This put an end to “all thoughts of burying him.” After an hour or so of more groaning and eye fluttering, “a complete revival took place... to the no small astonishment and conviction of very many who had been ridiculing the idea of restoring life to a dead body.⁸⁵”

The young man was none other than the Reverend William Tennent Jr., one of four sons of William Tennent, the famed Presbyterian minister who had emigrated from Scotland and settled in New Jersey to establish a New Side Presbytery ministry and academy, derisively known as “The Log College,” after the features of its architecture: it was originally built as a crude log cabin. Gilbert Tennent, William Tennent Jr.’s brother (it is unknown if he is the brother who was so impatient to bury William Jr.), became a central figure in the Great Awakening in the middle colonies in the 1740s.⁸⁶ The entire Tennent family played a prominent role in shaping Presbyterian practices in the mid-Atlantic colonies for much of the eighteenth century. They were proponents above all of catechization, placing an emphasis on rebirth through the conversion experience. The focus of their preaching was on Calvinist and Christian doctrine, but not to the extent of alienating possible candidates for conversion.⁸⁷ William Tennent Jr. expired definitively during the American Revolution (1777), and was followed in death, by his son William Tennent III, a Calvinist preacher living in Charleston, South Carolina.

⁸⁵ Boudinot, *Memoirs*, 11-12.

⁸⁶ Susan Hill Lindley, *‘You Have Stept Out of Your Place’: A History of Women and Religion in America*. (Louisville KY: Westminster John Knox Press, 1996), 39-40. Part of the work of revivalism that the Tennents were partaking in during the 1720s and 1730s involved a campaign to publicly criticize Congregationalist churches for their formalism, their failure to exercise moral control over their members, and what they perceived to be a lack of “true piety and spiritual regeneration.”

⁸⁷ See Butler, *Awash in a Sea of Faith*.

Tennent III passed immediately following his father's funeral from a fever he contracted while returning home, thus ending this dynastic lineage of preachers.⁸⁸

The ambiguous corpse laid out in a bed, fretful family members caught in a funerary purgatory, the shamefulness of feeding a corpse: the woeful tale of William Tennent Jr. reads like a prototype of the American Gothic literature that would capture the imagination of the morbidly inclined in the nineteenth century. Not only was William Tennent Jr. far removed, both in time and circumstance from Edgar Allan Poe, Charles Brockden Brown, and Nathaniel Hawthorne, but he was also a revivalist minister with the Calvinist propensity for predestination. Jon Butler, picking up the thread of historian Charles Hartshorn Maxson, identified the Tennent family's motivation for backing revivals as linked to "a mystical experience surrounding the near death of John Tennent... both John Tennent and William Tennent Jr., were mystics as well as Calvinists." They were able to catechize by "manifesting supernatural power in their own bodies." They altered the severe presentation of Calvinism that was antithesis to popular culture in order to foster recruits.⁸⁹ Gilbert, John, and William Tennent each used their bodies to exhibit their access to supernatural intervention, surpassing what was possible during the reign of the Mathers: Gilbert was possessed, John witnessed an apparition, and William Jr. was touched with the miracle of being saved from premature burial. Possession took the form of illness, personality shifts, and ecstasy. John claimed to have witnessed Christ incarnate. Butler interprets William Tennent's trance as a pantomime of the resurrection, but does not explain it in any other terms.⁹⁰

⁸⁸ Marion C. Chandler, "Tennent, William III (3 Feb. 1740 - 11 Aug. 1777)" *American National Biography Online*. <http://www.anb.org.ezp-prod1.hul.harvard.edu/articles/01/01-01156.html?a=1&n=Tennent%2C%20William%20&d=10&ss=1&q=2>

⁸⁹ Jon Butler, "Enthusiasm Described and Decried: The Great Awakening as Interpretive Fiction," *The Journal of American History* 69 no. 2 (September 1982): 305-325, 310.

⁹⁰ Butler, *Awash*, 184-185.

In an attempt to explain the intensity of the conversion of the second generation of Tennent brothers, Maxson argued that “finally, when John and his brother William were both so dangerously sick that their lives were despaired of, a rich discovery of God’s love suddenly came to John, even when his death was momentarily expected.” So rapidly did his strength return that in a few hours he was led exultantly to the room of his brother William. Both recovered. Such experiences in the Tennent household were regarded, no doubt, by conservative Presbyterians as the excesses of enthusiasm, but the Tennents themselves never lost the “deep impress of such crises in their family history.”⁹¹ The Tennents were primarily Calvinists, and were most likely purveyors of mid-eighteenth century American mysticism, but, like in all good near-death experiences, there is more to the story.

Butler describes the Tennents as a family of charismatics under Max Weber’s definition, suitable for the early eighteenth century timeframe. He describes the eccentric family as demonstrating leadership, supernatural intervention, and social validation of claims by followers. The Tennent family’s Scottish background could explain their mysticism. This does not provide a full explanation for their participation in using entranced bodies as sources of divine knowledge during American revivalism. They “emerged from a Scottish society redolent of intense popular supernatural expression, but by no means fully Christianized, much less Protestantized. Early modern Scotland exhibited magical expressions, including sacred places, healers, and amulets, as vivid as those found in England.” Albanese partially disagrees with Butler’s thesis. She argues that the story of evangelical history is false, and while Butler does much to advance that particular argument, her position that “a metaphysical thesis about American religious history, understanding metaphysical religion, both in Christian and non-

⁹¹ Charles Hartshorn Maxson, *The Great Awakening in the Middle Colonies* (Chicago: The University of Chicago Press, 1928), 28.

Christian forms” is “key to making sense of the nation’s religiosity.” Whether the Tennents were strictly evangelical or metaphysics does not extend to the meaning of trance within the wider population. Trances, in fact, did not help to make sense of America’s religiosity, but they did offer a different way for individuals and clergy to gain knowledge through the instrument of the body.⁹²

The apparent deaths and recoveries of William Tennent Jr. and his brother John have been read by their contemporaries, and by historians, as overt acts of evangelical enthusiasts, nearly expiring from overzealousness in their quest for perfect, divine love. The narrative regarding the odd manipulation of William Tennent’s body after his evident departure from the mortal coil has been blandly interpreted as yet another boosterish testimony: an artifact from the first Great Awakening, generated by its leaders, who used miraculous stories to invigorate their flock and swell their following. The gruesome and shocking details of William Tennent Jr.’s restoration to life suit the arguments of those who wish to establish Calvinist mysticism as a driving force behind religious enthusiasm in the changing social life of the colonies during the 1740s. The lurid sensationalism of abusing a corpse that is not a corpse lends itself to popular interest and a belief in the reality of Calvinist predestination (only God could restore life to his chosen disciples on Earth). The suggestion that near death experience was a birthright in a family of openly mystical ministers seemingly cements the case: William Tennent Jr.’s near death experience ought to only be read in the context of the Great Awakening and in explaining the power of mysticism over the early American religious imagination.

But Elias Boudinot published his memoir of William Tennent Jr. in 1806, not in 1732.

The periodicity marking the invention of the “Great Awakenings” becomes important to

⁹² Albanese, *Republic of Mind and Spirit*, 4. Butler. *Awash*, 182. For a comparative history of transatlantic revivals see Michael J. Crawford, *Seasons of Grace: Colonial New England’s Revival Tradition in Its British Context* (New York: Oxford University Press, 1991), 102-107.

understanding the longevity and evolution of the trance state through revivalism into somnambulism. The “account of his [Tennent] being three days in a trance, and apparently lifeless” meant something completely different to its intended audience. It meant something that was mystical, and perhaps Calvinist, but the trance itself went beyond revivalist enthusiasm, turning the body into a spectacle of uncertain death.⁹³ William Tennent’s terrifying ordeal was sold as a mystery with a broad evangelical appeal. Had he been alive or dead? Did he encounter the afterlife? How was his resuscitation accomplished? Had messages really been transmitted from beyond the grave to caution present and future sinners? Tennent’s own experience may have been one of mystical enthusiasm, brought on by excessive ecstasy, but it was appropriated seventy years later as an example of one of many early republic trance narratives (published between 1770 and 1820), which, when read together, define the trance as a state distinct from dreaming or possession, and give us insight into how the practice of exhortation was expanded by allowing lifeless bodies to host traveling souls (continuing the Calvinist commitment to eradicating soul-sleepers).

Ecstatic memoirs written about the unusual life of William Tennent Jr. and other luminaries from the 1730s and 1740s held a special appeal during the nascent days of American nationalism. Boudinot did not blunder into publishing the memoir of his departed friend; Tennent had been thoroughly dead for a respectable period of time by 1806, and his moment for another resurrection had arrived thanks in part to a resurgence of evangelicalism, referred to as the Second Great Awakening. The parameters of the Second Great Awakening are as contentious as the state of Tennent’s vitality during what must have been a very tense three days. While Butler’s argument that the Second Great Awakening was little more than an “interpretive

⁹³ Butler, *Awash*, 165, 170, 171-180.

fiction,” holds the most weight in light of the evidence, some works, though not particularly interactive with one another, situate the seeds of the Second Great Awakening in the 1790s. Barry Hankins explains its inception as a response to the upsurge of Deism (with its rejection of the Puritan notions of Grace, supernaturalism, and the deification of Christ) during the American Revolution. Hankins also argues that the wide-ranging destruction wrecked on churches and the architecture of congregations during the American Revolution thrust Americans with divisive loyalties into a climate where evangelical revivals could offer a sense of restoration. Lastly, Hankins argues that the opening of the frontier and the early beginnings of westward expansion contributed further to congregational fracturing and provided an especially urgent desire for reconstitution in the East. Cott provides a similar timeline: “converts appeared in Congregational, Presbyterian, Methodist, and Baptist churches in town after town beginning in the late 1790s, a time when revival seemed desperately necessary to churchmen and some lay person. Calvinist piety and religious intensity had been undermined throughout the eighteenth century by worldly engagement, rationalism, and deism.”⁹⁴

Historian Donald G. Mathews called the “‘Second Great Awakening’ ... one of those happily vague generalizations which American historians use every now and again to describe a movement whose complexity eludes precision.”⁹⁵ Mathews managed to find a consensus amongst other historians, such as Cott and Hankins that the Second Great Awakening was, at the very least, stirring in the 1790s, when trance narratives were at their peak. While admitting that the Second Great Awakening was the social maelstrom surrounding a broad transition from

⁹⁴ Barry Hankins, *The Second Great Awakening and the Transcendentalists* (Westport, CT: The Greenwood Publishing Group, 2004), 1-2; Nancy Cott, “Young Women in the Second Great Awakening in New England,” *Feminist Studies* 3 (1/2), (Autumn, 1975): 15-29, 15. See intro, n6 for Butler’s stance on “interpretive fiction” and the lack of evidence that a Second Great Awakening occurred.

⁹⁵ Donald G. Mathews, “The Second Great Awakening as an Organizing Process, 1780-1830: An Hypothesis,” *American Quarterly* 21, no. 1 (Spring, 1969): 23-43, 23.

“Predestinarianism to Arminianism,” Mathews argues that though revivalism and a development in individual relationships with God characterized the Great Awakening, the “Second Awakening was most noticeable in the undeniable quantitative fact that the Methodist and Baptist sects were not restructuring church life so much as extending it – they were recruiting new Christians by the tens of thousands.”⁹⁶ Trance narratives published during the period overlapping with the Second Great Awakening may have been used by some to recruit new souls, but they were markedly different from the first spate of trance narratives that accompanied the Great Awakening: the earlier trance narratives were testimonial, while the later ones were more individuated and meant to gather a spiritual following. The content remained similar, but the intent of the message changed.

A Pilgrim’s Progress?

Stories about extraordinary dreams, visions, and “trances,” circulated widely during the 1730s and 1740s as the converted began to probe the margins of their newly discovered religious country. Cataleptic trances were en vogue as a new generation of Americans, brimming with the Holy Spirit spilled forth testimonies about their encounters with angelic beings and their demonic counterparts. Historian Douglas L. Winiarski, identified this outpouring of faithfulness as a new genre: “revival narratives” (meaning religious revival, not revival from near death). In his broad survey of the many pamphlets and testimonials that were circulating during this period, he pulled out a tenacious pattern that would appear again, although in a drastically altered form, in the trance narratives created during the second Great Awakening. Winiarski found a trove of evidence claiming that “young men and women testified to the same phenomena: the cataleptic trance, the heavenly journey, the temptations of Satan, the father and son enthroned, and, most

⁹⁶ Mathews, “The Second Great Awakening,” 26.

importantly, the image of the Book of Life opened to the names of God's elect."⁹⁷ So many people were claiming to fall into trances, that public skeptics and critics compared trance visions as something akin to an outbreak, and dismissed the wide evangelical fixation with trance states as an amusement common to overzealous new converts. Winiarski does not conflate dreams with trances, but also does not situate trances as a bodily state of any lasting significance.⁹⁸

The earnestness surrounding so many public statements of soul trains to the afterlife-imaginary may indeed have been a way of communicating a common message across factions during a time of uplift and turmoil. Winiarski envisioned the world of the 1740s as one populated by a unique demographic of individuals who took their church testimony to the marketplace: "Heirs of the Quakers, Antinomians, and radical spiritists of a previous and progenitors of the Shakers, Universalists, and sectarians of the next, spirit-possessed visionists believed that they lived in a latter-day Pentecost – a time when Christ's return was imminent and all things were possible."⁹⁹ While pro-revival writers churned out spectacular accounts of meeting their Maker, and claimed that trances made it possible, the term "trance" was used to explain a deep sleep of ascendancy to heaven, not apparent death, and resuscitation was not pointed out as a necessary tool to save the entranced. Those who fell into trances were simply sleeping strange and seeing beyond themselves; very few people thought that death was a part of the process. Resuscitation and apparent death would become a key feature of trance narratives by the 1790s. The very interpretation of the relationship between the body and soul would undergo serious revision. The later eighteenth-century trance narratives do not indicate worry over soul-sleepers so much as

⁹⁷ See Douglas L. Winiarski, "Souls Filled With Ravishing Transport: Heavenly Visions and the Radical Awakening in New England," *The William and Mary Quarterly* Third Series, 61 no. 1 (January 2004): 3-46, 19

⁹⁸ Winiarski, "Souls Filled," 27.

⁹⁹ Winiarski, "Souls Filled," 11

they do over a literal loss of self-representation: with the body beyond the control of the mind and vice versa, more than revelation was possible.

By the 1770s trance narratives had taken on a different tone, one in which the trance was linked to anxiety surrounding corporeal death, followed by relief when grieving friends and family were spooked into joyous exclamations when their alleged dearly departed began to twitch, moan, and finally resume their bodily business – often at the very last moment as they lay on the figurative funeral pyre. For these men and women who wrote trance narratives during the American revolutionary and early republic period, the trance state, a mode of suspended animation, was a portal into another reality. Like their counterparts during the first Great Awakening, this other reality was uniformly described as the Christian afterlife, but its geography and inhabitants had changed. This change offers us clues as to how early republic evangelicalism shaped the imaginations of a burgeoning, moralistically self-conscious nation. Published as 8-16 page pamphlets, and occasionally in book-length memoirs, these accounts were both morally instructive literature and curious tales, haunted by the specter of sudden, apparent death, and marked by implicit failure of resuscitation techniques. One had to be dead-alive to make the successful journey to the weird and wondrous realm of the outer limits of heaven and hell.

The narrative structure of trance tales had changed alongside the physical features of the afterlife. The Book of Life was no longer a featured attraction; God's elect had faded from the theological foreground of early republic religious life with the advent of Deism and the recruitment-based nature of the new wave of evangelicalism. No longer was the entranced author tempted by the devil. The image of the enthroned father and son had also vanished from must-see attractions on the other side. A new narrative logic had replaced the mid-century formula.

Distinguishing “trance narratives” as a separate entity from visions and dreams has seemingly not been attempted – and they have certainly not been analyzed through the medical lens of states of suspended animation. Lumped together both in mid-century and in the late-eighteenth century with apocryphal visions and dazzling dreams of dallying with cherubs and shielding one’s face from the inevitable ugliness of the Prince of Darkness, trance narratives have been neglected as valuable evidence of a social impetus to revive the apparently dead before committing them to the worms. Without this change in how family and the community addressed the ambiguously dead body, trance narratives would have been limited in their scope and volume.

Apocryphal vision narratives like those hawked during the first Great Awakening became popular again during the American Revolution. Most were published in Boston. Writing narrowly on the genre, Robert Girouard claims that the years 1769-1791 were the “age of visions” in which people who did not necessarily find religion terribly interesting used it instead to mask political sentiments and ideas about natural phenomena.¹⁰⁰ Girouard analyzed eight vision narratives, and discovered that each of them reflected strong sentiments about America’s ties to England and, after the Revolution, evaluations of the break between the colonizers and the colonized. Instead of being a literature of revival, this new incarnation of vision narratives was a “literature of revolt.” Girouard identified sixteen traits that these eight narratives had in common – and really it was a very common story. This or that young lady or young sir would be awakened in their dreams by a spirit or patriarchal figure who would whisk them away to a mysterious vista in which the poor abductee would be prodded into a Socratic dialogue so that

¹⁰⁰ Robert Girouard, “A Survey of Apocryphal Visions in Late Eighteenth-Century America,” *Transactions of the Colonial Society of Massachusetts: Sibley’s Heir: A Volume in Memory of Clifford Kenyon Shipton* (Boston: The Colonial Society of Massachusetts, 1982): 191-219, 191.

they might have some of their questions answered. The dialogue would reveal the dreamer's discontent with their current political situation, with distinctive favor being given to patriots as the chosen people. Bible quotes are tossed about while the prose obfuscates (either on purpose or by way of illiteracy) and the narrator maintains the passive stance of the reporter. Quite practically, the vision narratives remained anonymous, but were written in New England, with the occasional manipulation of dates for the purpose of credibility. Importantly, the vision narratives end with the firm statement by the narrator, that they woke up and it was all a dream.¹⁰¹

The most thorough account of trance, vision, and dream narratives in the early republic period covers a wide range of literature: approximately thirty-six sources.¹⁰² Trance narratives are not just artifacts of enthusiasm, but also an integrated reflection on society in a time of great uncertainty about life, death, and personhood. The narratives were printed cheaply and disseminated widely. The price was negligible, landing somewhere in the six pence range. By the 1780s two types of visionary literature were in circulation: the aforementioned politically charged everyman's Apocrypha and revivalist testimonies about scintillating brushes with eternal damnation followed by breathless proclamations of salvation through God's grace. When confronting this bizarre genre, historians have followed the same path in single file: they unanimously agree that the "revivalist" literature published in the aftermath of the American Revolution was an attempt to reinvent the evangelical ethos of the first Great Awakening by re-establishing a credible connection to the supernatural.¹⁰³

¹⁰¹ Girouard, "A Survey," 193-195.

¹⁰² These 36 vision narratives are listed and annotated in Girouard.

¹⁰³ Ann Kirschner, "'Tending to Edify, Astonish, and Instruct': Published Narratives of Spiritual Dreams and Visions in the Early Republic," *Early American Studies: An Interdisciplinary Journal* 1, no. 1, (Spring 2003): 198-229. Kirschner's article is the most comprehensive and complete analysis of so called revivalists literature that I

While the experience of falling down as though dead into a trance had deep ties to the epistemology of enthusiasm, there is a dimension to trance narratives that suggests that trances in the early republic period were presented as religiously motivated manipulations of the soul through the body, but were in fact considered by many to be an ambiguous, if not secular phenomena. Stories about trances transporting the tenaciously living to the afterlife reflected a pervasive scientific and medical understanding of the body and a truly worrisome inability on the part of all people, to correctly determine the death of an individual. The secularization of the trance – by the humane societies especially – signaled a break between the long standing Calvinist belief in predestination that had distinguished the evangelicalism of both the first and second Great Awakening, suggesting that each person would confront their God on their own terms, and that it was no one’s fate to die at a given time. Rather, it became the prerogative of the new American citizen to bring people back to life from this particular state of suspended animation (among the many others). Trance narratives were evidence that the individual’s being could indeed be retrieved from hereafter.

The Enlightenment had provided new ways of thinking about the mind and the physiology of the body. Trances, though overwhelmingly religious in context, were becoming a subset of the broader bodily phenomenon of suspended animation, or “apparent death,” in which the victim’s vital signs were indeterminate but hope for restoration of life was justified. The relationship between “trances” and “suspended animation” is somewhat blurry in historical literature. Lloyd G. Stevenson, one of the few historians to have tackled the riddle of what exactly was meant by “suspended animation” came to the conclusion that it was a “convenient,

have been able to find. While she has examined the same sources, save one or two, that I am using in this analysis, her thesis is markedly different, falling into the traditional framework that this literature was meant to recruit new evangelical Christians by calling upon a lapsed literary tradition from the legendary years of the Great Awakening.

all-inclusive label” that was “used again and again as a sort of general-delivery tag.”¹⁰⁴

Stevenson went to the 1880 edition of the *Index Catalogue*, a compendium of medical literature, to trace every term to that date which fell under the heading suspended animation. Noting “eight cross references,” the Index listed “apnoea, asphyxia, drowning and artificial respiration” as well as “syncope, trance, catalepsy, and apparent death.”¹⁰⁵ Europe in 1880 had transitioned, like the United States, to more rigorous classificatory frameworks. This did not mean that states of suspended animation were undistinguished from one another prior to the advances in late-nineteenth century medicine.

In an advertisement by the humane society published in *Claypoole’s Daily Advertiser* in Philadelphia in 1791, the types of suspended animation leading to apparent death were clearly listed as a prologue for cautions and directions in restoring life. The advertisement targeted a newspaper literate audience – meaning a wide audience who would read, hear, or communicate the daily news in life’s everyday locales. The humane society intended to encourage a popular understanding of resuscitation techniques to maximize the number of lives saved from unnecessary destruction in communities throughout the country. Unlike the European Index from a century later, the instructions, simply titled, “Premature Deaths” listed bodily states that ordinary people would have been familiar with. The instructions “for preserving Human Life from and under various cases of sudden Danger and Seeming Death” were sobering. Included among the causes of “seeming death” were “Convulsions, Drowning, Strangling, Trance,

¹⁰⁴ Lloyd G. Stevenson, “Suspended Animation and the History of Anesthesia” in *Bulletin of the History of Medicine* 49 (1975): 482-511, 490.

¹⁰⁵ Stevenson, “Suspended Animation,” 489. The *Index* is a translation from W.G. Ploucquet, *Initia bibliothecae medico-practicae et chirurgicae*, 8 vols. (Tubingae, 1793-97) Vol. 5. The 1880 version is an English translation. The American iteration of states of suspended animation was nearly identical, but during the early republic period, was articulated in a very different form. The states were communicated not as an index, but as a kind of quasi-medical fact.

Suffocation, Bruises, Swoon, Stupefaction, Frost, Intoxication, Starving, Poison, Fits, Weakness, Bleeding, Still-Birth, or the Stroke of Lightning”¹⁰⁶

Life – and seeming death – for Americans in the 1790s must have been extremely bitter and fraught with peril. Violence, accidents, freezing to death, drunkenness, hunger, ignorance of chemical reactions and food preservation, unsuccessful pregnancies, and wanton natural elements threatened the body at every turn. “Catalepsy” might have meant little to a drunk laborer, stumbling through a deep chilled night, thinking only of quelling gnawing hunger and tending to the inevitable bruises and bloodshed resulting from night walking and pub dwelling. “Stupefaction” on the other hand may have been par for the course for some. The fact that trance is included on this list of life’s disappointments is critical, as it suggests that there was a non-evangelical population who both believed in and attempted to make interventions in trance states. The humane societies (they emerged in New York, New Hampshire, and Pennsylvania) were populated by ministers and preached theologically derived morals as a means to avoid unfortunate mishaps such as trances. In practice however, resuscitation was carried out through pragmatic, tool-based techniques taught by the humane societies. Towns, for example, would purchase electro-static generators to assist in shocking a victim of apparent death. Bellows were used to reinvigorate the lungs with air, and the use of fumigators (tobacco enemas) was not unheard of, though controversial (due to the debate over the medical usefulness of tobacco).¹⁰⁷

Generally speaking, trances were recorded by those who claimed to have survived them as being causeless, or dealt out from a higher realm – not as effects of the myriad of dangers that threatened humans seeking out their daily bread. Occasionally, as with William Tennent,

¹⁰⁶ “Premature Deaths,” *The Mail; or Claypoole’s Daily Advertiser* (Philadelphia, PA), October 3, 1791, 2.

¹⁰⁷ See Howe, *The Humane Society of the Commonwealth of Massachusetts*; Bell, *We Shall Be No More*, 81-96.

Thomas Say, and Jane Cish a young woman who lived in Knockan, Ireland in the late-eighteenth century (and whose narrative was reprinted in the United States), sickness would fell the entranced narrator, but often the authors of the pamphlets saw people stricken while in perfect health, in safe places, such as their living rooms.

Jane Cish, for example, described her descent into trance as a demonically induced illness. After she endured “many conflicts in [her] mind, and many sharp buffetings from Satan” her health was impaired. She stated, “I was not able to work or take any necessary food. I soon grew pale and wan, weak and languid, and could hardly refrain keeping my bed.” After suffering from the buffetings of Satan for some months, she found herself “seized with a kind of easy, sleepy, fainting fit.”¹⁰⁸ A man in Sharon, Connecticut “felt a most surprising operation upon his corporeal system. He fell; and to appearance his animal functions ceased to operate.”¹⁰⁹ Sarah Alley of Beekman Town, New York “was in perfect health and lived in the family of a near neighbor to her father, to whose house she had gone of an errand, and while there fell apparently into a swoon.”¹¹⁰ Another account, reprinted by James Kiteley of York County, Pennsylvania, tells the story of Henry Webb, from Crewham, England, whose trance occurred very much in a scenario such as those presented by the humane societies. Webb’s trance evidently occurred in 1749, but his narrative was not published in the United States until 1788, suggesting that the evangelical trance narratives were indeed being reinterpreted in a new era. Having been “seized

¹⁰⁸ Jane Cish, *The vision and wonderful experience of Jane Cish, shewing how she was converted, and how she fell into a trance on the third of May 1780. And saw heaven and hell, with many other strange things. Being a copy from her own mouth, and published at the request of several of her friends* (Philadelphia: [s.n.], 1793), 5.

¹⁰⁹ Anonymous, *A true narrative of a most stupendous trance and vision, which happened at Sharon, in Connecticut, in January 1789. Written by an impartial hand* (Connecticut: [s.n.], 1793), unnumbered page.

¹¹⁰ Sarah Alley, *An account of a trance or vision of Sarah Alley, of Beekman Town, Dutchess County, state of New-York, which happened on first-day evening, the twenty-fifth of second month 1798, taken from her own mouth, the twenty-seventh of the same month, in the hearing of divers persons.* (Poughkeepsie: Nicholas Power, 1798), front matter.

with an oppression of the spirits,” as his story goes, Webb bled himself, “after which he walked out half a mile, drank half a pint of warm ale at a public house, and then returned home, and sat by the fire ‘till four or five o’clock in the evening, still growing worse, he then went to bed, in which he had not been long before he seemed to himself to be dying away.”¹¹¹

The kinds of dangers that the humane society warned against were glaringly practical – one might even say: idiot proof. They did not discourage people from visiting their neighbors, conversing with their families, or administering bleeding to alleviate illness, but rather gave an order to “Moderate your Passions.” To avoid seeming death, people were urged to “discontinue all drunkenness, discourage all fighting, except in a needful defence of your country,” seek help from friends when feeling suicidal, be careful near water, put lids on wells, fill up holes in “bathing places,” “watch gravel pits,” “place no drunken man on horseback,” hide poisons, “lay loaded guns in safe places, and never imitate firing in jest, nor leave gun powder open,” stay away from trees and iron during lightning storms, “never sleep near charcoal,” and “beware of damps underground when the wick of a light quickly goes out.”¹¹² All good advice to be sure: but in most reported cases of trances, none of these hazards was the culprit. Discovering what caused the transporting trance came in a distant second compared to what the trance allowed the trance-experiencer to witness. What people found most interesting about their visits to the afterlife was not their personal audience with Jesus Christ, or the opportunity to verify the reality of angels, or even close encounters with the devil: it was their newfound ability to publish them and to be heard. The crafting of personal identity through publicizing trance narratives reflected

¹¹¹ Anonymous, *A Warning to disobedient youth: being a relation concerning a certain Henry Webb, who was three days and nights in a trance. As also an account of what he had seen while in that condition. Now published as a warning to all hardened and impenitent sinners, whether youth or others, that they may be excited speedily to turn to the Lord by unfeigned repentance, in order to find mercy and acceptance with him. [Three lines from Job]*. (Carlisle, PA: printed for James Kiteley, 1788), 4.

¹¹² “Premature Deaths.”

the concerns that new Americans had about their statehood and their responsibilities as citizens of a brand new geographical entity. Interestingly, the afterlife looked like a physical place to Americans living in the early republic. It had boundaries: it had an up and a down. It had ground, and air, and housed material things. It sounded like something too, although this was less variable. Heaven was almost always described as being overwhelmed with “inexpressibly happy” angelic beings “employed in celebrating the praise of their beneficent creator.”¹¹³

Versions of what the afterlife looked like differed amongst narrators. Some had two distinct spheres: heaven and hell. Some contained only a heavenly domain, while others were infinite landscapes that had any number of places to visit. One narrator, a man named Thomas Say, who lived in Philadelphia, and published his account in 1792, claimed that the afterlife was located in the very authentic atmosphere surrounding earth. Thomas Say wrote his story as an older man, but recounted events that had occurred when he was 17 years old and working as an apprentice to one William Robinson. A melancholy boy, Say had few good recollections of his adolescence. He called his time working for Robinson a “dispensation of darkness” and recounted the ways in which he attempted to “get rid of [his] evil thoughts and melancholy meditations.”¹¹⁴ His favored way of brooding was to lie on a bench at night so that his eyes were positioned to be “attracted by the heavenly objects which crowded” his sight. Evidently a besotted star gazer, Say likened the stars to “so many tapers newly lighted... as if at that moment they were launched forth into existence shining all their splendor and magnificence.” Losing himself in “wonder and amazement” at the night sky, which in a world without the glare of many

¹¹³ Cish, *The Vision*, 6. For an analysis of the soundscape of religious enthusiasm during the years of the early republic and the instruments, hoaxes, and performances associated with convincing people that they were hearing either angels or the voice of God, see Schmidt, *Hearing Things*, 57-77. Schmidt discusses the noise environment of evangelical revivals, as well as the specific voices that individuals falling into swoons or trances claimed to have heard.

¹¹⁴ Anonymous, *A true and wonderful account of Mr. Thomas Say, of Philadelphia, while in a trance, for upwards of seven hours: giving a strange relation of what he saw and heard during that time.* (Philadelphia: [s.n.], 1792), 3.

thousands of electric lights must truly have been magnificent, Say found himself questioning his belief in God.

“If there be no divine Being, whence came all these stars, and how produced were materials of which they are composed. Who gave them those laws and rules by which their motions and order are regulated and preserved?” he bemoaned. And so it was that Say’s “sorrows began to multiply.” As he sighed and cried and continued to ache for knowledge of whether or not there was a God, he finally stumbled upon a test of faith: if he chose to believe in God and a “future state” then he would not be hurt, but if he clung to his atheistic entertainments, and “death should find a God [his] state would then be bad indeed.” Ever the naughty boy, Say lazily left his beliefs up to God, and when he contracted “a sickness called the pleurisy” this was all he required to let his mind be swayed. The pleurisy was a torment to his “body and mind.” For nine days, Say languished, thinking only of his certain forthcoming trip directly to hell, going so far as to annoy his mother with histrionic statements of the kind that if he did not have a drink of water right this minute, he would never have water again, especially not while spending eternity in a pit of fire.

The depressed boy finally “fell into a trance, and so continued until four the next morning” on the night of his ninth day being ill. Say was a firm believer in the trance state, and went at great lengths to insist it was a real condition. Say declared that “A number of people may pretend to say, unwarrantably, that a trance is a joke, a mere notion of the brain, no more than a common dream &c. but it is certain, it is a truth, that there have been many so far absent from the body, as to scruple whether they had any communications with their bodies at that time or not.”¹¹⁵ Say summoned a list of witnesses to back his claim. His “father and mother, Susanna

¹¹⁵ *A True and Wonderful Account*, 5.

Robinson, and others” sat up watching him and “finding [he] had ceased breathing, and had no pulse... shook his body, and tried if they could discover any remains of life in [him] but found none.” This account of attempted resuscitation was shared with Say when he “returned into the body [for (he) had left the body] at which time [he] enquired why so many sat up with me, not knowing that they thought me dead.” Once Say spoke, those around knew that he had been in a trance and when asked what that was like, Say “said unto them, I thought I had been dead, and that I was going to heaven.”¹¹⁶ And heaven proved to be very interesting indeed.

At this moment in the narrative, the anonymous author, speaking as Thomas Say, began to switch between using “I” and using the prefix “my soul.” And so Say’s soul found itself without a body in a “vast plain, of the most beautiful green” as it ascended higher. On the ascent he claims to have seen “millions of new objects... which is impossible for mortal to describe.” What he did find possible to describe during this jaunt through green pastures was the earth. He “cast [his] eyes toward the earth” and saw himself dressed in white, in his “full shape.” Upon seeing his corporeal body from the realm of the stars that had so bewitched him in life, Say then saw three men whom he had known in life, all of which had actually died, allegedly while Say was in his trance. They were facing judgment: “two of them were white men, one of whom entered into rest, and the other, to my great astonishment, was cast off,” the implication being that one went to heaven and the other was sent to hell. The third man was a “negro named Cuffee, belonging to the Widow Kearney.”¹¹⁷

From his resting place in orbit, Say described the landscape of his afterlife. It was Widow Kearney’s kitchen. Not only was the geography of Say’s afterlife a woman’s kitchen but it was

¹¹⁶ *A True and Wonderful Account*, 6.

¹¹⁷ *A True and Wonderful Account*, 6-7.

also full of living and dead actors, with Say taking the vantage point of a ghost, as the “walls were no hinderance to [his] sight.” Say claims that he saw Cuffee die in “the brick kitchen” and then proceeded to watch the laying out. The unidentified persons who laid out the poor slave’s body dropped his head and it fell six inches to hit the board that his body was stretched out upon. As soon as Cuffee’s head was dropped, his soul appeared to Thomas Say in a “garment of unsullied white” which was taken by Say as a “token of his acceptance.” In an unabashed statement that could only have been interpreted as abolitionist by early republic readers, Say then stated that “through my joy it was great to see the negro on his way to happiness, yet I was not permitted to see him enter into glory.” On his way into “rest” Say heard a voice telling him to return to Earth, and came immediately into his own body. From there he recounted in detail the deaths of the men he had seen from his place in the sky, and then in the kitchen: these men had passed away while Say was in his trance. To assure his eager onlookers, Say told them that each dead man appeared “in a complete body” and were clothed.¹¹⁸

Corporeality was a major point of interest to Say and the intactness of bodies an important sign that belief in the second coming of Christ and the return of all good souls to their uncorrupted bodies was a part of Thomas Say’s world.¹¹⁹ Curiously, Say found it necessary to justify why he was not separated from his body, even though he was transported to heaven’s kitchen. Though he had seen “each of their [the dead men’s] bodies after their soul’s departure” he did not see his own body, the reason being, he supposed, that his “soul was not quite separated from [his] body, but so far as to see these things, and to hear those glorious songs of

¹¹⁸ *A True and Wonderful Account*, 7.

¹¹⁹ For a historical study on the religious and social anxieties keenly felt by those living in a changing medical context where anatomical corpses went for a premium – often to grave robbers, see: Michael Sappol, *A Traffic of Dead Bodies: Anatomy and Embodied Social Identity in Nineteenth-Century America* (Princeton: Princeton University Press, 2002). See also, the British counterpart of this story: Ruth Richardson, *Death, Dissection and the Destitute* (London: Routledge & Kegan Paul, 1987).

praise.” The sun, moon, and stars lost all meaning to Thomas Say when his soul was hanging from his body by a mere thread, but he was rewarded with “spacious plains and flowery walks, with beautiful colours” and the certain knowledge that while “some may think the dead know not each other... I say they do.”¹²⁰ The appearance of individuals who could “know each other” as unique people with names and histories in narratives of the afterlife is further evidence that individuality was becoming a key focus of trance narrative authors, who wished to distinguish themselves apart from the collective population.

Another pamphlet from 1776, *The American Wonder: Or, the Strange and Remarkable Cape-Ann Dream*, alternatively titled, *The American Wonder: Or, the New-England Vision of the Night; Being the Most Remarkable Dream That Ever Was Dreamed in America*, presents a case where trances and dreams are joined, but distinguished. This pamphlet is rather fascinating as the trance narrative itself is quite limited while the footnotes by the publisher trumpet revolutionary fervor and expound upon material goods. The purported author, Samuel Clarke of Gloucester, Massachusetts, who had been an invalid for a reported thirty years, and was too weak to lift his own hand to his head – one supposes as a symbolic disconnect between body and mind – finally succumbed to a trance. According to the preface, he was able to write his narrative only by holding a pen in his teeth. “Being tired and very much wore out, and almost overcome, by reason of a long and tedious confinement,” Clarke “threw” himself “back upon [my] bed, and fell into a Trance.”¹²¹

The afterlife was quite frightening to feeble Mr. Clarke. He found himself on a road “frequented by wicked people” and he “seemed to be in a great fright, my flesh trembled, the

¹²⁰ *A True and Wonderful Account*, 8.

¹²¹ Samuel Clarke, *The American Wonder: Or, the Strange and Remarkable Cape-Ann Dream*. (Salem: E. Russell, 1776), 13.

hair of my head stood upright.”¹²² He was soon reassured to encounter a “grave” old man who forecast the “midnight darkness” that was “spreading itself over the face of the whole earth,” with a special trajectory for New England. Inexplicably, this warning of doom made Mr. Clarke think of his “dying hour, for which my loins were filled with pain.” “Pangs” took ahold of him “as the pangs of a woman that travaileth.” Those pangs of birth brought Clarke to his knees. His conversation with the old man circumnavigated the godlessness of New-Englanders and resulted in Clarke pronouncing an exhortation for the punished people of New England to repent and bring God back to them and give them their freedom.¹²³ Confusingly enough the narrative ends with Clarke waking up and stating: “it was a dream.”¹²⁴

This concurrence of trance with dreams and visions indicates that while trances were firmly localized in the body, the mind was still capable of dreaming or envisioning, alongside perceived actual transports of the soul. Clarke’s pregnant death throes might be explained by the actual purpose of the pamphlet, which serves as a recruitment of “rags and linnens” to provide the makings of paper for New England’s eight paper mills at the time. The publisher, E. Russell, a fervent patriot, made sure to “return his sincere thanks to these public spirited and patriotic Ladies in this and the neighboring Towns.” The desperate need for papermaking cloth reveals the critical role women had in actually generating the material object that was a trance narrative. The publisher hoped to “stimulate all the Ladies on this vast and free Continent of America (for their kind industry and economy will be greatly owing the promotion of this branch among ourselves) to use their utmost endeavors to encourage this manufacture; and that every Female may be inspired with patriotism and the love of their country.” Women were the source much of the

¹²² Clarke, *The American Wonder*, 13.

¹²³ Clarke, *The American Wonder*, 14-21.

¹²⁴ Clarke, *The American Wonder*, 21.

paper during the Revolutionary years, and the inscrutable simulation of pregnancy in Samuel Clarke, the trance-invalid, was perhaps the publisher's attempt to give credit to the ladies who gave birth to free press from their domain of rags, and would mother the first generation of new citizens of the American Republic, just as God ordained.¹²⁵

Sarah Alley's after-world was inevitably a different one. She was a woman and her ability to speak her experiences and to exhort was limited. She was not, at least by the standards of the written traces left behind, an abolitionist in life or the great beyond, but the sweet tempered "daughter of Peter Alley of Beekman town, Dutchess County, and state of New-York."¹²⁶ Not even the master of her own pen, twenty-year-old Sarah Alley had the relation of her late 1790s trance "taken from her own mouth." Towards the end of the eighteenth century and into the early-nineteenth century there was a rise in the number of female preachers who found themselves called by God to exhort in public. Most, if not all, met with varying levels of resistance. Trance was a way for women to speak or exhort while dismissing their womanly bodies.

Susan Juster and Ellen Hartigan-O'Connor's argument that being in a visionary trance was a passive state that required negation of the self to allow the body to become a vessel for God supports the notion that women were taking this passive bodily position as a way to be heard. They write that, "preaching in trance was a favorite recourse of the disenfranchised in

¹²⁵ Clarke, *The American Wonder*, 3-4. Susan Stabile, *Memory's Daughters: The Material Culture of Remembrance in Eighteenth-Century America* (Ithaca, NY: Cornell UP, 2004), 97-98. Stabile makes a good analysis of the material meaning composition and emotional meaning paper held for women in the eighteenth century. It was the basis for their letters, as well as their individual and collective memories. For key histories on the way that the American Revolution contributed to social changes in women's labor roles, as well as the development of female citizenship during Independence and the early republic years, see Rosemaire Zagari, *Revolutionary Backlash: Women and Politics in the Early American Republic* (Philadelphia: University of Pennsylvania Press, 2007), and Linda K. Kerber, *Women of the Republic: Intellect & Ideology in Revolutionary America* (Chapel Hill: UNC Press, 1980).

¹²⁶ Alley, *Account of a Trance*, unnumbered page.

Anglo-American religious history.”¹²⁷ Juster and Hartigan-O’Connor’s take on trance preaching was that by 1806, it had become a “cultural curiosity – promoted by an enterprising religious press and dissected by a skeptical medical community.” Calling the pamphlets relating trance visions “formulaic and melodramatic,” Juster and Hartigan-O’Connor admit that they also provide an avenue into “unorthodox spiritual experiences that more respectable members of the religious establishment wished to deny.”¹²⁸ While I agree that trance narratives were a means for the disenfranchised to participate in evangelical public culture, I think that they supersede the category of cultural curiosity and provide insights into the foundations of the body-mind problem that would come to figure in the American Enlightenment through somnambulism.

Sarah Alley’s voice was itself mediated by the male dominated press and it is unlikely we will ever definitively know if she was responsible for the content of the narrative, or if the words were taken literally from her fictional mouth. As with almost every trance narrative published in pamphlet form the Author/Editor figure complained about Sarah’s narrative, being of much interest, having already been copied erroneously over and over again. The best way to “prevent such errors,” according to the editor of Alley’s narrative, was to “commit it to the press.”¹²⁹ Not nearly as introspective as the gloomy Thomas Say, Sarah supposed that after falling into a trance that she “left the body” and immediately entered the custody of her angelic guide. The angel guide, a stern evangelist, it seems, took Alley directly to “the borders of that lake and pit where

¹²⁷ Susan Juster and Ellen Hartigan-O’Connor, “The ‘Angel Delusion’ of 1806-1811: Frustration and Fantasy in Northern New England,” *Journal of the Early Republic* 22, no. 3 (Autumn, 2002): 375-404, 393.

¹²⁸ Juster and Hartigan-O’Connor, “Angel Delusion,” 394.

¹²⁹ Alley, *Account of a Trance*, iv; Kirschner, “Tending to Edify,” 206, also notes that one of the most interesting consistencies among the narratives “is their desire to prove their authenticity.” She observed that narrators and publishers unfailingly went to lengths to prove the credibility and accuracy of their reports in order to add substance to claims that visions, dreams, and trances were “tangible spiritual experiences.”

there is continual weeping and lamentation.”¹³⁰ In an act that would have horrified the humane society, she “went so near the side and borders of it, that it seemed as if [she] should have fallen therein.” Luckily her ghostly guide was present to yank her back from damnation. Down in the hole, she witnessed stacks of people, “sitting one above another” in the usual “unutterable misery” that accompanies one’s time in hell. In the space of this dangerous orifice, Sarah ran into “the enemy and adversary of man’s happiness.”

She observed him much as one would watch a zoo animal, mouth agape and eyes agog, as he made “furiously toward her” to claim her for his hoard, but, he was stopped by his chain that bound him to the lake of fire. All of this routinely biblical action occurred along the “banks of this horrid pit” that had “many people... going into it with the greatest rapidity, and as it were the fire flaming out of their mouths and eyes.” Then, like Thomas Say, Alley saw a man she knew hurtling towards an eternity of sooty pain, and he asked her to warn his friends and family to “do better than he had done, otherwise it would be too late for them to escape following after him.”¹³¹ Alley was whisked quickly to take a look at Christ and the anonymous angels and people swarming around him, and was then “conducted back to her body.”¹³²

Alley was awake long enough to tell her family what she witnessed and then fell back into a trance for another three hours. She was once again taken to the place where Christ was, a “place of rest and happiness” where she saw people she knew, while God sat above them. Christ was sitting at the entrance to the place that Alley so desired to enter, but was told by both her angelic guide and the son of her God that she was to walk the “strait and narrow path” in her life

¹³⁰ Alley, *Account of a Trance*, unnumbered page.

¹³¹ Alley, *Account of a Trance*, 6-7.

¹³² Alley, *Account of a Trance*, 7.

and continue to do so. As she had in hell, Alley saw a person she knew who asked her to “warn his friends and relations to change their way of walking, and to walk in the strait and narrow road.” Armed with names, a very clear path to walk along, and a message to be pious and good, she was returned to her body without further incident.

Henry Webb, whose narrative was reprinted in the United States after enjoying some readership in England, met a bad near end after bleeding himself. He was found with his arm burst, “bleeding a quantity of two quarts, and him to all appearance dead.” His eyes and teeth were described as “set and not the least breath perceivable.” His landlords tried to resuscitate him “to no purpose” and “resolved to lay him out in order to be buried.” His body remained warm, which gave some pause and he was left in bed until his body became cold (which did not happen). Like Tennent, his watchers “tried to open his teeth with a spoon to pour down some cordial” as he lay in a trance for three days and nights. While the living tried valiantly to revive him, “he was dying away” and “seemed to go into fields inexpressibly delightful and pleasant, beautified with streams and fountains of water clear as crystal.” Heaven was before him.¹³³

Webb, like many before him, made it to the Gate of Heaven, knocked emphatically, saw glory, and was denied entrance. It was no place “for such sinners as he was.” After begging for some time to be let into heaven, a disdainful angel pointed at Hell which frightened Webb terribly. It was dark, lonely, and dismal, lacking even a flame, and it smelled bad.¹³⁴ Even though the “Prince of Darkness” came at him “raging as a ravenous lion” nothing terrified him more than seeing the “faces of three of his old wicked companions.” Webb stared at the hellish panorama “for several hours” entering into a kind of trance within a trance before begging to be

¹³³ *A Warning to Disobedient Youth*, 4-5.

¹³⁴ *A Warning to Disobedient Youth*, 5.

allowed to repent for his sins. He was ultimately awarded a “few months” to change his ways but had to walk “two or three miles” through the afterlife, while being rebuked “all the way for his sinful life.”¹³⁵ He was said to have traveled in his fashion “through places dark, terrible and desolate” before returning to life to become “a much reformed... solid, tender spirited man.”¹³⁶

Though classifiable as religious trance narratives, these were not the only tales of trances circulating in the early republic that described the landscape and general environment of the afterlife. Satirical visions of the afterlife also proved to be popular and the critique made via descriptions of landscapes, especially, shows how tenaciously connected people were to their physical world, and how attached they were to their living bodies. Ann Kirschner drily points out that the visionary narratives published during the second Great Awakening were the work of an “indifferent group of visionaries” who did not seem to care how their experience altered their religious status. Instead, narratives of this sort were proof of a “democratic spirit of evangelical religion” that handed power over to ordinary people.¹³⁷ A toleration of the veracity of trance narratives was not without bounds. Narratives “adhered to the new rules governing public discourse” and thus were expected to teach a lesson worth learning, with less emphasis on the individual’s experience and more on the ecumenical applicability of the moral content.¹³⁸ While satirical accounts of trances and visions may have indicated a certain disdain for the delusional, they revealed, in equal parcel, a comprehensive idea of what the world after this one would look like, even if it was through derogatory reconfigurations of previously published texts.

Through these biting parodies, one finds that landscapes could say much about early republic

¹³⁵ *A Warning to Disobedient Youth*, 6.

¹³⁶ *A Warning to Disobedient Youth*, 7.

¹³⁷ Kirschner, “Tending to Edify,” 215.

¹³⁸ Kirschner, “Tending to Edify,” 223.

hopes for the future of the body. Maintaining control of one's physical form in the afterlife was both a response to the lack of control inherent to trance states, gender, and unstable citizenship. The presence of completely abled bodies in these trance narratives suggests that resurrection beliefs remained robust into the early-nineteenth century.

There are two pieces in particular that embrace the vision of the afterlife as a point for humor. The first is a work published under the name of *Mr. Heman Harris's Dream, or Transe: During which time, was discovered to him a view of The two Invisible Worlds, and the situation of the Happy and Miserable in Heaven and Hell* (1801).¹³⁹ Heman Harris, having no degree of sympathy for the apparently dead, started his narrative with a summative statement: "I had been in a great measure confined to my chamber, by an indisposition and decay of the body: when, one day having spent more time and zeal in conversation with one of my friends, on the different modes of existence in the invisible world, than were consistent with my strength." The frail Mr. Harris required a nap soon after, and as he "extended [his] limbs on the bed" he fell into a deep sleep. Such was the methodology of recounting a trance.¹⁴⁰ Harris referred to his period of falling into a trance as characterized by his remarkable stupidity, apathy, and imperfection. After finally slipping away the first thing he was able to remember with any acuity was "the last struggle with the body," which "was the transition of the soul, now emerging into a boundless immensity, without regarding, or having the least conception of my now useless corpse."¹⁴¹ Though Harris's tone is provoking, he makes a comment that gives one pause. After intermingling with the Deity in some murkily defined place "independent of matter" Harris discovered that "in this form of

¹³⁹ Heman Harris, *Mr. Heman Harris's Dream, or Transe: During which time, was discovered to him a view of the two Invisible Worlds, and the situation of the Happy and Miserable in Heaven and Hell* (Dedham MA [s.n.], 1801).

¹⁴⁰ Harris, *Mr. Heman Harris's Dream*, unnumbered page.

¹⁴¹ Harris, *Mr. Heman Harris's Dream*, 5.

existence I found myself, the moment I became independent of flesh and blood.” What could it have meant for someone to find themselves in 1801? Greven’s exploration of the Protestant practice of self-denial offers an interpretive explanation for Harris’ satirical angle. Greven writes: “throughout their lifetimes, evangelicals were engaged in a constant battle not only against the flesh but even more encompassing, against everything within themselves that gave them a sense of self and self worth. Self-denial meant nothing less than the denial of the *self*. Ideally evangelicals had no self, for the self was the agent of sin, and the source of discontent.” Evangelicalism involved a battle against the flesh, but also against the innermost self which was rife with corruption, dooming the soul to damnation. Though Greven limits his argument to the early evangelicals, Harris’s satire is strongly suggestive that the culture of literal self-denial was thriving under the guise of new republic virtues and temperance. Historical examples of literal self-denial such as this one give us insight into how people viewed medical materialism, which suggested the soul and body could be conflated. It also suggests the self could be denied through an imposition of medical interpretation of a body lacking a present self.¹⁴²

The ironic inversion of having a “useless corpse” and not being able to extract any kind of identity from it sets the clever reader up to read this statement as a purely materialist one: the identity of the self is tremendously findable in the body, while the soul gives no recourse to fleshing out one’s knowledge of their being. Matter over mind was a cause Harris found worthy of his advocacy – so much so that he was “utterly unable to describe my astonishment, on finding myself filled with the exercise of those thinking faculties, of which I had before been mostly ignorant.”¹⁴³ The satirical dig at the preference for the material body, whether or not a

¹⁴² Greven, *The Protestant Temperament*, 74.

¹⁴³ Harris, *Mr. Heman Harris’s Dream*, 5.

mind was evident, reveals the extent to which the unconscious mind was a topic of public consideration by the beginning of the nineteenth century.

Harris found the idea of the afterlife being a place literally laughable. For him it was a series of abstractions as he was “here hurrying from one situation to another” thinking he had found “Heaven and Hell!” but was dismayed when they “were promiscuously blended together throughout the universe” until he discovered that this “was an error, still attendant on sin.” Harris was pulled up to heaven before “an agency then, as powerful as the one that conducted [him] hither, hurled [him] back to the brink of an equally boundless abyss of perdition and despair.”¹⁴⁴ Leaving the description of Hell as a hollow caricature of the detailed descriptions found in other narratives, he explained how all beings in the afterlife could co-mingle almost telepathically: “instead of those external organs which we find necessary in the corporeal world, we discovered a mutual knowledge of each others thoughts, and a continual interchange of ideas.”¹⁴⁵

Interestingly, this was Harris’s personal version of hell: a hell where he hated the “Deity” and in which his “whole soul” was filled with “indignation and infernal fury” at the “idea of the Saviour of mankind.”¹⁴⁶ Harris had nothing but disdain for those who claimed the afterlife was a topographical place with environmental sensory features, claiming that we could only know what was tangible around us in the corporeal body and that each individual was merely and consummately that: an individual. While he had no explicit comments on the unconscious mind or an absence of will, it is clear that Harris also believed the mind was material and if this was

¹⁴⁴ Harris, *Mr. Heman Harris's Dream*, 6.

¹⁴⁵ Harris, *Mr. Heman Harris's Dream*, 7.

¹⁴⁶ Harris, *Mr. Heman Harris's Dream*, 7-8.

so, then new explanations were needed to account for its whereabouts when the body was suspended.

The second narrative, *A true narrative of a most stupendous trance and vision, which happened at Sharon, in Connecticut, in January, 1789* (1793) was more crude in its satirical properties, its critique less subversive of religion and tending more towards parody. The anonymous author prefaced the work by cheerfully stating that, “stories of witchcraft, fairies, hobgoblins, revelations, visions and trances always excite the attention of the superstitious, gain belief and afford them unspeakable pleasure.” These stories were to be of “eminent service, to restrain the vicious inclinations of the ignorant and the credulous.” The ignorant and the credulous were the population of eager readers and listeners who would enjoy “a true account of a most remarkable trance and vision” – one that was perhaps the most “remarkable instance of the kind” that ever took place “in this country.”¹⁴⁷ The subject of this parodist trance narrative endured the same frantic efforts at resuscitation as the other, more serious authors of trances. The religious man at hand, having gone into a trance, was described as having his eyes closed, with “not the least respiration or breathing” perceived. Even though experiments were made to “rekindle the spark of life... his soul had taken a long journey. It had entered into the world of spirits, was so employed in making the most important and wonderful discoveries, that he was insensible of the strong drops, which were applied to his nose, and to every other method which his friends took to excite animation.”¹⁴⁸ For three days and nights, “his body retained its animal heat, and his joints were limber.” These “extraordinary effects must be ascribed to the supernatural operation of divine power.” Very brusquely, the author of the narrative insisted that

¹⁴⁷ Anonymous, *A true narrative of a most stupendous trance and vision, which happened at Sharon, in Connecticut, in January, 1789. Written by an impartial hand* (Connecticut: [s.n.], 1793), unnumbered page.

¹⁴⁸ *A true narrative*. 4.

after the soul had “accomplished its stupendous tour, and returned to his body.... it entered and assumed its usual seat in the sensorium, which is situated in some part of the head.”¹⁴⁹ Again, the idea that the mind was material, somatic organ arises in the author’s parody of trance narratives where the body allowed the soul to depart without much consequence to itself.

As the anonymous author clipped along in describing this astonishing journey, he mentioned several notable features. The zealous man who had been entranced had ascended in “a perpendicular direction thro’ the aerial regions towards the celestial Canaan.” As he was floating upwards, he was able to see “various states and kingdoms of the earth, and was very particular in his enquiries to find out their names, properties and appendages” from his accosting angel guide. A man of particular “mental opticks,” the trance-goer “satisfied his curiosity” in viewing the earth and then passed the moon to enter into the “vicinity of the sun and stars” where the angel “augmented his small stock of astronomical knowledge.” Continuing to “rise with the most rapid velocity” above the “highest star” the angel and his ward were able to enter the “city of new Jerusalem; which appeared very spacious, magnificent and bright.”¹⁵⁰ The man was able to tour “the city, its walls, streets, and mansions.”¹⁵¹ He then enjoyed the answers to all his questions, before being told he had to return to “his poor fleshly tabernacle” (also described as the “mansion” of the soul).¹⁵² Without further ado, he was taken on the stereotypical tour of hell and tossed back into his body.

¹⁴⁹ *A true narrative*, 5.

¹⁵⁰ *A true narrative*, 6.

¹⁵¹ *A true narrative*, 7.

¹⁵² *A true narrative*, 5, 8. The corporeal body in this tract makes oblique references back to Puritanical associations of the body with architectural structures – a vocabulary that would have fallen out of fashion by the early-nineteenth century. The “mansion of the soul” remained a part of common vernacular, however.

As this experience was so very remarkable it was determined that the trance-pilgrim should give a “publick lecture” on his journey. In the satire, he was questioned by the local “reverend minister of the parish” and testified before “a large assembly of people” who had collected, principally with a design to hear the particulars and ascertain the truth of the wondrous trance.”¹⁵³ The narrative then launches into a dialogue in which the reverend interrogates the “aerial traveller” on questions of the geography of Europe, which he gets wrong. He is then asked questions about “various parts of the earth, and concerning the sun, moon, and stars.” The man, now referred to as “the aerial traveller” relates the information given to him by the angelic guide, all of which proves to be ridiculous and utterly wrong. Designated as having very “deficient and erroneous knowledge” of the earth, astronomy, geography, and hymns – for he recited a hymn with a “great deal of ostentatious gravity and whining pomposity” that was deemed “ abominably incorrect, flat and insipid” – the aerial traveller was publicly mortified. He exiled himself from his village, while teaching the lesson that “modern accounts of witchcraft, revelations, visions, trances and apparitions may be swallowed down easily by the ignorant and superstitious: but such accounts, the wise and sensible will not be very profuse in yielding their faith.”¹⁵⁴

As printed tabernacles housing different Christian doctrines, all of these trance narratives demonstrated a longstanding social problem: sorting out superstition from wisdom while remaining faithful to one’s God or country, depending on the writer. The geopolitical disjointedness caused by the colonies’ withdrawal from the British empire gave the intellectual and moral leaders of the Revolution and the early republic a frank reason to dredge up the newly

¹⁵³ *A true narrative*, 8.

¹⁵⁴ *A true narrative*, 9-12.

formed country's Puritan history and fit it into the framework of republican virtue. The citizen of the republic could be likened to the Puritans, resisting an attack on what would become one of the nation's most precious civil liberties: freedom of religion. The largest problem facing Americans in the wake of independence was integrating an idealized nationalism with the material reality many new citizen bodies that needed to operate morally, precisely, and collectively. People knew their local allegiances, but after a spate of New England centered publications on American geography by aggressive politicians such as Jedidiah Morse in the 1780s and 1790s, they did not necessarily know where, geographically, they lay any longer.¹⁵⁵ This dislocation impacted how citizens crafted their identities both as mind-body mansions, and as individuals with a civic voice.

The authors of trance narratives in the early republic were fixated on their bodies' locations in this world and the next. This fixation points to fascination with the unconscious mind that did not exist in the trance narratives from the first Great Awakening. Separating the mind from the body no longer made sense. There are few things more disorienting than bilocation: the leaving of one's body for a trip to another world while identifying familiar landmarks in the world left behind. What metaphor could be more fitting, or more accusatory (towards England), than one in which the individual is torn asunder from their corporeal home and left to map out the new world they find themselves? Trance narratives filled this function – one might say quite deliberately. The narratives fell many miles short of claiming to be an alternate form of mapping, but the prevalence of landscape in descriptions of the afterlife, and the fixation on the body as an convulsing, broke-down mansion for the soul do make a

¹⁵⁵ For an argument that New England led the geographic re-imagining of the United States national identity in the late-eighteenth century, see Joseph A. Conforti, *Imagining New England: Explorations of Regional Identity from the Pilgrims to the Mid-Twentieth Century*. (Chapel Hill: UNC Press, 2001), 79-123. Robert Blair St. George, *Conversing By Signs: Poetics of Implication in Colonial New England Culture* (Chapel Hill: UNC Press, 1998) makes an argument for the symbolic meaning behind Puritan architecture and environmental shaping.

geographical assertion that is deeply, and quite literally tied to republican ideas about virtue and Protestant notions of self-denial and living a good life.

This geographical assertion is only partially articulated. It is like a skeleton, missing half of its bones. How Americans viewed their bodies changed over a century and a half: the transition itself was gradual and by the turn of the nineteenth century, incomplete. Initially, the architecture of houses was designed not only to reflect, but also to be Puritan religious landscapes. They were painstakingly designed to imitate the Kingdom of Heaven, but also to represent, by the layout of their rooms, the human body that was the temple of the soul.¹⁵⁶ The period of the Great Awakening saw American body-temples convulse, rupture, shake, decay, and begin to revive. The transition from imperial dependence to nationhood saw a renewed emphasis placed on property and land ownership as a way to assert one's right to corporeally exist, embedded in an environment that reflected political hierarchies. Portraiture and landscape paintings in the post-revolutionary period express a longing for ordering geography, with paintings and images acting as stand-ins for traditional geographic maps. Portrait artists in New England – with Connecticut being a particular focal point – began to draw disjointed figures with disproportionate features and bodies rendered slightly askance.¹⁵⁷ This style of portraiture might be linked to the spread of resuscitation techniques and the foreboding societal sense that the outer body and the inner self were merging, thus making death a much more inhospitable prospect. This would make a fascinating topic for another discussion, but is beyond the scope of this work. The ways in which Americans related their physiognomy to self, their bodies to the landscape, and their houses to the geography around them all support the change in how people

¹⁵⁶ See St. George, *Conversing by Signs*, 16-113. Chapter 1 deals with examples of Puritan architecture and the layout of the house both in Europe and in the American colonies while St. George goes into great pains to link his argument for multiple embodiments to material artifacts that can be physically traced.

¹⁵⁷ St. George, *Conversing By Signs*, 364-376.

understood the mind. If the self was locked to the mind, itself a somatic organ, superimposed on the brain, then the body was a object of utmost importance: the relationships it formed with geographies both in current life and the afterlife were much higher-stakes than ever before.

During the same period that trance narratives began to circulate, geographic print materials filled a hole in the literary marketplace. Textbooks, maps, atlases and folio geographies were sought after as integral components of the extension of one's mind into material possessions – namely books. Narratives of expeditions and surveying missions experienced resurgence in popularity, but were presented as authoritative and federally backed narratives. This was a far cry from the fanciful travel narratives of the seventeenth and eighteenth centuries. Martin Bruckner has recently presented a case for the far-reaching allure of geography in the early republic mindset. His argument is a compelling one that can be applied quite readily to trance narratives in order to allow us to reinterpret them with a bias on how Americans viewed their relationship to their bodies, and the relationship of their bodies to their land. Bruckner makes three crucial points. Geography not only infiltrated but also changed the form and content of early republic literary publications. Landscape was turned into a “foundational topos through which authors imagined a variety of American selves.”¹⁵⁸ The enormousness of the environment came to overwhelm the individual author in their writing, leading to a transformation of self-hood through references to geography.

These three observations, drawn from an impressive survey of both novels and didactic publications establishing geographical features in the United States can reveal much about how and why trance narratives were themselves landscapes that allowed Americans to imagine themselves both in and out of their bodies. Occurrences of apparent death allowed individuals to

¹⁵⁸ Martin Bruckner, *The Geographic Revolution in Early America: Maps, Literacy, & National Identity*, (Chapel Hill: UNC Press, 2006), 5.

combine their evangelical faith or profound patriotism with a developing knowledge of the environment to stake a claim on the afterlife. They left and then returned to their bodies with the expectation of going back, armed with a mental map of the great beyond and the power to overcome predestination and navigate themselves to salvation through moral acts of contrition carried out in life. Without fate standing in the way, one had to use a human life to the best possible end; that meant overcoming death, and testifying to it.

The ponderous experience of bilocation would become more critical as the nineteenth century advanced. Trances established that the soul did not necessarily sleep after death, but they also suggested that the soul could not be separated from the body for long. As the eighteenth century came to a close, an interest from across the sea reinforced the frayed ties between England and the now bi-located United States. The physiology of life, gaining ground in fashionable European circles, was a topic of central interest to American students of medicine and to the mission of the humane society. Trances indicated that there was a material mind that had untapped powers within the body. A rising interest in the somatic and ethereal aspects of the mind would draw attention to the phenomenon of somnambulism and further revise the body-mind question through the figure of the volition-less natural somnambulist and the first reports of double consciousness. With the influx of European trained medical practitioners, religious interpretations of the bi-located body would be challenged and the figure of the somnambulist would become the bodily location for this shift in authoritative power.

CHAPTER THREE: RACHEL BAKER, THE ORACULAR CORPSE

Marcellus, New York

“It was a stormy inclement night” in the sedate Western frontier hamlet of Marcellus, New York.¹⁵⁹ Between thirty and forty people from the neighboring villages had gathered in the home of the Baker family, bracing against the bitter March winds. Outside, a war of attrition soldiered on. It was 1814, and the British-American fight for the Canada-New York border would not end until September that year. At around 9:00 p.m., the curious visitors were summoned to the bedchamber of the Bakers’ daughter, Rachel, then approximately nineteen years of age.¹⁶⁰ One curious onlooker had come with two friends to see the “famous female somniloquist.”¹⁶¹ The young gentleman, determined to test his skepticism, had called earlier in the day to speak with the waking version of Rachel Baker. He encountered a “plump, hale country lass of nineteen, rather above the middle size.” Her face belied “vacant tranquility” and showed no sign of “mental vivacity or vigor.” Her conversation was “taciturn and diffident.” She confronted her guests with an “unsteady, wild and capricious” eye that unsettled her observer with its “sickly dilation of the pupil.”¹⁶²

Baker and her guests politely conversed about family, health, and religion. Her gentleman inquisitor, disappointed with her lack of candidness on the topic of somniloquism, sourly suggested she was not responding to his incivility, but rather indulging in a “female delicacy,”

¹⁵⁹ Charles Mais, *The Surprising Case of Rachel Baker, Who Prays and Preaches in her Sleep...* (New York: S. Marks, 1814), 32.

¹⁶⁰ Samuel Latham Mitchill, *Devotional Somnium; Or, a Collection of Prayers and Exhortations, Uttered by Miss Rachel Baker, In the City of New-York, in the winter of 1815, during her abstracted and unconscious state...* (New York: S. Marks, 1815), A2.

¹⁶¹ Mais, *The Surprising Case*, 32.

¹⁶² Mais, *The Surprising Case*, 32.

busily “secreting a deformity.”¹⁶³ By all waking accounts, this frontier marvel was an average woman destined for a typical life in a farming community on the far Western fringes of Syracuse. There was, however, the question of her so-called secret deformity: the uncanny ability to preach and exhort the words of God in her sleep. Baker’s visitors were rewarded in their experiment. Once the episode began, they were treated to the spectacle of a body enthralled with the divine. After half an hour of opening prayer, “her chest hove, she grated her teeth and caught her breath, as one does with the palpitation of the heart.” Baker groaned and sighed in “anguish” for approximately ten minutes, before her attention was directed to a church elder who had traveled a far distance to encounter the sleeping preacher.

She told him and the other “auditors” of “the shuddering terrors of eternal damnation.” Her scriptural knowledge, clear, articulated language, and general vocal animation startled the crowd and reduced the elder to a quivering figure of “tremulous meekness.” Standing over the “oracular corpse which lay before him, in deep, dead, sleep, interwove the sentiments which dropt from it, with the awful mysteries of a preternatural.”¹⁶⁴ The sighs from the women auditors, the silence of the audience, “the howling of the tempest united with the speaking corpse, as it appeared uttering its awful warnings to mortality” drove the young gentleman to contemplate his very soul and “shudder and shiver in sublimity.”¹⁶⁵ Ending her sermon, Baker appeared to convulse and shake off an invisible force. It was the “contortion of an incubus: it was the last conscious grasp of life to its fixture.” “She was as colourless as dead” and completely exhausted. Her mother explained that the droves of people, rumored to be in the three to four hundred range,

¹⁶³ Mais, *The Surprising Case*, 32.

¹⁶⁴ Mais, *The Surprising Case*, 33.

¹⁶⁵ Mais, *The Surprising Case*, 33.

that visited nightly had battered Baker with so many questions that it often took up to ten days of rest and medical vigilance to rally her back to preaching.¹⁶⁶ Undoubtedly many of her visitors sought answers to spiritual questions, as though Baker were indeed an oracular corpse, and a portal to the afterlife through which information could be transposed. Baker's self-professed authority over religious knowledge excised clerical interventions from interpretations of her condition. While clergy followed her on her tour, Baker retained interpretive authority over her own embodied knowledge. She would not fare so well with physicians, however, who used her case as a way to stake a claim over the right to use the bodies of female somnambulists to produce medical knowledge.

Baker was born in Pelham, Massachusetts on May 29th, 1794.¹⁶⁷ Her parents, Hannah and Ezekiel Baker moved to the town of Marcellus, New York in 1804. As one of ten children, Baker was fortunate to survive to adulthood.¹⁶⁸ The town of Marcellus had changed names

¹⁶⁶ Mais, *The Surprising Case*, 34.

¹⁶⁷ Joshua Victor Hopkins Clark, *Onondaga, or, Reminiscences of earlier and later times, being a series of historical sketches relative to Onondaga; with notes on the several towns in the county, and Oswega. In Two Volumes*, vol. 2 (Syracuse: Stoddard and Babcock, 1849), 296.

¹⁶⁸ Elliot G. Storke, *History of Cayuga Count, New York: with Illustrations and Biographical Sketches of Some of its Prominent Men and Pioneers* (Interlaken, NY: Heart of the Lakes, 1980), 384, 407; Eric T. Carlson and Meribeth M. Simpson, "The Strange Sleep of Rachel Baker," *The Academy Bookman*, 12, no. 2 (1968): 3-13, 3; Ansel W. Ives, "A Remarkable Case of Devotional Somnium," *Transactions of the Physical and Medical Society of New York* 1 (1817): 395-412. Storke's account of Dr. Abel Baker, Rachel Baker's brother, confirms that this account of her childhood migration is the correct one. Samuel Latham Mitchill's contemporary, Dr. Ansel Ives, wrote in 1817 that Rachel Baker was the daughter of Ezekiel and Hannah Baker. Carlson and Simpson cite Ives as their source. They write: "born in Pelham, Massachusetts of May of 1794, Baker was the eldest daughter of Ezekiel and Hannah Baker. Her parents were not financially prosperous, and Baker herself was practically uneducated, though her schooling was probably not unusually poor for her sex and circumstances." Letters from Baker's physician John H. Douglass to her father Ezekiel Baker are published in *Devotional Somnium*, supporting this parentage. Lois and Lewis Baker are either wrongly recorded names on the part of Storke, or an aunt and uncle of Baker's, making Abel Baker her cousin instead of her brother. In "A Remarkable Case of Devotional Somnium," Ives also mentioned that he had an "interview" with Baker in July 1816, as "she was journeying for her father's in the town of Norway, in the county of Herkimer, where she designed to spend some time with her friend and relation, Dr. Rowland Sears." Storke's biography of Dr. Abel Baker explains how Abel was "licensed by the Censors of the Medical Society of the county of Onondaga May 19th 1815, about which time he went into partnership with Dr. Roland Sears, of Norway, Herkhimer county, with whom he remained until September 3d, 1816." It seems very likely that Baker would have been entrusted into the care of her physician brother as a chaperone for her travels from Marcellus to Norway to visit with Roland Sears. While Ives may have been a part of Rachel Baker's circle of acquaintances, Storke's history

several times, previously being called Camillus until a dispute over the distance to the meetinghouse resulted in the formation of a new village in 1797. Prior to that, Camillus was incorporated into the town of Scipio in neighboring Cayuga County, though Marcellus fell under the domain of Onondaga County. Baker would refer to both Scipio and Marcellus as her home village.¹⁶⁹ Marcellus was virgin land, according to its historian, Joshua Victor Hopkins Clark. When the first settlers arrived on the frontier, “it was covered with a heavy burden of hard timber, with very little underbrush.” Swamped with leeks, nettles, and wild grasses, cattle would thrive. The low lands were smothered by a “gloomy hemlock forest,” which posed a serious obstacle for cultivation. The town was built on the elevations, and its settlers took pride in their claims. As Clark dubiously claimed “here were no Indian fields, no traces of ancient occupancy by a foreign people, or evidence that the soil had ever been pressed by the foot of man, except as a rude hunter in pursuit of his game.”¹⁷⁰

Both Scipio and Marcellus were settled on the western shore of Owasco Lake, with summits five hundred feet above the lake, and steep bluffs extending out into the water twenty to fifty feet for a mile along the lakeshore. The “streams [were] nothing but mere brooks and the soil is a clayey loam.”¹⁷¹ It was an unforgiving task to settle the southern shore of Lake Ontario. By 1800, as historians of Cayuga County claimed in 1908, “every road leading to Western New York was thronged with immigrants heading for the Genesee valley and the rich Military lands.”

based on county records seems more reliable. If this is to be the case, then Baker’s father “died in 1834 on the farm on which he first settled”) and her mother then moved to Wisconsin, where she passed away in 1849. Perhaps as a nod to his sister, Abel Baker, a devout Baptist, named his second child, born in Kellogsville, New York, on May 9th 1821, Erasmus Darwin, who wrote about somnambulism in his canonical 1796 work, *Zoonomia*.

¹⁶⁹ Mitchill, *Devotional Somnium*, 22. Baker moved to Scipio to live with her aunt – probably Lois Baker, in 1813, to apprentice in the “mantaumaking business.”

¹⁷⁰ Clark, *Onondaga*, 290.

¹⁷¹ *History of Cayuga County New York: Compiled From Papers in the Archives of the Cayuga County Historical Society, with Special Chapters by Local Authors from 1775 to 1908* (Auburn, New York, 1908), 432.

When the Bakers moved to Marcellus, they would have found “wet and heavy roads during the summer” and may have arrived in the winter, traveling by sleigh. It was an uninviting part of the frontier, marked by “wet lands, swamps, and stagnant pools” which “prejudiced settlers” and slowed growth for many years. Prospectors bypassed this swampy, low lying forest marked only by Indian trails from lake heads to local streams in favor of more fertile, and more malleable land. What the Bakers found in the wilderness were a handful of slaves, farmers, and merchants steadfast enough to build a community in the middle of contested territory and in the very heart of Indian country.¹⁷²

The social constitution of Marcellus likely provided Baker with a smattering of religious influences, allowing her to live as a Baptist and maintain Calvinist and Presbyterian beliefs. The settlers of Marcellus professed Congregational, Presbyterian, and Baptist beliefs, “but all agreed to worship together for a period of about twenty years.” In 1802 a meetinghouse was proposed, and the house of worship built in 1803. It was known as the “only meeting house between New Hartford and the Pacific Ocean” at the time, which may in fact have been the case.¹⁷³ Marcellus had a mill, a post office, a grocery store, an apothecary, and a tavern by the time the Baker family, along with many other settlers from Massachusetts, Connecticut, and Vermont, decided to make their fortune in the West.¹⁷⁴ The unique circumstances of Baker’s religious education as well as the assignation of her church as the last civilized meeting house before the Pacific Ocean may have infused her mind with a sense of religious inevitability that would first help establish

¹⁷² *History of Cayuga County*, 14.

¹⁷³ Clark, *Onondaga*, 291.

¹⁷⁴ Clark, *Onondaga*, 295-296. “In September 1816, Dr. Spears, [sic - probably Sears] by a course of medical treatment, particularly by the use of opium, prevented a recurrence of her nightly exercises.”

her as a speaking, preaching woman worth listening to in her own community, and then the wider world.

There are two contemporary historical narrative traditions that would house the story of Rachel Baker adequately, if not somewhat uncomfortably: preaching women, especially on the frontier, in the early nineteenth-century, and the rise of mesmerism as an explanation for inexplicable sleep states. Curiously, but as I will argue, understandably, Rachel Baker is not a character in either of these narratives, although Catherine Brekus cites her briefly to further her argument regarding how women responded to the biblical sanction that female preaching was wrong. “Rachel Baker,” she writes, “a Baptist who had been raised as a Presbyterian, preached only in her sleep. Instead of standing in the pulpit, she attracted large crowds who came to hear her ‘nocturnal performances.’” When people questioned her motives, she insisted that she had no control over her actions. Female preaching, in her words, was ‘wrong.’¹⁷⁵ This is the extent of attention Rachel Baker receives in the literature on female preachers during the early republic and early national period. But the fact that Baker was seen by her contemporaries as primarily a somnambulist, and secondarily a preacher, suggests that the popularity of her case was due to a broad public interest in states of suspended animation and bizarre sleep over the spectacle of a woman exhorting the words of God. There were conscious preaching women who drew crowds of both believers and scandalized Bible readers, but the curiosity invested in a talking almost-corpse, far surpassed that of a woman daring to speak about male matters in public.

Baker used the attention garnered by her somniloquism to speak her mind on religious matters however the force of masculine male authority over her personhood and, ultimately, her physical condition, overshadowed the power of her voice. Like Jane Rider after her, Rachel Baker would lose herself not only to a second state of consciousness – somnambulism – but to

¹⁷⁵ Brekus, *Strangers and Pilgrims*, 188.

the celebrity of the medical men who appropriated her experience in the name of curious science. In Baker's case, Samuel Latham Mitchill's interest in her would ultimately signal the loss of her position as a woman with oracular authority, especially when his work *Devotional Somnium; or, a Collection of Prayers and Exhortations, Uttered by Miss Rachel Baker, In the City of New-York, in the winter of 1815, during her Abstracted and Unconscious State* (1815) gained popular readership and adherence. Though Baker resembled the *Prodigal Daughter* in the eighteenth-century fable, laid out to preach from the sacred space of her near-death-bed, her experiences paint a picture of change for entranced women. As a somnambulist, rather than a sinful nightwalker fated to be punished with suspended animation, Baker was a new kind of prodigal daughter: rather than collapsing into her funeral shroud, only to resuscitate and recount the afterlife, she took the opportunity to speak about the *coming* glories of heaven, should her listeners obey her moral instructions. She claimed to have a similar kind of access to the afterlife as the trance-goers of the previous century (though made no claims about the way in which her body, along with her mind, could find a home there) but wielded a very different kind of authority than that of the earlier soul-travelers.

That Witchcraft, Animal Magnetism

Interest in somnambulism and sleep by materialist physicians such as Benjamin Rush and Ansel Ives had created a somatic interpretation of strange sleep that excluded supernatural explanations, but did not yield convincing physiological ones either. The limited medical interest in the science of the mind in 1780s and 1790s had provided a natural explanation for double consciousness and somnambulism, which would carry over into examinations of Rachel Baker's eerie powers. The findings of this early American philosophy of mind had another consequence: it contributed to the total exclusion of mesmerism from the United States between 1784 and

1836. Historians writing about the gradual impact that mesmeric practices had on the interpretation of consciousness are meticulous on the topic of the European experience. If the United States is discussed, the narrative is identical in every case: people dabbled in mesmerism around 1784 and then in 1836, an itinerant virtuoso arrived and put a nation under his spell. Almost fifty years is elided from this story. The pressing historical question is why? Rachel Baker was never accused of being under a mesmeric spell because mesmerism was virtually unknown to nearly all Americans until Charles Poyen brought animal magnetism and artificial somnambulism with him to the United States in 1836, triggering an interest in controlled alternate states which would ultimately result in the Spiritualist movement in the latter half of the nineteenth century. Baker's somnambulism was natural and frightening in a way artificial somnambulism (although still frightening) was not. The frequent occurrences of natural somnambulism were far more intriguing to Americans than Mesmer's healing cures.¹⁷⁶

A brief detour into the progress of mesmerism will explain the differences between natural somnambulism and artificial somnambulism, a topic that has caused some confusion. Adam Crabtree's excellent work on the historical basis of modern day psychoanalysis establishes Mesmer's legacy in early-nineteenth century Europe. Alison Winter's study of the introduction of mesmerism into British culture and the intersection of theater, social reform, and the battle for control over the patient's body – either through the now ironically *natural* artificial sleep created through mesmeric trance versus the frightening chemical sleep induced through anesthesia, is an

¹⁷⁶ Delbourgo, *A Most Amazing Scene*, 251. The closest analogous practice involving magnetic cures is that created by Connecticut born itinerant practitioner, Elisha Perkins, whose magnetic rods, known as Perkins' "Metallic Tractors," enjoyed a faddish and moderately long tenure as a common-sense alternative to Mesmerism. Delbourgo's analysis of the attractiveness of Perkins' Tractors in the transatlantic world of electrical medicine is by far the most comprehensive and on-point interpretation of this iteration of animal magnetism during the American Enlightenment. "Next to the 'ridiculous' practice of Mesmerism, Perkinism was far less performative, billing itself as an external treatment only, in which small metal rods rather than human hands intervened in the animal economy."

excellent model for how to situate the mesmeric movement in society writ large, especially after its re-introduction to the United States in the 1830s.¹⁷⁷ Franz Anton Mesmer's story is well known territory and his techniques have been studied from multiple angles, refracting stories about scientific controversy, the role of the physician as the manipulator of the patient's body, the etheric conception of energy, including magnetism and electricity, and the birth of anesthesia.¹⁷⁸ Crabtree establishes Mesmer as the catalyst for a number of therapeutic practices. Mesmer used iron magnets as conductors of his will to induce healing in the bodies of what many historians now deem hysterical patients.¹⁷⁹ Eventually he introduced musical harmonies, and banquets (tubs filled with magnetic material) into his practice, but was shamed onto the social margins when King Louis XVI's commission resoundingly debunked mesmerism as a foundational study in the "effects of the imagination."¹⁸⁰ Benjamin Franklin's involvement in dismantling Mesmer's claims may have contributed to the general silence on the topic in the newly formed nation of fierce patriots. This explanation can only ever be partial, however. Chaplin shows that Franklin himself was at times suspect for his promotion of electrical fluids in

¹⁷⁷ Adam Crabtree, *From Mesmer to Freud. Magnetic Sleep and the Roots of Psychological Healing* (New Haven: Yale University Press 1993).

¹⁷⁸ Robert Darnton, *Mesmerism and the End of Enlightenment in France* (London: Oxford University Press, 1968); Jessica Riskin, *Science in the Age of Sensibility: The Sentimental Empiricists of the French Enlightenment* (Chicago: University of Chicago Press, 2002), 189-227; Alison Winter, *Mesmerized: Powers of Mind in Victorian Britain* (Chicago: University of Chicago Press, 1998). Jessica Riskin goes in depth into the commission established by King Louis XVI, examining the role credulity, experiment, and transatlantic scientific collaboration played in discrediting Mesmer. Regrettably, Winter includes a reproduction of an etching of Rachel Baker taken from J.E. Smith's 1837 tawdry encyclopedia of the supernatural, *Legends and Miracles and other Curious and Marvellous Stories of Human Nature* (London: B.D. Cousins, 1837), 86, without any other mention of Rachel Baker or the context of the etching leaving the reader with the assumption that this was simply another carnivalesque depiction of the theater of mesmeric manipulation, when it was anything but.

¹⁷⁹ Henri F. Ellenberger, *The Discovery of the Unconscious: The History and Evolution of Dynamic Psychiatry* (New York: Basic Books, 1970); Elaine Showalter, *Hystories: Hysterical Epidemics and Modern Culture* (New York: Columbia University Press, 1997); Andrew Scull, *Hysteria: The Biography* (New York: Oxford UP, 2009); Asti Hustvedt, *Medical Muses: Hysteria in Nineteenth-Century Paris* (New York: W.W. Norton & Co, 2011).

¹⁸⁰ Crabtree, *From Mesmer to Freud*, 23-28.

colonial America. While in France, Franklin participated in the Commission, which would eventually destroy Mesmer's credibility in the transatlantic scientific community, leveraging his position to detract attention from prior criticisms of his own theories.¹⁸¹

Animal magnetism and artificial somnambulism remained a *bête noire* until the late 1830s in the United States. In 1837, Poyen published a book called *Progress of Animal Magnetism in New England*.¹⁸² Poyen began lecture series in New England on animal magnetism and “found the subject almost universally unknown.” He complained that “the greater part of the community was not even “aware of such a science” and that those who had become acquainted with it did not believe it to be a real phenomena.¹⁸³ Poyen claimed that he had singlehandedly-imported animal magnetism to the United States through the “application of the sense, and Experiments.” which had resulted in an awakening in the press. It also attracted “the scientific minds... by its importance in regards to philosophy, physiology and medicine.”¹⁸⁴ Poyen had arrived in New England and found a land devoid of magnetizers. After spending a mere nineteen months on the lyceum and public lecture circuit, Poyen bragged that there were at present, due to his influence, forty magnetizers, and “upwards of two hundred” magnetic somnambulists.¹⁸⁵ Why had the American people been deprived of this healing power for so many years and were, in 1836 so resolute against hearing even a lecture about it? According to Poyen, it was because “the public on hearing that lectures were given on the delusion exploded

¹⁸¹ Joyce Chaplin, *The First Scientific American: Benjamin Franklin and the Pursuit of Genius* (New York: Basic Books, 2006), 297-299.

¹⁸² Charles Poyen, *Progress of Animal Magnetism in New England. Being a Collection of Experiments, Reports, and Certificates, from the Most Respectable Sources* (Boston: Weeks, Jordan & Co. 1837).

¹⁸³ Poyen, *Progress of Animal Magnetism*, 35.

¹⁸⁴ Poyen, *Progress of Animal Magnetism*, 35.

¹⁸⁵ Poyen, *Progress of Animal Magnetism*, 37.

some fifty-three years ago by “the great Franklin” laughed and denied everything without examining.” He complained that “the editors of the press, who, by the way, had not attended any lectures, pronounced, as infallible oracles, that Animal Magnetism was “not destined to flourish in New England.”¹⁸⁶

Franklin’s disdain for Mesmerism had indeed held forth for fifty-three years. On this point, Poyen was not exaggerating. In that half-century between the 1784 Commission, and the arrival of animal magnetism in 1836, artificial somnambulism was virtually ignored.¹⁸⁷ When it was addressed in the public sphere, the tone was typically derogatory or it was included as part of a theatrical performance. An article published in 1784 in the *American Herald* trumpeted “the cause of truth and science service to acquaint the public with the result of the enquiries made by order of the King of France.” The “witchcraft of Animal Magnetism” had made the “the head.... the dupe of the heart.” Animal magnetism was seen as a fraudulent treatment that blinded the sense of otherwise intelligent and benevolent people.¹⁸⁸ In 1796, the Medical Society of the State of Connecticut published an editorial condemning Elisha Perkins, who had taken out a patent on metallic rods to cure bodily ailments through electricity.¹⁸⁹ The author of the article insisted that metallic tractors had been “gleaned up from the miserable remains of Animal Magnetism.” This

¹⁸⁶ Poyen, *Progress of Animal Magnetism*, 44.

¹⁸⁷ Alison Winter, “Ethereal Epidemic: Mesmerism and the Introduction of Inhalation Anaesthesia to Early Victorian London.” in *The Journal of the Social History of Medicine* 4, no. 1 (1991): 1-27. I do think that the introduction of Mesmerism into the United States played a part in the willingness of individuals to participate in anesthesia when it was introduced in 1846. Winter wrote an excellent piece on how the introduction of anesthesia allowed for scientific reproducibility of suspended animation in the operating theater and brought the practice of Mesmerism to a different critical platform. In being able to reproduce states of suspended animation using anesthesia, physicians were able to master the suspended body by experiment with anesthesia, making Mesmerism – a non-chemical means of inducing suspended animation via artificial somnambulism – a more attractive option.

¹⁸⁸ “Boston, Nov. 29,” *American Herald* (Boston, MA), November, 29, 1794, 2.

¹⁸⁹ See Delbourgo, *A Most Amazing Scene*, 200-239, for an analysis of electrical magnetism as a medical technology and an aspect of medical humanitarianism in the early republic.

“delusive quackery” would not find any support amongst the medical community.¹⁹⁰ There were others like Perkins. During the 1790s, John Holloway published advertisements in various papers that he would be giving lectures and instructions in animal magnetism. It was depicted as a science that “tends to entertain the mind, to refine the understanding, and to harmonize and regulate the dispositions of the heart, as well as to relieve the pains and maladies peculiar to the body.”¹⁹¹ Men like Perkins and Holloway were no matches for the enduring mythos of Franklin. Even as late as 1805, his obituary address from 1791 was being reprinted in papers, lauding his time in France as a period in which he debunked the “animal magnetism of that maniac, Mesmer.” Franklin, with his “learned committee” “unveiled” the “fraud and folly” and animal magnetism “received its death wound” at his hand.¹⁹² It is no small irony that Robert MacNish deemed Franklin a somnambulist in his 1834 edition of *The Philosophy of Sleep*. MacNish recounted “a very curious circumstance” published in the edition of Franklin’s autobiography and letters compiled by his grandson: “‘I went out,’ said the Doctor, ‘to bathe in Martin’s salt water hot bath, in Southampton, and floating on my back, fell asleep, and slept nearly an hour, by my watch, without sinking or turning – a thing I never did before, and should hardly have thought possible.’” While falling asleep in salt water and having the good luck not to drown would not count as somnambulism to us, successfully performing any waking action normally while asleep (in this case, swimming) counted as somnambulism.¹⁹³

¹⁹⁰ “Animal Magnetism,” *The Rising Sun* (Keene, NH) July 2, 1796, 4.

¹⁹¹ “Animal Magnetism,” *General Advertiser* (Philadelphia, PA), October, 25, 1790, 2.

¹⁹² *Political Observatory*, (Walpole, NH) June 5, 1805, 3. Dr. W. Smith delivered the original obituary before the American Philosophical Society on March 1, 1791.

¹⁹³ Robert MacNish, *The Philosophy of Sleep*, First American Edition (New York: D. Appleton & Co., 1834), 151.

It was Mesmer's pupil, Armand-Marie-Jacques de Chastenet, the Marquis de Puységur who discovered magnetic sleep in his famous case of a sleepwalker who he eventually was able to manipulate using induced somnambulism. Puységur accepted the distinction between artificial and natural somnambulism, but ultimately believed that magnetizing the sleeping subject was a very good way of controlling natural somnambulism. Puységur called natural somnambulists "independent somnambulists" and magnetized subjects, "subordinated somnambulists."¹⁹⁴ The ideological issue at the heart of this distinction highlights the vast difference between European and American approaches to somnambulism. Americans wondered at natural somnambulism and tried to control it with somatic medicine. Europeans following Puységur used their own power as physicians wielding healing hands to do so. The element common to both attempts at controlling somnambulism was the underlying belief that natural somnambulism was dangerous in some way; un-moderated volition was not only anti-Enlightenment in its threat to rational behavior, but if left to progress, could threaten medical credibility.

John Bell published one of the very first Enlightenment sources of repute discussing somnambulism in 1792. He was affiliated with Mesmer and Puységur, and while privileging artificial somnambulism, (the trance-like state induced by magnets and human suggestion) caused by animal magnetism, did much to establish a definition that accounted for both natural and artificial somnambulism. Natural somnambulism occurred spontaneously without interference from a third party. He defined somnambulism as "a state between sleeping and walking, partaking of both."¹⁹⁵ He defined the patient as "a Somnambule or Clair-voyans, when he can do the same as when he was awake; those natural Somnambules who get up in the night,

¹⁹⁴ Crabtree, *From Mesmer to Freud*, 40-41.

¹⁹⁵ John Bell, *The General and Particular Principles of Animal Electricity and Magnetism, &c. In which are found Dr. Bell's Secrets and Practice, as Delivered to his Pupils* (London: Printed for the Author, 1792), 67.

and do many surprising things, are well demonstrated they are diseased persons, and may be cured by treating. The other class of Somnambule was the “magnetic Somnambule” whom “art has found out a means and absorbing and suspending some of their external senses for awhile; the patients eat and drink, go up and down, play on any kind of instrument they are used to, and do many surprising things as you please to desire them.”¹⁹⁶ Bell, as an animal magnetist, was fond of putting people “into Somnambulism.” One of his cases involved a young woman who asked to “to be charged more” when she ran out of energy during an episode of artificial somnambulism. Bell believed that artificial somnambulists were “like a machine which requires to be wound up.”¹⁹⁷ An Enlightenment fixation with automata made artificial somnambulism and the hypnotizing process of Mesmerism particularly palatable to Europeans.¹⁹⁸

Puységur paid careful attention to the behavior of memory in magnetized patients. The artificially magnetized individual was able to remember both the somnambulistic state and the regular state of consciousness while magnetized. The notion that the memory too, could be rendered automatic, appealed to followers of mechanical explanations for life. While awake, the individual could not recall the somnambulistic episode. Crabtree argues that “double consciousness” was first tested in artificial somnambulism, and would eventually serve as the psychological theory underlying multiple personality disorder.¹⁹⁹ Double consciousness occurred in natural somnambulism just as it did in artificial somnambulism, but continuity of memory was

¹⁹⁶ Bell, *The General and Particular Principles*, 69.

¹⁹⁷ Bell, *The General and Particular Principles*, 71.

¹⁹⁸ For literature on the European Enlightenment interest in artificial life and automata see Jessica Riskin, “The Defecating Duck, or, the Ambiguous Origins of Artificial Life,” *Critical Inquiry* 29, no. 4 (Summer 2003): 599-633; Adelheid Voskul, “Producing Objects, Producing Texts: Accounts of Android Automata in Late Eighteenth-Century Europe,” *Studies in History and Philosophy of Science Part A*. 38, no. 2, (June, 2007): 422-444.

¹⁹⁹ Crabtree, *From Mesmer to Freud*, 42.

reported differently from case to case. Mary Reynolds, an American girl with double consciousness, would set the standard for the condition. Unlike physicians who worked with natural somnambulists, Puységur held fast to the idea that this heightened memory was evidence of a paranormal sixth sense in magnetized sleepers – it was a sense that he also thought that the patient could use to discover the source of their illness and effect their own cure.²⁰⁰ When mesmerism finally did gain circulation in the United States, Americans were studying theories postulated by Puységur, rather than Mesmer.²⁰¹

Crabtree identified five types of mesmeric practice that emerged in the early years of the nineteenth century. Practitioners ranged from strict followers of Mesmer (those who placed their healing emphasis on magnetic fluid), those who identified the source of magnetism's effects in the good will of the healer (this view was advocated by Puységur's followers August Roullier and Joseph Deleuze, who became the first chronicler of mesmerism in the 1820s), those who believed that healing was spiritually derived, those who saw its effects as a byproduct of the larger ruling force of sympathy, and those who argued it worked through suggestion.²⁰² Charles Poyen – that vector of spiritual revolution – was trained by Puységur. Despite his high status in elite European circles, he found his audiences to be interested, but ignorant. Fuller writes “much to his own consternation, he found himself lecturing upon a subject virtually unknown to his American audiences.”²⁰³

²⁰⁰ Crabtree, *From Mesmer to Freud*, 35, 92.

²⁰¹ Robert C. Fuller, *Mesmerism and the American Cure of Souls* (Philadelphia: University of Pennsylvania Press, 1982), 10-11.

²⁰² Crabtree, *From Mesmer to Freud*, 114-118.

²⁰³ Fuller, *Mesmerism*, 17.

Fuller's ambitious 1982 work *Mesmerism and the American Cure of Souls* cannot quite answer the question of why mesmerism was absent from American popular culture prior to Poyen's hopeful arrival in a nation of untouched by magnetism. Fuller explores the problem by suggesting that the United States, before 1836 was lacking institutions "cohesive enough to impart order to personal and social life. In a directionless, but ever-expanding environment, Americans were in sore need of doctrines that would ease the burden of systematic inner-direction."²⁰⁴ In a somewhat lackluster attempt to explain the chasm between Lafayette's attempt to introduce mesmerism to America in 1784 (and his rejection by Jefferson who found it irrational), and 1836, Fuller claims that Jacksonian era Americans were simply congenitally susceptible to "a wide assortment of religious sects and utopian social movements."²⁰⁵ Mesmerism held inner affinities with these Jacksonian sects – perhaps – but this can only explain its popularity after 1836, not why it failed to capture earlier audiences. Fuller was quite right to point out that mesmerism's "only laboratories" were parlor-room and stage demonstrations, while its theory was fodder for public lecture halls and private metaphysical clubs.²⁰⁶ If mesmerism had been a matter of public interest before Poyen began his campaign, Fuller was unable to uncover it, and instead lapses into the comforting narrative of weird antebellum occultism for the remainder of his work.

Newspapers reveal more in-depth American sentiments towards mesmerism during this period, presenting a somewhat bleak prospect of success. Mesmer's obituary, printed in the

²⁰⁴ Fuller, *Mesmerism*, 15.

²⁰⁵ Fuller, *Mesmerism*, 15-16; Emily Ogden, "Mesmer's Demon: Fiction, Falsehood, and the Mechanical Imagination," *Early American Literature* 47(1): 143-170, makes a good attempt to decode the early introduction of Mesmerism into the United States in 1784 by analyzing its implicit impact on late-eighteenth century American literature. Regrettably, Ogden does not move forward in time, leaving the question of "where Mesmerism?" unanswered.

²⁰⁶ Fuller, *Mesmerism*, 15.

Norwich Courier in Connecticut read simply: “Died: In Switzerland, the famous Dr. Mesmer, the high priest of the delusion of Animal Magnetism, aged 81.”²⁰⁷ Animal magnetism seemed to be nothing more than a tired joke until the 1830s when it was reconsidered anew as a practicable means of engaging with vital forces in the body. A popular play, “Animal Magnetism, or The Force of Love” was advertised in papers throughout the eastern seaboard of the United States until 1820.²⁰⁸ There were a few German and French individuals who seemed to have demonstrated animal magnetism in their private homes – what kind is unknown. Aside from this faint smattering of activity reported briefly in American newspapers, mesmerism and animal magnetism were almost universally seen as objects of derision since they were first introduced in 1784. Until the first inklings of genuine curiosity began to push their way through the negative impression of animal magnetism during Poyen’s first tour, mesmerism and all its associated states was a slur. Magnetic sleep was meant for conjurers and fools.

The best explanation for the magnetic void prior to 1836 in the United States most likely lies in the fact that common-sense trained physicians, such as Rush, simply staked a claim on natural somnambulism first (more will be said about Rush’s theories on somnambulism in the next chapter). As Rachel Baker’s case shows, it could lend itself to pious pursuits when it was not disturbing the rational souls of moral Americans. Natural somnambulism also seemed to hold the key to the meaning of identity as it revealed an unconscious mind that seemed to replace the conscious one when the body was in a state of somnambulism. Rachel Baker was not dismissed as a witch or a quack because nobody believed she was participating in animal magnetism. She was, however, expressing an identity with deep roots in early America: female preaching.

²⁰⁷ “Death Notice,” *Norwich Courier* (Norwich, CT), June 7, 1815, 3.

²⁰⁸ For an example of the common advertisement, see: “Advertisement,” *Alexandria Gazette*, (Alexandria, VA), April 26, 2011, 3.

Sister Christian

Women in colonial, then early republic America who felt the calling to exhort or to preach all had one thing in common: a problem called Paul. In the King James Bible, 1 Timothy Chapter 2 instructs good Christians on the act of prayer through Paul the Apostle. Paul is dispensing advice to Timothy, his son, on prayer and says unto him “Whereunto I am ordained a preacher, and an apostle, (I speak the truth in Christ, and lie not;) a teacher of the Gentiles in faith and verity. I will therefore that men pray every where, lifting up holy hands, without wrath and doubting.” That was helpful advice for Christian men, seeking the Protestant path to salvation through the good book. It was less comforting to a good Christian woman. Women were instructed often and sternly “in like manner also, that women adorn themselves in modest apparel, with shamefacedness and sobriety; not with broided hair, or gold, or pearls, or costly array.” The real work of women was to follow the edict: “Let women learn in silence with all subjections. But I suffer not a woman to teach, nor to usurp authority over the man, but to be in silence. First Adam was formed, then Eve.”²⁰⁹

These few boldfaced rules were the basis of every attack on women who decided to preach or exhort in public. Christine L. Krueger argues that the written words of preaching women allowed them entryway into male discourses on religious matters. Writing was more difficult than speaking for women preachers. Krueger writes: “though later women writers could easily avail themselves of a powerful prophetic voice, women preachers had limited opportunity to display their oratorical skills in print.”²¹⁰ Though Krueger is referring to Methodist women preachers who sought to write sermons for a reading audience, her argument indicates that oral

²⁰⁹ See King James Bible <<<http://www.kingjamesbibleonline.org/1-Timothy-Chapter-2/>>> Accessed: October 20, 2013.

²¹⁰ Christine L. Krueger, *The Reader's Repentance: Women Preachers, Women Writers, and Nineteenth-Century Social Discourse* (Chicago: University of Chicago Press, 1992), 69-70.

culture gave women more leeway to speak their spiritual truths and commit themselves to a public identity of their own choosing, as printed writing was controlled by male gatekeepers with ultimate authority over the material printing press. Rachel Baker's preaching voice did end up in print in *Devotional Somnium*, but the limitations of its authenticity are clear: her voice was only ever transcribed by men for medical instruction. Even Mary Reynolds, whose letters and autobiography remain largely unpublished to this very day, was first given a voice on the historical record by a male historian, Michael G. Kenny, in his book *The Passion of Ansel Bourne: Multiple Personality in American Culture* (1986).

Why has Rachel Baker been largely excluded from the literature on female preaching? Is it because her agency in her choice to preach is ambiguous? Or was she a curiosity first and an orator second? She was certainly able to draw a large audience, but not necessarily followers. Catherine Brekus writes: "female preachers understood their faith as something that transcended the struggles of history – as an encounter with the mysterious, the marvelous, the divine. They genuinely believed that God had inspired them to preach." Brekus also writes about the ways in which women mobilized conversion experiences and calls to exhort as a way of circumventing or recasting gender roles in late-eighteenth century and early-nineteenth century American society. Though revivals were a part of Rachel Baker's wider community, she came from a social background in which Brekus's argument applied: "instead of allowing women to make public professions of faith or exhort in public most churches urged them to exert their influence through more private means: praying with their husbands, reading pious books to their children, and conversing about religion with other women."²¹¹ This background, however, did not direct Baker

²¹¹ Brekus, *Strangers & Pilgrims*, 17, 74. Brekus refers to the Shakers as an example of a successful sect in which a woman, Jemima Wilkinson, exerted spiritual authority over a group. Wilkinson's history provides a stark contrast to Baker, showing precisely how different Baker's experience was from that of a woman preacher.

into publicly professing prophetic knowledge. Baker may have been having encounters with the mysterious, but she did not remember her sleep preaching, making it hard for her to stake claims to feeling a divine calling to preach publicly. Living where she did on the frontier of the new nation, Baker was more likely to encounter radical evangelical sects, through contact with itinerant preachers, or hearing of camp meetings in neighboring regions.²¹²

In the early years of the nineteenth century, there was a rise in women exhorting in public. They were often members of radical, dissenting sects, including Baptists, like the Baker family, and women were encouraged to pray out loud, but not to preach.²¹³ Freewill Baptists, Methodists, and radical Christian sects recognized women preaching publicly as “Mothers in Israel,” or “Sisters in Christ.”²¹⁴ Women were permitted to preach because their feminine natures made them seemingly weaker and therefore more willing receptacles for God’s divine inspiration. Preaching women were best seen as instruments rather than agents.²¹⁵ Baker was a woman who preached in her sleep, but her passivity came primarily from her somnambulist state, not her womanhood. She was not seen as a leader. This oracular corpse made no claims to be a Mother in Israel or a sister in Christ.

Public opinion, however, did matter immensely to the construction of Baker’s credibility. According to Samuel Latham Mitchill, the public’s initial reaction to Baker, the somniloquist

²¹² Brekus, *Strangers & Pilgrims*, 77.

²¹³ Brekus, *Strangers & Pilgrims*, 127-129.

²¹⁴ Krueger, *Reader’s Repentance*, 49-59; Brekus, *Strangers & Pilgrims*, 15; Larson, *Daughters of Light*. Krueger argues that Methodist women used Hebrew women in the bible to advance their desire to preach within the patriarchy that dominated speaking order. Brekus argues that for late-eighteenth century and early-nineteenth century evangelicals, “the criteria for their sisterhood and motherhood was *spiritual* rather than biological: they had helped to spread the Christian faith through their nurture of the family of God.” The seeming exception to the “Mothers in Israel” designation were Quaker women who had a long history within the Quaker religion of professing their inner light and preaching both within their communities and abroad as itinerants.

²¹⁵ Brekus, *Strangers & Pilgrims*, 160.

debutante in New York City (not the back country nightmare), was to see her “nightly exercises... as a grievous and abominable imposture.”²¹⁶ Mitchill, writing about his experience guiding Baker through the capriciousness of public wonder in *Devotional Somnium* gave the public the benefit of the doubt. Their credulity “was to be expected,” he wrote. “That an ignorant girl of 19 years of age should dream in a course of enlightened theology, and should at the same time express her thoughts in fervid and eloquent language... far beyond any attainment of her waking efforts” was preposterous.²¹⁷ Nonetheless, Baker did this “in the form of an exhortation to an assembled audience, preceded and concluded by a kind of ministerial prayer.” Empiricism allowed the public to unanimously change their opinion as a “confirmation of various other proofs, to show that this young lady’s misfortune is real, and beyond her controul.”²¹⁸ Baker’s misfortune was vexing. Mitchill was miffed that members of the community “in the superstition of their credulity, have imagined that Miss Baker’s discourses are dictated by an extraordinary agency of the Divine Spirit.” Mitchill maintained that any supernatural explanations for Baker’s exhortations were “perfectly gratuitous” and that Baker herself “explicitly discards it.” Though it was not precisely the case for evangelical sects in the region, Mitchill was adamant that “the end of celestial revelation is long past, and it is equally weak and presumptuous to talk of their renewal in our day.” These beliefs distinguished Mitchill from the physicians of the eighteenth century. There was no room in his medicine for miracles. Transmogrifying a “wonder into a miracle” for the purposes of explaining it was a crude way of solving what Mitchill believed was a purely explicable phenomenon.²¹⁹ Mitchill’s conviction in the somatic nature of the mind helps

²¹⁶ Mitchill, *Devotional Somnium*, A2.

²¹⁷ Mitchill, *Devotional Somnium*, A2-6.

²¹⁸ Mitchill, *Devotional Somnium*, 6.

²¹⁹ Mitchill, *Devotional Somnium*, 9.

to show just how lasting the loss of the separable soul of the late-eighteenth century trance narratives really was.

Unlike other public female preachers, Baker, when awake, believed that “individuals of her sex, are prohibited by apostolic mandate, from acting as public teachers.”²²⁰ If we take this belief as the gospel according to Baker, then we are left with the question: how did witnesses interpret her exhortations? How did Baker interpret herself? If she did believe that women had no business preaching out loud, then her affliction was rendered even more mysterious by her frequent and extensive exhortations. The editors of *Devotional Somnium* issued a preface to the transcripts of her exhortations, stating: “they are specimens of her utterance without any premeditation whatever. Something of a similar nature flows from her lips every evening during the year.” In a bid for passive observation, the exhortations were recorded simply because on those nights, stenographers “well versed in the art of writing shorthand” and who were “proficients in theology” happened to be present. All exhortations being equal, each night yielded an example of “the most rare and wonderful performances of the human mind.”²²¹ The performances of the human mind were the central curiosities for physicians. Doctors did not want access to divine messages imparted through somnambulists: they wanted to examine the mechanics of the mind demonstrated by them.

Baker opened each sleeping exhortation with a prayer, referring to herself as “a poor creature, and undone.” Addressing God directly she said, “except thou art with me, I am undone, and am a poor worm of the dust. I pray thee, therefore, to deal with me graciously.”²²² Her

²²⁰ Mitchill, *Devotional Somnium*, 42.

²²¹ Mitchill, *Devotional Somnium*, 180.

²²² Mitchill, *Devotional Somnium*, 181.

exhortations encouraged the “children of men” gathered around her bed to listen to her “speak” of things “concerning Jesus Christ” and their Christian duty to trust their Savior. As part of participatory curiosity and one supposes, the evening’s entertainment, observers were encouraged to ask the somnolent Baker questions. Conveniently the set of exhortations printed in *Devotional Somnium* include pertinent questions such as “Were you at church to-day,” answered in the affirmative by Baker, who qualified her answer saying, “There I have heard the word of eternal life.” By attributing her earlier speech to her earlier church attendance, Baker was diffusing questions about a woman’s prerogative to be silent by implying that she was perhaps mimicking what she heard a minister say. But this was not a successful strategy. In the same answer she contradicted herself: “I, even I, inquire why it is not with me as with the heathen; they are bowing down to dumb idolators, and set in darkness and the shadow of death. The shadow of darkness is their lot; but I, even I, have been taught the way of the truth and the light; that he is the way, and the truth, and the light.” In Baker’s estimation (or her stenographer’s) a speechless God was a heathenish idol, and she was hardly capable of more sophisticated worship.²²³

At this particular oracular performance, several witnesses asked her the inevitable question: “Rachel, by what authority do you undertake to preach the gospel?” asked an observer. Baker replied that she “did not presume to preach” and again contradicted herself, stating that “I, in some sense preach, preach unto you; and in another sense, I do not.” Understandably unsatisfied with this answer, another question came forth: “Rachel, the apostle says, ‘I suffer not a woman to teach.’ Why, then, do you speak in public?” Claiming she was no “public teacher,”

²²³ Mitchill, *Devotional Somnium*, 185.

Baker responded “I only exhort each of you to be steadfast in the, faith: shall I, therefore, presume to be a teacher? If I could do my own will, I would rather not speak to you!”²²⁴

It is difficult to reconstruct how much volition Baker may have had as a somnambulist preacher. In arguing that she had no will while in a state of weak or absent volition, she presented yet another contradiction. Whether by will or some other force, Baker ended this line of questioning in stating “Shall a woman be silent because she is a woman, and not improve her gifts? I perfectly agree with the apostle, that it is not proper that she should stand up in the church; and I undertake not to speak.”²²⁵ On another occasion, where she preached at Dr. John Douglass’s house on February 9, 1815, she was asked again “Do you not violate that command of the apostle, ‘Suffer not a woman to speak in the church,’ when you presume thus to address sinners in the name of the Lord?” The event seems to have been less hostile than the previous one in which the crowd badgered her about her right to speak. Her answer, however, reveals a similar level of frustration: “shall I – O, shall I then, hold my peace? he apostle saith, let not a woman stand up in the church as a public teacher: but are you hard of believing? are you hard of understanding? I have told you that I cannot avoid doing these things: my God knoweth what they mean.” She continued to defend herself saying “I do not pretend to teach men; but I only tell them of their danger, and tell them that there is wo to them that are at ease in Zion. God forbid that I should be silent.”²²⁶ Contradicting her claims from a few nights previous, Baker asked, “shall a woman hold her peace, because she is a woman? Methinks the apostle meant not so; but meant that they should let their light shine before men.”²²⁷ This was a very different timbre of

²²⁴ Mitchill, *Devotional Somnium*, 186.

²²⁵ Mitchill, *Devotional Somnium*, 187.

²²⁶ Mitchill, *Devotional Somnium*, 221.

²²⁷ Mitchill, *Devotional Somnium*, 222.

revolt than “I would rather not speak to you!” The men gathered around the corpse-like body of a young woman were not forced to answer whether they were “hard of understanding” but they were certainly in a position to receive the message that women could not only interpret the bible in another way, as well as shine their inner light on a captive audience.

Baker continued to comment on her compulsion to speak. On February 10th, 1815 Dr. Douglass held another session. A member of the audience – Professor Griscom (well known in New York for his natural philosophical inquiries and social reform), asked “why should it be thought in this enlightened age, the duty of an illiterate female to give instruction on religious subjects?” Baker provided a biting answer: “it is a strange thing, and it is a mystery to many. Art thou speaking of myself? Truly, I have not had the advantage of education: I am but a poor, ignorant child; but what I speak my God seemeth to reveal it unto me.”²²⁸ There seems to have been no system of rebuttal or formal debate for these questions. Perhaps it was untoward to argue with a woman in public, especially a physically helpless one who happened to be asleep and especially vulnerable. This gave Baker a hopeful opening to fight back against those pretenders of enlightenment who would denigrate her as illiterate. By the end of March 1815, Baker had taken up residence at a Mrs. Bowering’s and on the session held March 28th, attended by Drs. McLeod and Romaine, Baker continued to speak profusely. She often prefaced her statements with “I speak,” or “let me not speak of,” and “have I not told you?”²²⁹ Interspersed with her exhortations was a lot of talk about talking. “I speak these things unto you, for I perceive it is a time when professors and teachers sleep together,” Baker told the company at Mrs. Bowering’s

²²⁸ Mitchill, *Devotional Somnium*, 237.

²²⁹ Mitchill, *Devotional Somnium*, 248.

home.²³⁰ When asked if she would like some of “the ministers present to pray” for her, she said, “I wish you truly to hear me... I will speak what the Lord giveth me to declare and then I will hear them.”²³¹ She insisted on bypassing male interlocutors altogether. Her messages were a matter of her conversations – though their nature was unknown – with God alone. During one sermon, she claimed that “if I cease to utter words and declare doctrine, let my mouth be dumb and my tongue cleave to the roof of my mouth.”²³² Given her nightly speeches, this seemed unlikely – at least as long as she was a somnambulist.

By speaking incessantly of herself as a person who would not speak, although she was speaking rather forcefully, Baker was presenting two versions of herself to the public. Her sleep-veiled threats reveal that Baker was perhaps engaged in a more subversive bid for a public voice as well as control over her own identity as an exhorting woman. During the session at D.S. Lyon’s on February 6th, 1815, a member of “the company” asked Baker a fashion question: “what kind of cap would you like best?” Insulted, Baker retorted: “What did you say my friend? I did not understand what you said? Dost thou not incline to tell me what thou saidst? if not, I will turn my attention to others, who will pay attention for what I say; for I must give up my account for what I have said.”²³³ She proceeded to preach for some time afterwards and ended the evening with a prayer. Her response to the provoking question suggests that Baker was truly a woman in rebellion. She was not going to indulge superficial questions about her preference in hats, or otherwise behave as a woman was expected to. Her sleep driven claims that she firmly believed that women should be silent were invective. She placated authoritative questions with

²³⁰ Mitchill, *Devotional Somnium*, 245.

²³¹ Mitchill, *Devotional Somnium*, 252.

²³² Mitchill, *Devotional Somnium*, 262.

²³³ Mitchill, *Devotional Somnium*, 190.

the words of a supplicant and lashed out at anyone who attempted to lead her through a logic that would prove she was nothing but a woman. It was the fact that Baker was sleeping that made her a curiosity, rather than a preaching nuisance to patriarchal claims to religious authorities. Her persistent somnambulism ensured that she could not be mistaken for an awakened sister in Christ. Baker may have leveraged a male interest in medical science of the mind to divert attention to what she needed to say in public. This is not a claim that can be established from the record, but as Baker travelled from place to place and slept and spoke, her entourage of physicians were busily preparing an American medical text on sleep, one in which she would be the main character.

Devotional Somnium

Baker was not able to travel outside of her region until after the war of 1812 ended and British troops retreated from the New York frontier.²³⁴ When she did set abroad south to New York City in October 1814, travel was still a new and dangerous prospect for women – especially, young and single women. Turnpikes and post roads were built beginning in the 1790s. They allowed for higher volumes of public stagecoach travel between major metropolitan centers and peripheries. It is likely that Baker traveled with a male escort on a public coach with two strangers in close quarters for days. By the 1810s some roads had been reinforced with dirt or planks, making travel more efficient.²³⁵ One wonders if Baker’s experience on the stagecoach

²³⁴ Patricia Cline Cohen, “Women At Large: Travel in Antebellum America,” *History Today* (Dec. 1994): 44-50. Cohen argues that a four-stage transportation revolution occurred beginning in the 1770s in which gender relations were changed by the influx of people who were now mobile in ways they had not been before. Piepmier, *Out in Public*, 31, writes: “Vehicles like stagecoaches were simultaneously private and public; while confining passengers within a closed space which might simulate a home – enclosed from the outside world, keeping passengers from being on the patently public space of the street – they were still public to the extent that they housed a diverse lot of people who were forced into contact with one another.”

²³⁵ Cohen, *Women at Large*, 45.

was altered by the nightly crowding of strangers around her bed – one of the most intimate spaces in a home, and least likely to be a stage for public observance.

In New York City, Baker entrusted herself to the company of strangers. Far from her community and her family, Dr. Samuel Latham Mitchill and Dr. John Douglass guided her through a network of piously curious physicians and reverends who asserted their authority over Baker's slumbering body in order to authenticate the contents (and existence) of her unconscious mind. Baker, like Jane Rider, had a mediated voice. The only known records of her speech are those written by stenographers (probably male) and the interpretation of her experience as a somniloquist is one dictated by physicians who, while appreciating the piety of her night-talking, focused their efforts on using her as a living medical specimen, revelatory of the workings of the mind.

Samuel Latham Mitchill was a formidable, though generally forgotten figure in the early national period. As a physician, lawyer, statesman, and social virtuoso, Mitchill's curiosity ranged over a wide variety of topics. He introduced Lavoisier's chemistry to an American audience and attempted to prove the "doctrine of septon" through poetic verse – a convoluted theory positing that oxygen, the giver of life, was thwarted by "septon" the harbinger of disintegration (typically, acidic substances), and if unified with alkaline substances, could cure or interrupt diseases caused by acidity brought on by the natural incursion of the "septic principle."²³⁶ Mitchill applied his thoughts on septic destruction to explanations of putrefaction and digestive diseases, which did not manifest fevers.²³⁷ As a proper natural historian, Mitchill

²³⁶ There are few good biographies of Samuel Latham Mitchill. Two in particular attempt to cover his biography and life work with any substance. Courtney Robert Hall, *A Scientist in the Early Republic: Samuel Latham Mitchill 1764-1831* (New York: Columbia University Press, 1934), 35; Alan David Aberbach, *In Search of An American Identity: Samuel Latham Mitchill, Jeffersonian Nationalist* (New York: Peter Lang, 1988). The point on septon is taken from Hall's delightfully titled chapter "Satanic Septon and the Celestial Alkalies."

²³⁷ Hall, *A Scientist*, 55-60.

was also an avid geographer, zoologist, botanist and budding cartographer.²³⁸ He was more engaged with European culture than Benjamin Rush, and while a patriot, remained a cultured urban dweller with inroads to high society.

Born to Quaker parents in North Hempstead, Long Island in 1764, Mitchill can best be imagined through an effusive description of him in *Lives of Eminent Physicians* (1861): “In the prime of his manhood Dr. Mitchill was about five feet ten inches in height, of comely, rather slender and erect form; in after life he grew more muscular and corpulent, and lost somewhat of that activity which characterized his earlier days. He possessed an intelligent expression of countenance, an aquiline nose, a gray eye, and full features.” The young Mitchill’s fashion sense was sharp in his earlier career, but declined in tandem with his increasing corpulence. When he entered public life his dress was “after the fashion of the day, the costume of the times of the Napoleonic consulate: blue coat, buff colored vest, smalls, and shoes with buckles.”²³⁹ He studied natural history with Dr. Samuel Bard before getting the standard medical education that was expected of gentlemen physicians at the University of Edinburgh from 1783 to 1786. After his return to the United States, he was elected to the New York State Assembly in 1789, working against the Federalist platform to support Jefferson. He lived in Washington D.C. until 1813, when he moved back to New York City until his death in 1831.²⁴⁰ Mitchill founded the New York Lyceum and threw his social cachet behind his quarterly journal, *The Medical Repository*, which contained papers and cases from domestic and international sources.²⁴¹ *The Medical*

²³⁸ See Hall, *A Scientist*, for Mitchill’s scientific accomplishments and Aberbach for his political involvement.

²³⁹ Samuel D. Gross, ed. *American Medical Biography: Lives of Eminent American Physicians and Surgeons of the Nineteenth Century* (Philadelphia: Lindsay & Blakiston, 1861), 285.

²⁴⁰ Aberbach, *In Search of an American Identity*, 3-5.

²⁴¹ Hall, *A Scientist*, 16.

Repository (1798-1824) was his venue of choice for disseminating the case of Mary Reynolds, whose experience of double consciousness was interlaced with a nascent set of medical understandings of the connection between consciousness and states of suspended volition put forth by physicians during the early republic period.²⁴² Mitchill's interest in Rachel Baker may have inspired him to publish Mary Reynolds case in the *Medical Repository* in 1817. His reasoning is largely unknown, however, as his Staten Island home, containing his entire source material intended for his autobiography, was destroyed in a fire.²⁴³

Despite its remarkable content and insight into American medicine during the early national period, virtually nothing has been written about *Devotional Somnium*. Mitchill's invisibility as a scientist of significance may in part explain the lack of historical attention to the piece as a work in its own right. It has been cited as source material for Rachel Baker's case, but generally only in passing. The work itself is dedicated to Dewitt Clinton, the president of the Literary and Philosophical Society of New York, among many &cs., and a great friend of Mitchill throughout his life. The authors, Mitchill and John Douglass, had a clearly stated goal: "This attempt to define that province of the human mind that is intermediate between Sleeping and Waking, and to arrange a most prominent case, now and for years observed among us by thousands of witnesses, with the other numerous and important phenomena of Somnium" was intended to be read and understood by "Divines, Physicians, Moralists, and for the curious and

²⁴² Samuel Mitchill, "Double Consciousness, or a Duality of Person in the same Individual: From a Communication of Dr. Mitchill to the Reverend Dr. Nott, President of Union College. Dated January, 16, 1816," eds. Samuel L. Mitchill, Felix Pascalis, and Samuel Akerly, *The Medical Repository, or Original Essays and Intelligence Relative to Physic, Surgery, Chemistry, and Natural History* New Series, Vol. 3. (New York: T. and J. Swords, 1817), 185-186.

²⁴³ Aberbach, *In Search of an American Identity*, x.

intelligent citizens of every class.”²⁴⁴ What better way to democratize curiosity than to share the somnambulist story of a pious everywoman in the context of medical fact? John Douglass assured his audience, “nor is their [sic] any need of converting the wonder into a miracle in order to explain it; a little inquiry into the nature and principle of dreaming, will reward the pains of him who will submit to take them, with a much more credible solution of the problem.”²⁴⁵ Douglass and Mitchill sought a “correct theory of dreaming” as that would furnish the known facts of sleep with missing information.²⁴⁶ The two physicians agreed: “Of sleep, indeed, we know almost nothing by the fact.” Sleep was a product of one’s animal nature, rather than of their “mental being.” They were certain that “the mind acts powerfully in dreams, and not unfrequently puts the sleeping body itself in motion, and produces speaking, walking, running, and sometimes a long course of perfectly rational conduct.”²⁴⁷

Wonders need not be miracles, especially if there was perfectly rational conduct attached to the wondrous behavior. This conception lay at the basis of what it meant to be a citizen in the new republic with responsibilities to God, country, and commonsense.²⁴⁸ Baker’s divine discourse did not require a supernatural explanation: rather, it required a practical, medical one that could be called upon in similar future situations. Mitchill purported to explain anomalies of sleep by dividing it into “three animal states.” This uneasy republic of “Wakefulness, Sleep, and Visions or Dream” could be united into a singular theory to explain why “during sleep the will is suspended, consciousness has no prevalence, the organs of sense cease to act, and there is a

²⁴⁴ Mitchill, *Devotional Somnium*, front matter. n.p.

²⁴⁵ Mitchill, *Devotional Somnium*, 9.

²⁴⁶ Mitchill, *Devotional Somnium*, 10.

²⁴⁷ Mitchill, *Devotional Somnium*, 10.

discontinuance of voluntary power, and of all exertion depending thereon.”²⁴⁹ Mitchill did not believe that the dream state had been “equally elucidated” as the waking or sleeping states, and with the instinct of an enlightened natural historian, set about renaming the state “somnia” after the explanation of the classical scholar Cicero. Mitchill admiringly recited Cicero’s definition of volition, pausing to reflect on the longevity of the idea that in somnia, the body would often perform voluntary bodily and mental tasks “without the direction or government of the will, or without any recollection afterwards that such volition existed.”²⁵⁰

Mitchill the statesman was an Anti-Federalist. As a physician, he appeared to be one as well. His initial response to the Constitution, however, was enthusiastic. In an oration performed for the Black Friars, Mitchill expounded on the Jeffersonian dream of limited government. “In this country you see a strange phaenomenon in politics, a PEOPLE RULING THEMSELVES! What had been viewed by some as a speculative vision or an UTOPIAN dream, is here reduced to actual practice. The rude and tumultuous spirit of DEMOCRACY is softened down into the mild and well-ordered temper of a REPUBLIC.”²⁵¹ When this vision did not come to pass precisely as he had dreamed it would, it resulted in a life long distrust of Federalism, and distaste for the Democratic-Republican factionalism that eventually emerged.²⁵² According to Aberbach, Mitchill’s “sentiments for his country stemmed from the conviction that under the American political system a mild and equal government would emerge, hopefully based on the dictates of

²⁴⁹ Mitchill, *Devotional Somnia*, 26.

²⁵⁰ Mitchill, *Devotional Somnia*, 27. Mitchill quoting Cicero from “The Somnia of L. Scipio the Military Tribune.”

²⁵¹ Mitchill quoted in Aberbach, *In Search of an American Identity*, 14. From: Samuel Latham Mitchill, *Oration Pronounced Before the Society of Black Friars* (New York, 1793).

²⁵² Aberbach, *In Search of an American Identity*, 44.

the rational mind.”²⁵³ Mitchill’s interest in the rational mind and its somatic relationship to volition, and ultimately, self-government, echoed his political ideals – the ones that had been damaged by negotiating the centrality of government in a nation of many states. In working out the logic of somnium, Mitchill divided it into two forms: Symptomatic and Idiopathic.

Symptomatic somnium applied to causal relationships between external factors and the state of sleep in which the individual found themselves. Mitchill identified indigestion, nightmares, effusions of water into the chest, fever, long and short term memory, “over loaded brain,” second sight, clairvoyance or internal sight, incapacitation of corporeal organs, nitrous oxide inhalation, narcotic use, and drunkenness either as direct causes or, sometimes, states of somnium.²⁵⁴ Most interestingly, Mitchill also included a category, “somnium with fainting.” His definition of this form of somnium best articulates how the humane societies must have envisioned somnambulism as a state of suspended animation in need of medical attention. If a person were so unfortunate as to asphyxiate, to feel the denigrating effects of “an exhaustion of vital power” and “appears to be dead” the physician or bystanders ought to be instructed, “there is life enough in the body to prevent putrefaction.”²⁵⁵ Mitchill’s peculiar phrasing suggests that putrefaction was not merely symptomatic of death, but by some mechanism, death itself. Until putrefaction occurred, and one might imagine it would do so according to Mitchill’s theory of septons, there would be oxygen enough and vitality enough to prevent it from occurring at all. Should the individual be saved from the tragedy of septon putrefaction it was not uncommon for him to relate the things he “witnessed during the TRANCE in which he lay, while in the very

²⁵³ Aberbach, *In Search of an American Identity*, 21.

²⁵⁴ Mitchill, *Devotional Somnium*, 29-32.

²⁵⁵ Mitchill, *Devotional Somnium*, 30.

lowest ebb of life.”²⁵⁶ This statement is evidence that by 1815, the trance state had been transformed from a portal to the afterlife, to an ebb in physiological vitality. This change in thinking about the meaning of suspended animation was encouraged by the somatic interventions of the humane societies and a new interest in the machinations of the brain, arising in the 1790s through Rush and his peers in Philadelphia.

Idiopathic somnium was more active than symptomatic. Rather than being dominated by strange powers of the mind such as “foretelling lugubrious events by a sort of SECOND SIGHT” as in “somnium of a prospective character,” or inspiration brought on by the “delightful thoughts and sensations” incurred by nitrous oxide inhalation, idiopathic states involved a different degree of volition. Symptomatic somnium required either unusual mental acrobatics or passive surrender to drugs or fever. Idiopathic somnium provided the individual with a middling kind of volition that was beyond their conscious control, but still deliberate. Mitchill identified eight types of idiopathic somnium: “from abstraction,” or reverie, with partial or universal lunacy, with talking including “Somniloquism or SLEEP TALKING on ordinary subjects,” somnium with walking – otherwise referred to as somnambulism, with invention, with mistaken impressions of sight and hearing, and somnium with singing. Finally, Mitchill defined somnium with the ability to pray or “to address the Supreme Being, and human auditors, in an instructive and eloquent manner; without any recollection of having been so employed, and with utter incompetency to perform such exercises of devotion and instruction when awake.”²⁵⁷ This seems to have been a definition crafted around Rachel Baker’s particular abilities, though Mitchill was careful to diversify his claims with other examples of preaching somnium. Oddly, somnium with

²⁵⁶ Mitchill, *Devotional Somnium*, 30.

²⁵⁷ Mitchill, *Devotional Somnium*, 32-35.

singing derived from a case reported to Mitchill “by several persons of respectability to be a fact, in regard to a young lady now of Maryland, of the same name of the New York damsel, Rachel Baker. She too has no recollection of her nightly performances.” Double somniloquacious Rachels! This was novelist, Charles Brockden Brown’s territory.²⁵⁸

Mitchill and Douglass included several cases of double-mindedness or double consciousness that had been brought to their attention. One case involved a weaver named Job Cooper who lived with another weaver named Mr. Beans and his wife. The intelligence came from Andrew Ellicott, a correspondent and friend of Mitchill’s at West Point military academy who would ultimately furnish Mitchill with Mary Reynolds’ case details. Job Cooper preached in his sleep as well and drew curious auditors from Philadelphia and other locales.²⁵⁹ (The issue of double consciousness and Mary’s case will be discussed more thoroughly in the following chapter).

Mitchill remained devoted to the thesis that “ the suspension of volition characterizes the Somnial state, or that condition of the faculties which I have denominated Somnium.”²⁶⁰ He dug up examples of authorities proselytizing on the dominance of suspension of the will in explaining somnambulistic occurrences. Replicating a chapter from Stewart’s *Elements of the Philosophy of the Human Mind* (1808), Mitchill highlighted Stewart’s question: “what is the state of the mind in sleep? Or, in other words, what faculties then continue to operate, and what faculties are then

²⁵⁸ Bryan Waterman, *Republic of Intellect: The Friendly Club of New York City and the Making of American Literature* (Baltimore: Johns Hopkins University Press, 2007). As far as we know, Brown did not write about sleeping preachers, but was certainly fascinated by somnambulism and ventriloquism. Mitchill and Brown were both members of the Friendly Club of New York City, a social club, which provided cross-disciplinary conversation and sociability, as well as mutual inspiration. I have not been able to find any public records of the other Rachel Baker, the sleep singer.

²⁵⁹ Mitchill, *Devotional Somnium*, 50-55; see Dugald Stewart, *Elements of the Philosophy of the Human Mind*. 3 vols. London: (Printed for A. Strahan, and T. Cadell, 1792 [Vol. 2, 1814, Vol. 3, 1827]).

²⁶⁰ Mitchill, *Devotional Somnium*, 74.

suspended?”²⁶¹ Stewart concluded that, “in sleep those operations of the mind are suspended, which depend on our volition.” The cause of the suspension of volition in sleep could be attributed to the actual power of volition being suspended. The other cause involved the will losing its influence over the faculties of the mind. Stewart, like Mitchill, was a proponent of phrenology. Mitchill agreed with Stewart’s assessment of how to locate somnambulism on a sliding scale of willful volition. Stewart explained loss of volition during complete sleep but also felt it necessary to address those cases in which “the mind loses its influence over some powers, and retains it over others. In the case of the somnambuli, it retains its power over the limbs, but it possesses no influence over its own thoughts, and scarcely any over the body; excepting those particular members of it which are employed in walking.”²⁶²

The rest of the medical text of *Devotional Somnium* is a collection of learned thoughts and theories on sleep and suspended will from those that Mitchill admired and communicated with. He included the ideas of his recently departed friend Dr. Benjamin Rush, a letter from Joseph Priestley, Joseph Addison’s “sentiments on dreams,” and various interesting submissions from public sources including newspapers.²⁶³ To host Rachel Baker, Mitchill also selected a careful group of individuals from his collection of acquaintances who would open their parlors and their ears to the somniloquist who would help him explain the role of volition in the act of self-government. They were selected to be in *Devotional Somnium* because of their unique contributions to New York society through medicine and piety. They represented what Mitchill believed were the qualities a citizen should best embody.

²⁶¹ Mitchill, *Devotional Somnium*, 75.

²⁶² Mitchill, *Devotional Somnium*, 79, 80, 99.

²⁶³ Mitchill, *Devotional Somnium*, 150.

Dr. John H. Douglass, his co-author and like-minded friend was a member of the Health Board of New York City starting in 1811. He had previously acted as a Health Commissioner investigating the spread of yellow fever and contamination from burial grounds in the years before joining the new Health Board.²⁶⁴ He is a lesser-known figure in American medical history and did not receive the same biographical attention in the genre of nineteenth-century medical hagiography as Mitchill or Rush did. The other people given special note as auditors during Baker's exhortations included Virginian plantation owner turned abolitionist Ferdinando Fairfax, the esteemed Professor John Griscom, a member of the Society of Friends, who worked tirelessly in charitable efforts throughout New York, Dr. Alexander M'Leod, a famed doctor of divinity who had influence in the reform Presbyterian movement, Dr. Nicholas Romayne, one of the most famous and professionally active physicians in early-nineteenth century New York and close friend of Alexander M'Leod, and a society woman and reformer named only as Mrs. Bowering. Mrs. Bowering was actively involved with multiple Christian charities and was the ideal hostess and chaperone for Baker. She was a member of the New York Female Sabbath Schools society, which established Sunday schools to educate young girls and disseminate clothing for the needy through the Dorcas Society.²⁶⁵

²⁶⁴ John Duffy, *A History of Public Health in New York City 1625-1866* (New York: Russell Sage Foundation, 1968), 165, 219.

²⁶⁵ For biographical information on John Griscom see: "Art. IX: A Year in Europe Comprising a Journal of Observations in England, Scotland, Ireland, France, Switzerland, the North of Italy and Holland in 1818 and 1819 by John Griscom, Professor of Chemistry and Natural Philosophy in the New York Institution; Member of the Literary and Philosophical Society of New York, &c. New York, 1820, 2 vols. 8vo," *The North American Review* 18 (1824): 178-179; D.T. Valentine, *Manual of the Corporation of the City of New York* (New York: Chas. W. Baker, 1868); *Common Council (New York)*, eds. Samuel J. Willis, David Thomas Valentine, Joseph Shannon, John Hardy, Otto Hufeland, (New York: The Council, 1842), 627; John Griscom, *Memoir of John Griscom, LL.D... With an Account of the New York High School; Society for the Prevention of Pauperism; The House of Refuge; and Other Institutions. Compiled from an Autobiography and other sources* (New York: Robert Carter and Brothers, 1859).

Information on Mrs. Bowering comes from *The Sunday School Repository; or, Teacher's Magazine* vol. 1. Commencing January 1813. (London: H. Teape, 1813): 276, 406-408. For biographical information on Dr. Alexander M'Leod see a book review by Joseph C. Cooper, ed., *The Evangelical Repository Devoted to the Principles of the Reformation, as set forth in the Formularies of the Westminster Divines, and Witnessed for by the*

Baker spent many evenings in Mrs. Bowering's parlor. An article published in the newspaper in April 1815 by a spectator gives us an idea of the motivations ordinary people may have had for attending a session of somniloquism. The author of the article, someone publishing under the initials W.R.D., had a friend come to his "lodgings" and invite him to call on a doctor purporting to be able to show "a moral phenomenon." The two friends went to the doctor's house, "took tea with his family, & were treated by the doct. with his usual urbanity." After listening to the doctor share his own ideas "marked with eccentricity" for some time, W.R.D. politely asked if he would be permitted to view the "singular spectacle" that the doctor –probably Mitchill – was exhibiting. The company headed over to Mrs. Bowering's home where they were "ushered into the parlor" into an audience of twenty to thirty auditors of both sexes. The doctor then "pointed out the phenomenon in Miss Rachel Baker, who, I perceived, was a fine healthy looking country lass, about seventeen years old." It was only then in the author's narrative that he was told that his newly discovered phenomenon was presently going to fall into a state of somnium and grace the company with prayers and exhortations. At around 8:40 p.m. Baker went to bed. She was allowed twenty minutes to go to sleep before the entire company "proceeded to the sanctuary of the same" where Baker was undergoing "divine convulsions." W.R.D. "approached close to the bed, where I found her placed with great care and decency; no part of her frame being visible but her head." As if the image of a bodiless girl praying while lifeless weren't disturbing enough "she uttered dreadful groans, and appeared suffering, acute pain – her features were violently agitated, but her eyes continued closed." Though her face and head were contorting violently, the rest of her body, which apparently was not covered enough, "was

Associate Synod of North America vol. 14 (Philadelphia: William S. Young, 1855); Samuel B. Wylie, *Memoir of Alexander M'Leod. D.D.*, New York (Philadelphia. New York, Charles Scribner, 1855), 535. For information on Dr. Nicholas Romayne see: James P. Warbasse, M.D., ed., *New York State Journal of Medicine* 8 (Brooklyn, New York: Medical Society of New York, 1908): 135-187.

tranquil as a statue.”²⁶⁶ This account is perhaps the best existing description of what it was like to see Baker endure somnambulism. It is a sketch of the intricacies of sociability in New York in the early-nineteenth century. The crowd of people standing “close” as possible to a young woman’s bed renders curiosity into a predatory act, sexualizing Mitchill’s moral spectacle and intruding on the most private of spaces. This, despite its claims to be for the moral betterment of society, was salacious reading and completely socially taboo, especially in terms of gender relations between men and women. Mixed company was one thing, but mixed company consorting together in the bedchamber of an unprotected, vulnerable girl in bedclothes? This was both morbid and provocative, shaming the very piety the experience was supposed to express.

W.D.R. thought perhaps Baker was suffering from a disease that the loquacious doctor might lecture on, but soon discovered that she was a sleeping preacher. After five minutes of agonizing convulsions, Baker fell into a “profound sleep” and “she poured out a fervent, well-connected prayer, that lasted about 12 minutes.” He was also surprised by her intellect. Baker “displayed an extensive knowledge of religious subjects, and developed the strength of her intellect.” She answered questions with the breadth of knowledge expected of “an experienced orthodox preacher.” The entire spectacle lasted for about sixty minutes. After the exhortations ended and Baker entered normal sleep, sociability returned to the company and a discussion was had about what the audience had just witnessed. W.D.R. let it be known that he had some experience with female preachers, having seen Joanne Southcote and Jemima Wilkinson. His intimate audience with these women evidently cast him as a Doubting Thomas when it came to Baker and his fellow voyeurs attempted to convince him she was experiencing “divine inspiration.” This argument was rewarded with a hideous pun on the part of W.D.R.: Baker was the most interesting “lay preacher that I have ever heard.” Painful as that verbal contortion must

²⁶⁶ “From the National Advocate: Miss Rachel Baker,” *Augusta Herald* (Augusta, GA), April 6, 1815, 2.

have been for his companions, the conversation about wonder carried on, with the author suggesting that laying down or not, “this moral phenomenon may become the immortal founder of a new form of worship, which for human convenience, novelty, and interest, has no parallel.” Genderless, person-less, and the ultimate *it*, Baker, at best, at least in this gentleman’s opinion, could only serve as an idol if she sacrificed everything identifying about herself.

This article would have had a fairly significant readership and it is certain that W.D.R. was aware of that. His last thoughts on Baker as a woman were that she held a quality so “seraphic in her system of piety” that she would not want for “protection and disciples among the population of this enlightened city.” W.D.R seems not to have been able to help himself from tipping over the edge into the blatantly erotic. Though Baker was “not gifted with extraordinary beauty” it was overly exciting to “behold her lying in bed, attired like a celestial bride with a modest night-cap on, from the sides of which and over her temples is perceived her fine auburn hair.” This image “awakens an interest such as before was never excited among a religious audience; and I confess, that when from her rosy lips, flowed the purest truths of our holy religion I should have deemed myself an infidel not to have knelt at her shrine.” There was something more going on than the exaggeration of effervescent religious erotic-aesthetic from the pen of a perverted rake. Claiming adoration beyond all on earth, W.D.R. expressed his love, or at least ill disguised sexual desire to engage with the unconscious Rachel Baker in her bed.²⁶⁷ If this was indicative of the nightly relations Baker claimed not to remember, then perhaps she was better off. But what kind of social relationships could a somnambulist have with no memory in a city of lecherous peepers getting their enlightenment from gazing on her corpse-like body while she spoke words from God?

²⁶⁷ “From the National Advocate: Miss Rachel Baker,” *Augusta Herald* (Augusta, GA), April 6, 1815, 2.

The Philosopher and the Peasant

Outside of her family and friends from Marcellus and Scipio, the authentic relationships Baker was able to develop seem to have been with her physicians – most importantly Samuel Mitchill, who staked a claim on her case and ultimately situated himself as the mediator between Baker’s oracular endeavors and public access to her thoughts. Mitchill described the onset of somnium in Baker in a very different way than her ardent observer did. The relative distance imposed by medical language between doctor and patient obscures the fact that Mitchill must have been in equally intrusive proximity to Baker’s vulnerable body. His role as a physician made it socially sanctioned. Mitchill was careful to exclude himself from his descriptions of Baker, writing as the empirical all-seeing eye of medical knowledge.

Baker’s paroxysms were “invaders.” They “invade her at early bed time” Mitchill wrote of the onset of her somnial devotion. “It invades her with a sort of uneasiness of the spasmodic kind, anxiety in respiration and hysteric choaking.”²⁶⁸ Sleep preaching did not emanate from his patient: it was a disease that ravaged her, that took her away from herself. It needed to be cured. There is no record to tell us precisely if Mitchill wished to cure Baker of her (second) self possessed right to speak publicly, or to cure her of the agony of doing so. The contortions and convulsions that characterized a somnial episode were described as painful, but Baker herself had no memories and no complaints. “She declares she knows nought of the nightly exercises, except from the information of others,” a puzzled Mitchill stated. “The vivid images” of bystanders ogling her eloquence “are as completely effaced as if they never had an existence.” “She complains not of pain, lassitude, nor any disorder,” Mitchill mused, even though her body

²⁶⁸ Mitchill, *Devotional Somnium*, 35.

was ravaged by rigid spasm of her back, finger, and leg muscles.²⁶⁹ Baker enjoyed absolutely perfect health, her religious exercises notwithstanding. Mitchill admitted her mental problems left a cure to be desired. The question of “if she possessed any consciousness of the transaction” was left unanswered and there were “no more traces in her memory of the occurrences in which she has been so profoundly engaged.”²⁷⁰ Mitchill’s belief in Baker’s memory loss regarding her somnolent state was so genuine he advised her to “take the recumbent posture; her face being turned towards the heavens” for modesty’s sake.²⁷¹

The amnesia placated any doubts Mitchill may have had about Baker’s potential flagrant dismissal of the edicts of Paul the Apostle. He did after all harbor an absurd and inexplicable belief that “the American continent was the Old World, and that the Garden of Eden might have originally been located in Onondaga Hollow.” According to his biographer in *Lives of Eminent Physicians*, “he imposed a tax on credulity too onerous to bear.”²⁷² Onondaga Hollow was, and is, alarmingly close to Marcellus – close enough to speculate that perhaps Mitchill was seeking proof of its existence. During her waking hours, Baker behaved as a proper woman was taught: “she laments her malady as a sore affliction; and considers it as a visitation upon her to punish her sins, or to try her constancy and virtue.”²⁷³ Curiously when she was ill, her devotional exhortations were interrupted. Measles, headaches, and fevers all prevented the gushing forth of public prayer. On this observation, no attempt at explanation was made. This did not stop

²⁶⁹ Mitchill, *Devotional Somnium*, 38.

²⁷⁰ Mitchill, *Devotional Somnium*, 39.

²⁷¹ Mitchill, *Devotional Somnium*, 36.

²⁷² Gross, *American Medical Biography*, 275.

²⁷³ Mitchill, *Devotional Somnium*, 42.

Mitchill and Dr. Luther Guiteau, however, from doing their professional best to cure Baker of her untoward habit of speaking her mind.

According to Mitchill, it was not until October 1814, when Baker was brought to New York that people began to see her somnium as something beyond a mental or physical disease. Her local physicians had phlebotomized her and applied their tinctures. No amount of blood letting or dose of laudanum would shut this young lady up. It was when heroic medicine failed to yield results that Baker's family in concert with Mitchill attempted something more radical: a journey by carriage for 300 miles to jar her from her "catenations of thoughts and actions." The "novolties [sic] of a crowded and bustling city," and the "humid ocean" with its "saline atmosphere" did little to shake the faith. A tour of road side taverns, "the mansions of hospitality in the metropolis," and a seaside vacation lacked their expected persuasive properties.

Mitchill went so far as to indulge in tasteless mesmeric behavior suggesting to her one evening "the propriety of remaining quiet during her sleep, like other persons, instead of talking so earnestly, and at such length." Alas, this instruction did not "break her Somnium." Obstinate, she replied that she was not asleep and exercised her reasoning in explaining why. She insisted that "the heavens were in full display before her; she beheld the dwelling of the omnipotent, and the celestial host in attendance" especially noting the "taste and skill manifested" in the fabric of their robes.²⁷⁴ With no somatic disease to be found and a productively instructive outcome from her nightly dominion, Baker garnered enough support to draw jeers such that one "as well might attempts be made to cure the sun of his brightness, or the vegetable tribes of their verdure" than

²⁷⁴ Mitchill, *Devotional Somnium*, 44-46.

to deny God's messages to Baker. And so she went back to Cayuga County "without having been advised by the consultation to seek a cure."²⁷⁵

Before her so-called cure Baker returned, with her father, to New York for education in February 1815, where "a few benevolent ladies took such an interest in her welfare, that they offered to patronize her, and provide for her if she would come and place herself under their direction."²⁷⁶ In May 1815, Baker was forced to leave her school due to a hemorrhage in her lungs. The hemorrhage, her doctors suggested, might have been caused by talking too much. By August, weakened and no doubt dismayed at losing her chance at a cosmopolitan life replete with education and sociability for society for young ladies, Baker went home.²⁷⁷

Dr. Roland Sears, a maternal uncle, allegedly cured Baker. Sears was born in Connecticut in 1792 before moving north to live in the towns of Norway and Russia, New York. The only known account of her cure appears in a letter exchange between Mitchill and Trenton physician, Luther Guiteau, who founded the Oneida County Medical Society and was a trustee of the College of Physicians and Surgeons of the Western District of New York.²⁷⁸ Ansel Ives took custody of the correspondence between Guiteau and Mitchill, some of which he published in his tract on Rachel Baker. Mitchill wrote to Ives directly telling him "I was in a situation to note well the facts and circumstances." He was less forgiving of the observers, whom he divided into

²⁷⁵ Mitchill, *Devotional Somnium*, 47.

²⁷⁶ Mitchill, *Devotional Somnium*, 46.

²⁷⁷ William Barlow and David O. Powell, "The Cure of Rachel Baker's 'Devotional Somnium' (Sleep-preaching)," *The Academy Bookman* 31, no. 1&2 (New York: Published by the Friends of the Rare Book Room in the Interests of the Library of the New York Academy of Medicine, 1978), 4. See also Ives, *Remarkable Case*, 404. To deter public interest in Baker while she pursued studies in New York City, an advertisement was run: "Notice. The ladies who have the charge and education of Miss Rachel Baker, during her stay in this city, by her parents and her own consent, wish to make known to the public, that, in future, *none are to be admitted to attend her Evening Exercises*. When a candid and judicious public take into their serious consideration the motives from which the ladies act, and the great inconvenience that private families would experience, it is to be hoped that none so prevented from attending will take the smallest offence." *Commercial Advertiser* (New York) March 27, 1815, 3.

²⁷⁸ Barlow and Powell, *The Cure*, 5.

“three classes; first, those who supposed the young woman an impostor, and all her performances a deception; secondly, those who considered her divinely inspired to preach the word miraculously, and warn sinners to repentance; and thirdly, those who thought her prayers and sermons but the symptoms of a disease, of which she might be cured as radically as of an intermitting fever, an epilepsy, or of any periodical malady.” Mitchill put himself in the last class, and though he failed to cure her, he was relieved that Baker has “found a friend of an intrepid spirit and sound judgment” in Dr. Sears. Written in July 1817, Mitchill attributed *Devotional Somnium* to John Douglass, though Mitchill wrote the bulk of the original material in the piece.

Luther Guiteau was one of the last physicians to have an audience with Rachel Baker after her time as a public preacher came to a close. He met with her in a public house on the road between Herkimer and Norway, New York. Baker was seeking relief from an “unfortunate state of mind, of which she was insensible, except from its effects in exciting public notice, and from information from her friends.” Even before her interview, she exhorted in the public house. It was the kindness of her chaperone and relation, Dr. Abel Baker, which allowed the interview at all. Guiteau noticed that a “degree of melancholy marked her face.” She must have been very melancholy indeed for Guiteau did not wish to agitate her by talking about her sleep-speech. Guiteau believed that Baker best fit into the somnial category of reverie, which did not involve a “total suspension or quiescence of volition.” Bypassing Baker’s own thoughts on her unusual nocturnal abilities, Guiteau boldly approached Sears to acquire the facts of the case. This otherwise ordinary country doctor evidently impressed Guiteau. He was adamant that Sears “deserves much credit for his skill in arresting the progress of a disease, which had excited alike,

the astonishment of the learned and unlearned, the philosopher and the peasant.”²⁷⁹ Evidently, once Baker arrived, Sears scared off the curious masses that showed up at his door – and not without some abuse from her religious followers who “supposed her divinely commissioned to instruct mankind.”²⁸⁰

It was very clear from Guiteau’s research that Baker was a depressed young woman. And so in July 1816, Baker took her cure. Being inclined to spend her waking hours in prayer and “under the influence of religious impressions,” Baker was instructed to change how much time she spent ruminating on religious matters. She was also told to engage with her waking devotions earlier in the day, presumably so they would not keep her up at night. Sears then began a course of treatment in which he dosed Baker with two grains of opium a few hours before her regular paroxysms. Once her somnial exhortations began, she would be splashed with cold water in the face “with force... which dissevered the chain of catenated motions.” Every time the spasms returned the cold water strategy was employed. During the day Sears administered “doses of camphor, castor, and gum foetida,” careful to avoid debility. This went on for approximately a week and then Sears, the spasm killer, “felicitated himself in their entire removal.” Guiteau was thrilled to report to Mitchill that, “Miss Rachel Baker now enjoys perfect freedom from her somniloquism.” Baker stayed with her uncle for pre-industrial cold showers and sedation until September 1816.²⁸¹ It was by these means that “these seraphic visions shall be dissipated and their organ reduced to the ordinary level of womankind.”²⁸² Thus Miss Baker, that organ, was cured permanently of speaking publicly.

²⁷⁹ Barlow and Powell, *The Cure*, 8.

²⁸⁰ Barlow and Powell, *The Cure*, 8.

²⁸¹ Barlow and Powell, *The Cure*, 8-9.

²⁸² Mitchill, *Devotional Somnium*, 46.

The Afterlife of Rachel Baker

Baker died in 1822 at the age of 28. She never married and seems to have spent her remaining years with her family, somewhere near Mitchill's Garden of Eden in upstate New York. Baker had a voice and she used it. Eventually her resolve and her determination to speak through the tool of somniloquism were worn down by patriarchal benevolence and cold buckets of water thrown in her face. The one thing in her life that made her unique and gave her a public identity in the urban world was about to be taken from her by physicians determined to smash revivalist fervor with somatic, secular medicine. As Mitchill said, she was an organ, just not for divine revelation. In New York City she was heard and protected by true believers. It was back on the frontier, in the town with the last chapel in the wilderness, where she discovered what it was to have feet of clay. Her death went unremarked by the curious followers who beat down her door a decade earlier. Because of a contemporaneous interest in double consciousness without mesmerism – and eventually in the context of hysteria and hypnotism later in the nineteenth century, Baker became a legend.

An article from the "Editor's Drawer" in *Harper's Weekly* published in 1851 is a fascinating example of how Baker's story was appropriated and twisted throughout the years following her death. The author loved a story: "I presume you remember the case of RACHEL BAKER, the Somnambulist-preacher, who some twenty-eight or thirty years ago, in one of the interior counties of this State attracted so much wonder and curiosity of the public." Perhaps many people did remember the sleeping-preacher, now sensationalized. Somnium was a lost battle. According to the newly wrought story, Baker was nothing but a poor, ignorant girl who could barely read the Bible and only managed "small understandings of the force and extent of its moral and religious teachings." According to *Harper's* Baker was more than an uneducated

woman: she became “the theme of almost every journal in the United States, and whose fame, or perhaps more properly notoriety, extended to England and France; awakening in each country elaborate psychological and physiological discussions concerning the nature of the peculiar case of ‘RACHEL BAKER, the American Somnambulist.’ Lady Liberty teaching those Europeans, inclined to magical thinking, about the real meaning of somnambulism. No mumbo jumbo mesmerism here. The author of the piece claimed to have been present when Baker first began to preach in her sleep, and took some lady liberties himself in imaging Baker’s experience, putting words in her mouth, attributing actions to her that never happened, and inventing a story in which he was there when the sleep-preaching began. As this story goes, the author found himself at the houses of the unidentified Mr. and Mrs. W--- G—s in Onondaga County. In their opulent home and especially opulent parlor, the author spent a summer evening in mixed company sitting near Baker, who got tired and went to bed. The author never forgot what he was permitted to see. “The face of the somnambulist, which, without being handsome was extremely interesting, was turned toward the ceiling; her large blue eyes were wide open, and their pupils seemed to fill the entire eye-balls, giving her what the Germans call an ‘interior’ or soul look. Her hands were crossed upon her bosom over the bedclothes; nor did she once move them, or her eyes, so much even as to wink, during the whole evening. And so tightly did she press them, that the blood settled for the time under her nails, and at length grew black like the fingers of a corpse.” She said something very lovely in her sleep-preaching: “Upon my young men and maidens will I pour out my Spirit and the young men shall see visions and the young maidens dream dreams.” This entire Harper’s piece is a fascinating tall tale meant to keep the reader awake all night, clutching the bedclothes and thinking lurid thoughts about corpse-girls dreaming dreams. It is clearly fictionalized, obviously so, in the context of the evidence. The author reported that Baker

somnambulated for a few months and then died the next year! This piece, however, cemented her as a somnambulist proper, and killed Samuel Mitchill's devoted somnium right and proper on the spot.²⁸³ There was even a painting done of Rachel Baker, displayed in the Wadsworth Gallery in Connecticut starting in 1845.²⁸⁴

In 1881, William Alexander Hammond wrote: "almost fifty years ago, a very remarkable case of preaching-ecstasy, or, as it would now be called by some, trance-mediumship occurred in this city in the person of a maiden lady, of delicate health, named Rachel Baker. Hammond got most of the facts of her life wrong, stating that she first became afflicted at the age of 20 and died in 1843. Regardless of his poor sense of research, Hammond used Baker as a precedent for his own current cases, as well as trance cases described by Reverend John Wesley. By 1881 a young girl who was cataleptic and "to all surrounding influences... apparently dead" was a good example of a "trance-medium."²⁸⁵

In the twentieth century, Rachel Baker all but disappeared. Though she left no written record, the evidence suggests, despite mediation by physicians, that she determinedly spoke for herself frequently and often. She was not a wild evangelist from the foreign frontier, nor did people think she was a full-blown somnambulist. Mitchill used her as a platform to advance an ambitious theory of sleep behavior that was eventually absorbed into a more compelling culture of artificial somnambulism and talking to the dead through cataleptic women mediums and paper

²⁸³ "Editor's Drawer," *Harper's New Monthly Magazine*, June to November 1851 (New York: Harper and Brothers, 1851), 420-22. John W. Barber also wrote about Baker, and was decidedly more modest about the facts. He still embellished and attributed untrue sensationalist elements to the sleeping-preacher, but did not imagine himself as a spectator at the historical scene. John W. Barber, "Rachel Baker, The Somnambulist," *Historical Collections of the State of New York; being a general collection of the most interesting facts, biographical sketches, varied descriptions, &c. relating to the past and present; with geographical descriptions of the counties, cities, and principal villages, throughout the state* (New York: Clark, Austin, & Co. 1851), 391-392.

²⁸⁴ *Catalogue of Paintings in Wadsworth Gallery, Hartford*, (Hartford, CT. Printed by E. Gleason. 1845).

²⁸⁵ William Alexander Hammond, *On Certain Conditions of Nervous Derangement, Somnambulism-Hypnotism* (G.P. Putnam's Sons 1881), 123-124.

letters arranged on table tops. By 1851 the true sense of religious wonder and horror people felt when they looked upon the curious body of Rachel Baker had long been lost. Pious wonder had turned into pulp sensationalism. The contrast between the decades could not be more stark or telling. In her own time, Baker truly was an influential woman, able to leverage the idea that there was no church in the wild to go to the city, get an education, and tell anyone who would listen what was on her mind. She won the medical game. Doctors diagnosed her, but her condition was physically un-curable. Psychological torture, physical illness, and damaging opiates at the hands of her family ended Rachel Baker. Thanks to Samuel Latham Mitchill and John H. Douglass's rational dedication to empirical observation, she lives on through *Devotional Somnium*, where all the tricks are transparent.

CHAPTER FOUR:

“ALL APPEARS AS A DREAM, WHICH HAS ALMOST ESCAPED MY RECOLLECTION”: MARY REYNOLDS, MEMORY, AND DOUBLE CONSCIOUSNESS²⁸⁶

The medical desire to explore and obtain authority over unconscious levels of mind is exemplified by a young woman in Pennsylvania named Mary Reynolds who was a full-fledged example of a phenomenon called double consciousness. Reynolds embodied the duality of self that was prevalent in somnambulism and was a more responsive subject for inquiries into volition. Reynolds, like Baker, would thwart all attempts by physicians to use her as a source of knowledge production: she refused to submit to their authority either. Her writings – especially her autobiography – show how she contributed to the medical professions’ decades long battle to force dual consciousness and somnambulism into diagnostic categories.²⁸⁷

Reynolds lived with two personalities from about the age of 18 onwards until her death in 1854. Her episodes began in 1811 and medical interest was firmly invested by 1816. Double consciousness was an uncanny manifestation of the larger gap between medicine and society during this time. Physicians were moving towards a stronger commitment to professional affiliation and pure scientific pursuit (with abundant lip service to the Enlightenment “Deity”) of the physiology of the body and mind. They pushed back against religious understandings of the soul (the former best container for consciousness) that had been perpetuated through generations of American Calvinists and Presbyterians. This is not to say that enlightenment was pitted against evangelicalism, but rather ideas about the mind as a material organ had changed starting

²⁸⁶ This manuscript source is in the College of Physicians of Philadelphia Historical Library and Wood Institute [hereafter cited as Wood: Mitchell MSS]. It is catalogued, and therefore will be cited, as follows: Silas Weir Mitchell, *Mary Reynolds: A Case of Double Consciousness*. Each subdocument has its own title and will be cited in full, then referred to afterwards as Mitchell, [document abbreviation], p. (if applicable). Several of the documents in the MSS have internal pagination. “Manuscript Letter from Mary Reynolds to her Nephew, John V. Reynolds; an autobiographical account of her illness (1836+)” has its own pagination which will be cited as Mitchell, *Manuscript Letter*, #.

in the 1780s and 1790s. Double consciousness emerged in the field of science of mind as a special proof of new elements of unconsciousness, leaving little room for authoritative religious interpretation. By the early nineteenth century unusual states of suspended animation and mental journeys to other realms could be explained somatically by identifying parts of the unconscious mind. Physicians still believed that disease was the work of God, but by 1800 they also believed that their unique training in medicine allowed them to access new kinds of knowledge about the connections between body and mind.

American society after the Revolution was loosely connected and unsure of itself. One cannot attribute a secular impulse to people so far separated by geographical distance they hardly knew how many others remained in the new nation.²⁸⁸ There was, however, a secular impulse within practiced medicine, which showed itself most strongly in physiology and in the humane societies, which placed the burden of life and death on people, rather than God. While religion remained an integral part of beliefs about leading a good and healthy life, the individual was assigned as warden of their own bodily health. One's soul after death, however, was still in God's hands. Somnambulism encouraged physicians to explore the structure of the brain in search of the duality of mind that emerged from the sleepwalking state.

In order to fully understand how somnambulism transitioned from a curious state of alternate consciousness to an irresolvable condition, thrust into a legal guardianship in the 1830s, sleep and somnambulism must be situated in the broader context of the history of mind in the United States between 1780 and 1840. Somnambulism exited the realm of suspended animation largely via a lengthy medical jurisprudence debate in the courts during the Abraham Prescott case in 1834, and eventually lost most of its allure once mesmerism and spiritualist mediumship

²⁸⁸ Gordon Wood, "The War of 1812" in *Empire of Liberty: A History of the Early Republic, 1789-1815* (New York: Oxford UP, 2009), 659-701.

became popularized after 1836. Sleep was a topic of widespread interest to the emerging American public during the early republic and early national period. Stories circulated in newspapers and medical journals about somnambulists doing dangerous or unusual deeds. Widely read texts from Britain and Europe such as Dugald Stewart's *Elements of the Philosophy of the Human Mind* (Vol. 1 1792, Vol. 2, 1814, Vol. 3. 1827) debated the inner workings of the mind and its faculties. Memory, imagination, moral judgment, reasoning, perception, thought association and many other sub-topics in what is now our canon of psychological theories provided grist for the American mind mill. The Enlightenment generated a great deal of interest in both the structure of the brain and its relationship to the elements of mind that had been observed in human action and thought. The unconscious mind was one of the most vexing and fascinating topics. How could the body act without direction from thought?

The science of mind – those queries that probed its being and absence – was practiced in the early United States within the parameters of medical education and medical literature such as Samuel Latham Mitchill's *Medical Repository* (1798-1824) and Benjamin Rush's *Lectures on the Mind* (1791-1812). There was a distinctive gap between theory of mind function and application to living patients. Anatomized brains provided limited, but valuable matter to support the heavily somatic theories of brain structure and, consequently, mind function, via parts of the brain known as faculties. Dissected brains lent themselves nicely to somatic approach American doctors had towards all matters of body and brain. What one finds in looking for a circumscribed history of American mind during the years prior to 1830 embodies *ex nihilo nihili fit*. This may as well have been American physicians' motto for the brain, as they generally agreed that it was the source for all thoughts and happenings in the body. Benjamin Rush drew his inspiration from Thomas Beddoes and David Hartley, his favored Enlightenment philosophers of mind and

medicine.²⁸⁹ The American approach to grappling with mind malfunction is well summarized in Norman Dain's argument: "the relationship between general concepts of disease and a partial recognition of the psychological nature of insanity is not altogether clear from the writings of eighteenth-century physicians." Incidences of insanity – which would include any behavior that was abnormal – were slotted into one of two systems: humoralism or solidism. Generally, physicians thought insanity to be a physical problem.²⁹⁰ While somnambulism was not a class of insanity, the two systems of interpretation were applied to all matters of mind.

By examining studies of sleep and double consciousness we can draw the map of a part of the history of American mind that has remained largely unexamined. Justine S. Murison's brilliant article on Charles Brockden Brown's Edgar Huntly and the centrality of sleep in disease theory in the early republic period is of value in pursuing this territory. Murison argues that the ideology of moral citizenship that Benjamin Rush advanced in his writings on education in the 1780s and 1790s "drew upon a peculiar medical construction of the mind, a discourse that depended upon somnambulism, in its turn, to prove empirically the existence of the faculties of memory and morality." She quite rightly identifies sleep as being the state most fascinating to explorers of the mind, stating, "although eighteenth century physicians did include limited therapeutic remedies for somnambulism, they are scarce in comparison with other mental

²⁸⁹ Eric T. Carlson, Jeffrey L. Wollock, and Patricia S. Noel, eds. *Benjamin Rush's Lectures on the Mind* (Philadelphia, PA: American Philosophical Society, 1981), 34-35. This work will henceforth be referred to as *LOM*. The lecture was titled "Sleep and Dreams," with the last known revision being made in 1809. "Hartley, is in some ways the most mechanistic and the most religious of all. His doctrine of association traces all workings of the mind to an origin in the simple impressions of external objects or forces upon the nerves." Roy Porter, *Doctor of Society: Thomas Beddoes and the Sick Trade in Late Enlightenment England* (New York: Routledge, 1992) provides more information on Beddoes contributions to philosophy of mind. Roy Porter, *Flesh in the Age of Reason: How the Enlightenment Transformed the Way We See Our Bodies and Souls* (New York: Penguin Books, c2003) remains one of the best sources on how the Enlightenment created the modern self through both body and mind.

²⁹⁰ Dain, *Concepts of Insanity*, 10-11, 24-25. While the introduction of moral treatment into American medicine helped ameliorate somatic treatments of insanity, it was still specified knowledge belonging to asylum doctors in the mid-1820s.

diseases of the era. Instead, sleep became the primary method by which sought empirical proofs of the mind.²⁹¹

Through the machinations of late twentieth-century history of psychiatry, Mary Reynolds, a preacher's daughter, became the poster child for Multiple Personality Disorder. Between 1816 and 1888, several studies were published on her case.²⁹² In spite of arguments by Ian Hacking, Adam Crabtree, and Henri Ellenberger claiming so, Reynolds' case is not about Multiple Personality Disorder, nor is it about the birth of a category that would not exist until a century after her death. Reynolds wrote an autobiography of her illness in 1836, recollecting the period of her life in which she adjusted to her unusual condition. Her autobiography was never published and only one historian has even bothered to reproduce any part of it in context. Reynolds' story in her own hand, of her own life, written to her nephew, ought to be seen as a lived experience of double consciousness, lacking third-party medical interests. Her record is the record of this gateway to the peculiarities of the human mind. Her challenges were the challenges of an American woman living on the frontier. Her autobiography reveals a world to us about how a young woman perceived her own mind, her own mental illness, and the place and time she lived in. How lucky we are to meet her, how privileged to have the rare opportunity to travel somewhere we've never been before. Hers is a story of patients and their doctors, of survival in the wilderness, of social life, and of memory. It is a true history. Reynolds, in many ways,

²⁹¹ Justine S. Murison, "The Tyranny of Sleep: Somnambulism, Moral Citizenship, and Charles Brockden Brown's *Edgar Huntly*," *Early American Literature* 44(2): 243-270; 244-45, 247.

²⁹² In chronological order: Samuel L. Mitchill, "A Double Consciousness, or a Duality of Person in the same Individual: From a Communication of Dr. Mitchill to the Reverend Dr. Nott, President of Union College, Dated January 16, 1816," eds. Samuel L. Mitchill, Felix Pascalis, and Samuel Akerly, *The Medical Repository; or Original Essays and Intelligence Relative to Physic, Surgery, Chemistry, and Natural History...* New Series Vol. 3 (New York: T. and J. Swords, 1817); Timothy Alden, "Letter Address to the Hon. Samuel L. Mitchill, M.D. Etc. of New York. Meadville, Penn. 21 June, 1816," *The Alleghany Magazine, or Repository of Useful Knowledge* 1, no. 1 (Meadville, Crawford County: Thomas J. Atkinson, July 1816); William S. Plumer, "Mary Reynolds: A Case of Double Consciousness," *Harper's New Monthly Magazine* 20, Issue 120 (May, 1860): 807-812; Silas Weir Mitchell, *Mary Reynolds: A Case of Double Consciousness*. (Philadelphia: Wm. J. Dornan. 1889).

demonstrates key elements of the history of mind in America, and her personal, life-long experience with double consciousness was a product of sleep, falling well within the categories of Mitchill's somnium.²⁹³

Rush's theories informed the circulating information on sleep and somnambulism in the United States for decades after he lectured on the topic to his students. The search for the mind is most prominent in Jane Rider and Mary Reynolds' cases. Rachel Baker's quest for a civic identity superseded accusations of illness for a time, even though she was eventually "cured." What the stories of these women tell us is that not only were physicians looking for proof of the mind through sleep states, but were particularly enthralled with the possibility of discovering proof positive of a mind in women. They were otherwise discouraged from having minds of their own and the somnambulism of these women in particular, challenged that injunction in a way that no other behavior, aside from perhaps preaching, could. Rush explored the somatic consequences of sleep in an attempt to schematize the mind and help elucidate the mechanical functioning of the faculties.

The Sleeping Point

"Sleep," Dr. Benjamin Rush told his audience of medical students in 1809, "has been said to be a tendency to death." The reason for this aphorism, Rush explained, was a just one. "The whole body is [in] a diseased state, when it takes place. I have called the disease of sleep morbidly natural." Undoubtedly to clarify his confusing point that sleep was a disease intended by the Deity to cure the disease of disharmonious debility that ravaged the body and mind during

²⁹³ Stabile, *Memory's Daughters*, 82. Stabile's book about the memories women in eighteenth century America imprinted in their furniture, personal effects, and architecture also provides a framework for situating Mary Reynolds writing. Reynolds wrote often to express her sorrow (or her joy) in acquiring a second self. The act of writing an autobiography helped her memorialize her first self, who eventually stopped surfacing. Stabile writes: "mnemonic theorists, faculty psychologists, and writing masters through the eighteenth century agreed that penmanship was integral to memory. In a reciprocal relationship, memory (the mental accumulation of images) and handwriting (the material manifestation of thought) were interdependent."

its waking hours, Rush drew an oracular analogy. “What are storms by sea and land, but diseases in the atmosphere, intended to preserve the purity of the water and the air?” he asked his pupils. He assured them “and yet these storms are all natural. An atmosphere uniformly calm, is unnatural.”²⁹⁴

For Rush the human body was much like a storm in its composition. The nervous fibers, tubes that funneled animal vitality through the body, were always contracting and constricting, expending and storing nervous energy. The state of irritability or debility afflicting the nerves explained all diseases; Rush had also, over the duration of his prestigious career, identified a host of stimulants and sedatives that caused over-excitability or lethargy of this vital system of human life. The body-storm was predicated on a clash of internal and external irritants and sedation. One’s moral habits and daily practice of cleanliness and good diet could calm the storm to a certain degree, but could not guarantee health. Rush did not believe that health was the natural state for American bodies. There were too many environmental factors contributing to daily debility, and a therefore less than perfect state of health. The body would respond to debilitating diseases either naturally, or through medicine. The definition of disease was more open ended. Rush proclaimed: “We are kept alive by our diseases, as certainly (though in less degree) as we are by air and aliment.”²⁹⁵ Sleep was one of the diseases by which people maintained life. In Rush’s estimation, it was perhaps the most essential.

Dr. Benjamin Rush was a Philadelphia-based physician and signatory to the Declaration of Independence. Like most of his contemporaries, he trained in medicine at the University of Edinburgh, beginning in 1766. His mentor in medical school was the famed Scottish

²⁹⁴ Rush, *LOM*, 391, 643.

²⁹⁵ Rush, *LOM*, 643.

enlightenment physician Dr. William Cullen, who inspired Rush's medical paradigm, which in turn dictated medical practice in the United States during the early republic and early national periods. Cullen first promulgated the doctrine that the nervous system was the source of all diseases and that illness was properly characterized in binary terms of overstimulation or laxity. Cullen believed that irritability was caused by environmental factors loosely related to an invisible effluvia analogous to aetherial or electro-magnetic fluid.²⁹⁶ Fevers were central to Cullen, and later, Rush's nosological systems. Treatments for fever, especially for yellow fever plagued Rush personally and professionally through the 1790s and beyond in the form of civil lawsuits demanded purging, blood-letting, or intensive sedation, now known as heroic medicine.²⁹⁷ Rush contributed significant foundational ideas to the debate over republicanism and moral citizenship. He believed that the constitutional unification of the former colonies into independent states operated much like a machine, and that citizens ought to be converted into republican machines to ensure the smooth and moral operation of an idealist, deistic governmental experiment.²⁹⁸ Rush was also deeply interested in abolition, education, humane

²⁹⁶ Roy Porter, *The Greatest Benefit to Mankind* (New York: W.W. Norton and Company, 1997), 260-262. See also A. Doig et. al. *William Cullen and the Eighteenth Century Medical World: a Bicentenary Exhibition and Symposium Arranged by the Royal College of Physicians of Edinburgh in 1990* (Edinburgh: Edinburgh University Press, 1993), 160-163, 234-244.

²⁹⁷ Benjamin Rush, like Samuel Latham Mitchill, remains a person of interest but little substantial scholarship in American history. Sufficient biographical information about his life can be found in David Freeman Hawke, *Benjamin Rush: Revolutionary Gadfly* (New York: Bobbs-Merrill Company Inc., 1971); Nathan G. Goodman, *Benjamin Rush: Physician and Citizen, 1746-1813* (Philadelphia: University of Pennsylvania Press, 1934); Alyn Brodsky, *Benjamin Rush: Patriot and Physician* (New York: MacMillan, 2013); For Rush's record of his own identity, see George W. Corner, ed. *The Autobiography of Benjamin Rush: 'His Travels Through Life' Together with His 'Commonplace Book' for 1789-1813* (Princeton: Princeton UP, 1948). See also Benjamin Rush, *Letters of Benjamin Rush* vol. 2. L. H. Butterfield, ed. (Princeton: Princeton University Press, 1951), 637, 640. For histories of yellow fever and heroic medicine see: Paul E. Kopperman, "Venerate the Lancet: Benjamin Rush's Yellow Fever Therapy in Context" *Bulletin of the History of Medicine* 78 no. 3 (Fall 2004): 539-574; Benjamin Rush, *An Account of the Biliious Remitting Yellow Fever, as it appeared in the City of Philadelphia, in the Year 1793* (Philadelphia: Thomas Dobson, 1794).

²⁹⁸ The best work written on the idea of "republican machines" is Colleen E. Terrell, "'Republican Machines': Franklin, Rush, and the Manufacture of Civic Virtue in the Early Republic," *Early American Studies: An Interdisciplinary Journal*. 1, no. 2 (2003): 100-132. For an expansion of Rush's political ideologies as applied to

penology, and especially the mind as it related to the function of the brain and insanity. In Rush's extensive writings on sleep, disease, and the mind, one finds a platform for American philosophy of mind that builds upon but also deviates from the European model of John Locke's tabula rasa, the mania/melancholy polarity, and humoral thought on species of insanity that dominated theories of mind prior to the nineteenth century. Vidal's summary of the shared transatlantic inquiries into mind is a useful context for thinking about Rush's theories throughout the 1790s throughout 1810. Vidal writes: "the development of psychology as a discipline, like the Enlightenment itself, displayed both considerable unity and national variations. Whatever their national origins, eighteenth-century psychologists championed empirical methods and shared a common Lockean heritage." This was as true for Rush as it was for Hume or Beattie. By the 1720s, European thought on psychology had shifted away from the "Aristotelian notion of the soul. Psychology was consequently the generic science of animate beings, serving as an introduction to the study of plants, animals, and man."²⁹⁹ One also sees a marked difference from his friend and contemporary, Samuel Latham Mitchill. Whereas Rush was a stringent republican moralist who tendered a polar-mentality towards disease, Mitchill was interested in somatic medicine, also a Deist, but something of tempestuous Romantic as well. He saw the operations of the world in a finer grain than Rush had.

Rush imagined the body interacting with the world in terms of impressions, each causing changes in the degree of excitability in the nerves. Sleep was a direct consequence of the daily impressions one received from environmental sources. It "affords the same repose to sensation

social control and societal operation, see Michael Meranze, *Laboratories of Virtue: Punishment, Revolution, and Authority in Philadelphia, 1760-1835* (Chapel Hill: UNC Press, 1996).

²⁹⁹ Fernando Vidal, *The Sciences of the Soul: The Early Modern Origins of Psychology* trans. Saskia Brown (Chicago: University of Chicago Press, 2011), 109-111.

and thought, or to the nerves and brain, that rest does to motion, or to the muscles,” Rush told his students in his lecture on the physiology of sleep.³⁰⁰ Sleep had both proximate and remote causes. Rush’s definition of the proximate cause of sleep is a somewhat fascinating move in medical advancement as he adapted John Brown’s system of degrees (based on the degrees of a thermometer) of debility to physical, measurable degrees of depression in the tissue of the brain.³⁰¹ Rush insisted that the “proximate cause of sleep depends, upon a certain fixed or determined grade of depression in the brain.” Though Rush noted that this determined grade of depression for sleep “has been called by Dr. Brown, the ‘sleeping point,’” Brown himself did not refer specifically to the brain as a tool for measuring debility in his *Elements of Medicine* (first published in Latin in 1780, and translated into English by Thomas Beddoes in 1795). The editor of the translated *Elements of Medicine* wrote in the preface of Brown’s commitment to the organ of the brain: “that the brain is an organ destined to secrete the matter of life, he could never have supposed, otherwise, he would not have expressed a doubt whether excitability be a quality or a substance.” Cullen, on the other hand, was more enthused about the possibilities to be found in the somatic structure of the brain. “It is, he says, ‘probable that the nervous fluid in the brain, is truly capable of different states or degrees of mobility, which we shall call its states of *excitement* and *collapse*.’ In his youth, this author had imagined a mechanical hypothesis

³⁰⁰ Rush, *LOM*, 624. Rush followed certain aspects of John Brown’s doctrine of irritability, though Brown was a notorious opponent of Cullen in the Edinburgh medical community. Brown wrote that sleep, among other bodily conditions, was a consequence “of the short application of a high degree of stimulus, operating an exhaustion of excitability.” John Brown, *The Elements of Medicine of John Brown, M.D. Translated from the Latin, with Comments and Illustrations* vol. 1 (London: J. Johnson, 1795), 18.

³⁰¹ Porter, *Greatest Benefit to Mankind*, 262. Porter explains John Brown’s otherwise opaque theory well: “Attempting to distil disease into medicine by the numbers, Brown envisaged a thermometer calibrated upon a single scale, rising from zero (‘asthenic’ disorders, lethal under-stimulation of the body) to 80 degrees (fatal over-excitement); the mid-point formed a healthy equilibrium. The device of a single axis objectified illness into something quantifiable, and pointed to a therapeutics dependent upon dosage size. For Brown, treatment was essentially a matter of larger or smaller measures of sedatives and stimulants, principally opiates and alcohol.”

respecting the nervous fluid, which he regarded with fondness through life, and unfolded with great prolixity in the decline of his powers.”³⁰²

In discussing sleep, Brown included a footnote stating that the point of “indirect debility, in which sleep consists, be at 15 degrees in a particular scale, and the greater debility, than that which either constitutes morbid sleep or morbid watching, be 20 degrees or upwards in the case of its being indirect, or 10 or downward in the case of its being direct debility.”³⁰³ Brown also tendered some notion that the “brain and alimentary canal possess more vivid excitability, that is, more propensity to life, than other internal parts,” but did not pursue this idea to its material conclusion, as Rush would.³⁰⁴ He was in fact puzzled as to the mechanics of brain debility writing “whether ever the general sthenic inflammation affects the brain and its membranes is hitherto not ascertained,” and defaulted to the hypothesis that “commotion in the head” did not “depend upon inflammation.”³⁰⁵

Rush seems to have reached his own empirical conclusions regarding the somatic manifestation of the sleeping point in the brain. He supposed it was “induced by an accumulation of blood in the nervous sinuses, and spinal marrow,” stating that this effect had “been demonstrated, by the dissection of persons who have died in their sleep.”³⁰⁶ Rush evidently had learned about the possibility of creating impressions upon the brain via an anecdote related by Dr. Herman Boerhaave, a leading physician and experimenter at Leiden University in the early part of the eighteenth century, who had related a case of a Parisian man who was paid in

³⁰² Brown, *Elements of Medicine*, cxxxviii, cxlvi, vol. 1.

³⁰³ Brown, *The Elements of Medicine*, 279, vol. 1.

³⁰⁴ Brown, *The Elements of Medicine*, 38.

³⁰⁵ Brown, *The Elements of Medicine*, 161.

³⁰⁶ Rush, *LOM*, 625.

exchange for experiments on his brain matter through a hole in his head (also the depository for the money he begged for).³⁰⁷ Rush had a proposition for establishing that depressions at a certain degree in the tissue of the brain were concurrent with the state of sleep. “In that grade of depression of the brain, in which sleep takes place, the nerves refuse to become the instruments of sensation, and the brain of thought.” More committed to accuracy than Brown, who nervously pegged the sleeping point at somewhere between 0 and 20 degrees, Rush decided that the grade of depression correlated with sleep would be “20° in the brain and nerves and wakefulness at 10° above or below it.”³⁰⁸ This was to be the sleeping point that Brown could not quite articulate and that Cullen imagined swimming in the secret nervous fluid housed in the brain. In a 1797 work on nervous debility, *A View of the Science of Life* (1797), Dr. William Yates imagined a more hierarchical and segmented chart of degrees of nervous irritability. Rush seems to have integrated Yates’s scale of excitability into his category of remote causes of sleep. Remote causes “act in a relative manner, according as the brain is elevated above or depressed below the sleeping point.”³⁰⁹

Yates, a British physician stationed in Calcutta, was understandably interested in contagious diseases local to the region, especially dysentery. He devised a chart which he titled “Of Proportions to be Observed in the Application of Stimuli to the Excitability” and assigned the numbers 1 through 40 to different aspects of stimulation and debility. Each side of the table had a different configuration for the degrees within the parameters. One through fifteen on the table were: “degrees of stimulus to be applied, to produce the greatest possible excitement” or

³⁰⁷ Porter, *Greatest Benefit to Mankind*, 246; Rush, *LOM*, 625.

³⁰⁸ Rush, *LOM*, 625.

³⁰⁹ Rush, *LOM*, 625.

“diseases of exhaustion, in their various degrees.” Sixteen through nineteen numerically described “appropriate degrees of stimulus” or “small degrees of exhaustion not containing what is commonly called disease.” As with Rush and Brown, 20 designated “appropriate degrees of stimulus, producing healthy excitement” as well as being the “middle state of the excitability.” Twenty-one through twenty-four were also “appropriate degrees of stimulus” or “small degrees of accumulation, not [illegible] what is commonly called disease.” The numbers twenty-five to thirty-nine were either descriptive of “degrees of stimulus to be applied, to produce the greatest possible excitement” or “diseases of accumulation in their various degrees. The number forty was equivalent to death.”³¹⁰ It is unclear from Yates’s writing what instrumentation was meant to measure these degrees. He must have also found the internal logic of the degree system questionable as he stated, “this Table is meant merely to convey a general idea of the manner in which stimuli should be increased or diminished in proportion to the exhaustion or accumulation of the excitability... The range of figures, is by no means sufficient to express the various degrees of accumulation and exhaustion of the excitability, that can take place between the middle state and death.”³¹¹ One element that was clear from this graphing of widely variant excitability was that the degrees beyond the sleeping point mapped a steadfast path to death.

Rush maintained a holistic perspective of the quaking, shaking, ultra-irritated body and extended it to the mind and brain. Though there were numerous remote causes of sleep – everything from opium to “the long and painful exercise of understanding upon any one subject” to “the relative effects of tea” – their effect on the degree of excitability needed to be a body

³¹⁰ William Yates, *A View on the Science of Life...* (Calcutta: Thomson and Ferris [s.n.], 1797), 18.

³¹¹ Yates, *A View*, 18.

wide event, especially if one wanted to “achieve perfect harmony” and reach the 20° of sleep.³¹² For sleep to succeed one had to make sure that any sleeping stimulant was evenly applied to “those great and extensive surfaces of impression.” Given that it was impossible to apply a stimulant to the brain in an even fashion – or directly, Rush’s edict must have been mainly theoretical. Naturally, achieving perfectly harmonious sleep was neither easy nor very practical, so Rush suggested that in order to harmonize the degrees of excitability of all parts of the body, the stimulant in question ought to be administered to the part that was left out. This neither supports nor contradicts his theory that gradations on the brain were the first cause of irritability in the faculties, but it is evident that remote causes of sleep were a matter of controlling the exterior, while proximate causes, more allied with the brain organ, were interior and required a different mode of treatment.³¹³

Rush taught his students that there was a “certain order in which the senses retire, or close themselves against external impressions.” The order of senses dozing off into obliteration would eventually come to factor into evaluations of somnambulists. Rush identified the order as such: the eyes, taste, smell, hearing, and touch. The muscles followed a similar orderly regime of indulging in that restorative disease called sleep. Arms and legs were the first to go, and were then followed by neck, and finally the back. Rush found it important to make the caveat that the back muscles could not always reach the sleeping point because often people were spotted sleeping in upright positions. “We see others sleep in a standing posture,” Rush pointed out, “as slaves when waiting upon table; and lastly we see some persons ride and walk when they sleep,

³¹² Rush, *LOM*, 628, 630.

³¹³ Rush, *LOM*, 630-632

particularly soldiers who have been deprived of their sleep; also those persons who walk in their sleep from the disease called somnambulism.”³¹⁴

Somnambulism was the disease that afflicted the disease of sleep. The mind had faculties located in different parts of the physical brain. Rush ranked the moral faculties at the top of his great chain of brain function, assigning passions to the lowest, most lurid ranks. When people woke up in the morning not only did she or he look terrible, but also had a disordered mind rattling around in the brain. Rush saw this initial waking state as something of a human embarrassment. “Middle aged people look older, and handsome people less beautiful in the morning, than they do after the stimuli of the day have acted some hours upon them,” he told his audience. While looks improved throughout the stimulating hours, “each faculty now settles, as if by a law similar to that which determine the arrangement and order of solid bodies by their specific gravities.”³¹⁵ One might suppose from this statement that the moral faculties were of some other, higher-ranking order than the somatic, but the general trepidation of material proof that populated thinking within the nervous debility paradigm makes it difficult for us to know with any certainty where in the body things were supposed to be. The major problem that needed to be resolved was not physically locating the faculties but rather figuring out how a restorative disease might be cured of the illness and delirium brought by the dreaming and somnambulism that plagued the ideal of harmonious health, like a chronic, phlegmatic cough.

Rush posed the usual questions: are dreams connected to sleep? Does “the soul sleep always,” where do thoughts come from? And so forth. Psychopannychism – that Puritanical abhorrence of the sleeping soul – was back in fighting form. Rush lacked Mather’s feral aversion

³¹⁴ Rush, *LOM*, 634-635.

³¹⁵ Rush, *LOM*, 645-646.

to soul-sleepers and his Calvinistic inclination to damn everything as a matter of course. Rather, Rush was a product of Enlightenment delicacy, carefully choosing anecdotes from classical works, such of those put forth by Herodotus, that the gentle vegetarians of Atlantis never dreamed at all. Dreaming was, in fact, thought of as a delirium of the irritated mind, and evidence against latter day psychopannychism. Rush quite liked John Locke's supposition that "the soul sleeps with the body when we do not dream" but did not agree with it. He blamed dreamless sleep on bad memory or lack of recollection."³¹⁶ The mechanical explanation was very plain: if you could not recollect your dreams you had a good indication that the part of your brain responsible for memory was "perfectly sleeping."

True to form, Rush produced a somatic explanation for dreams, explaining that "when the excitement of the whole brain is at 20, all its motions are mechanical, but when a part of the brain is elevated above, or reduced below that point, intellectual or mental motions will take place in the parts thus elevated or reduced."³¹⁷ If even one part of the brain were not at 20 degrees, the mind would produce effects such as dreaming. The dream within this system was "the result of mental disease" and the more totalizing the disease of sleep was, the more incoherent dreams would be i.e. if most of the brain was at 20 degrees, one might expect especially insane and ill connected dreams). The faculties of memory, imagination and understanding might all be working against each other at different degrees above or below the sleeping point causing foolish notions and incorrect recollections.³¹⁸ Somnambulism was what

³¹⁶ Rush, *LOM*, 647-650.

³¹⁷ Rush, *LOM*, 650-651.

³¹⁸ Rush, *LOM*, 651-652.

happened when the faculties of a sleeping person somehow conspired to function correctly together but at least some parts of the brain maintained their perfect sleep.

If dreams were “morbid thoughts” during sleep, then somnambulism consisted of “morbid actions.” The mechanics of somnambulism as posited by Rush made sense to many of his contemporaries who applied his theory happily to their somnambulistic patients and proceeded with emetic cures. The physiology of somnambulism was brain-based. It required “a preternatural excitement in certain parts of the brain, determining an influx of nervous power into the muscles of voluntary motion.” The sleeper had no conscious control over this mechanical accident of the mind.³¹⁹ Rush, who inspired Mitchill’s theory in *Devotional Somnium*, acknowledged that somniloquism was a real condition and very useful for extracting secrets. Somnambulists on the other hand “are those persons who walk in their sleep.” These were people whose actions were “irregular, consisting in walking in unfrequented or dangerous places, or in performing works contrary to their habits,” but, Rush conceded, “their actions are sometimes regular and rational.”³²⁰

Rush manifested some of the same concerns about somnambulists as those of his colleagues and fellow diseased sleepers. Somnambulism, according to Pinel, was a hyper-state of waking with the body and mind being more excited and presumably beyond the range of degrees of excitability, than any waking state. You might find a somnambulist to be pale, sweat soaked, boasting a “small, hard, and preternaturally slow” pulse. They “sometimes answer questions pertinently, and they do things of a mischievous or vicious nature, directly opposed to their

³¹⁹ Rush, *LOM*, 664.

³²⁰ Rush, *LOM*, 665-666.

ordinary principles and habits.”³²¹ They never got tired while somnambulating, probably because their brain and muscular excitement during somnambulism was regular, Rush supposed, unlike the irregularity of dreaming. Somnambulism was not dreaming. It was super-waking. In contemplating the “human body, deserted as it were by its soul, in a state of profound or perfect sleep; in which state I have said, even dreaming does not take place,” Rush had created a construct of a perfect sleeper – the somnambulist – without will or memory, who participated in “partial death” and lacked a soul.³²²

Mary, Mary, Quite Contrary

Mary Reynolds, expressive through a roar of men with editorial ambitions (and access to her personal writing), speaks most clearly for herself without the mediation of curious men craving the wonderful facts of her very peculiar case. In having written an autobiography of her own illness, she managed to subvert the control of the lineage of men who attempted to narrate her for their own ends. She spoke, and against the centuries long wash of misinterpretation and appropriation, was able to define herself most clearly in her autobiography as two women in one person, with several minds of her own. For Reynolds, writing her own story, which was then made public, was a way to claim selfhood during a time when women were still relegated to the narrows of second class citizenship: bodies with a head somewhere else – for better or worse – because attached to a man.

Mary Reynolds was born in Birmingham, England in 1793 to a Baptist grocer, William Reynolds, and Lydia Thomas Reynolds. The couple had eight children by the time they decided to immigrate to the United States, fleeing the Birmingham riots aimed at dissenters beginning in

³²¹ Rush, *LOM*, 667.

³²² Rush, *LOM*, 673-674.

1791.³²³ Reynolds was the second of the eight children, and closest to her oldest brother, John. Her parents sent her and John to live with their maternal grandfather in 1794 while the couple made the arduous Atlantic crossing. They landed in Lansingburg, New York, where William Reynolds, who had seen his house and all his property destroyed in the Birmingham riots, attempted to start a grocery business but failed due to lack of capital.³²⁴ In 1797 Reynolds purchased a tract of land from the Holland Land Company in far western Pennsylvania. The family found themselves at the cusp of the Ohio valley just south of Lake Erie and twenty seven miles from their nearest relatives in Meadville.³²⁵ The homestead was located in Cherry Tree Run, on the banks of Oil Creek River (later the site, along with Titusville and Meadville of the first US oil boom, in 1850). According to Mitchell's account of the Reynolds' family history, William took John with him to erect a log cabin on their tract, and left fourteen year old John alone in the heart of the wilderness for "four months" where he "rarely" saw "the face of a white

³²³ Michael Kenny, *The Passion of Ansel Bourne: Multiple Personality in American Culture* (Washington DC: Smithsonian Institution, 1986), 29-30. Silas Weir Mitchell, *Mary Reynolds: A Case of Double Consciousness*. (Philadelphia: Wm. J. Dornan. 1889), 2. Mitchell, *Manuscript Letter*, 1, Woods MSS. There is some issue with determining Mary Reynolds' exact date of birth. John Reynolds, her eldest brother was born in 1783 in Colchester, England. While the reports of Mary's case state that she was around 19 years old when she had her first episode, it is more likely that she was closer to 26 years of age. Mary herself wrote that she was "eighteen or twenty" when her second state first emerged.

³²⁴ Kenny, *Passion*, 31.

³²⁵ Samuel Penniman Bates, Robert C. Brown, and John Brandt Mansfield, eds. *History of Crawford County Pennsylvania: Containing a History of the County...* (Chicago: Warner, Beers & Co. 1885), 760-761. The Holland Land Company was a consortium of Dutch bankers who were responsible for selling over a million acres of land procured in the Holland Purchase (the Phelps and Gorham Purchase) in Western New York State. The Holland Land Company was unincorporated, and made up Dutch investors based in Amsterdam who relied on trustees in the United States to manage the land, as alien residents were not permitted to purchase the land. The land was initially under Iroquois title and became contested ground after the initial purchase in 1791. The case is extremely complicated and is mentioned only out of interest as one of the first surveyors of the purchase was Joseph Ellicott, a relation of the Reynolds and of Andrew Ellicott, which no doubt influenced William Reynolds' decision to move his family to the frontier in 1789. For histories of the Holland Land Company and the Holland Land Purchase see Laurence M. Hauptman, *Conspiracy of Interests: Iroquois Dispossession and the Rise of New York State* (Syracuse: Syracuse University Press, 1999); William Chazanof, *Joseph Ellicott and the Holland Land Company: The Opening of Western New York* (Syracuse: Syracuse University Press, 1970); Orsamus Turner, *Pioneer History of the Holland Purchase of Western New York* (Buffalo, NY: Jewett, Thomas & Co. 1849); M. Ruth Reilly Kelly. "'Rightfully Theirs and Valid in the Law': Western Pennsylvania Land Wars, 1792-1810," *Pennsylvania History* 71, no.1 (Winter 2004): 25-51.

man” but was “frequently visited by Indians.”³²⁶ William returned with the rest of the family, who had been waiting for him in New York City. The prosperous Calvinist merchant from Birmingham found himself and his family very much isolated in a dense and hilly region with few roads and even fewer neighbors. They were pioneers on contested ground where ownership was questionable and the rights of settlers uncertain. This was the same part of the country that Rachel Baker came from, the towns of Marcellus and Scipio also being included in the Holland Purchase.

When Mary Reynolds wrote her autobiography in the form of a long letter to her nephew, John Van Liew Reynolds, she had entered into what her family referred to as her “third state.” In 1829, she passed into her second state permanently. This would last twenty-five years, the remainder of her life. She died in 1854 in the middle of her normal routine, with her rumored last words being “Oh! I wonder what is the matter with my head!” In those years, which included the writing of her own story, she was “rational, industrious, and very cheerful, yet reasonably serious; possessed of a well-balanced temperament and not having the slightest indication of an injured or disturbed mind.”³²⁷

Reynolds described the first years of a life lived between two states. She wrote that returning to her first state for the first time, “the cloud which had overspread my mental hemisphere dissipated, my kindred and friends were at once recognized.”³²⁸ And as her neighbor Reverend Timothy Alden had taken note of, sleep was becoming a harbinger of great loss. “These transitions always took place in my sleep, in jumping from my second to my first state,

³²⁶ Mitchell, *A Case of Double Consciousness*, 2-3.

³²⁷ Mitchell, *A Case of Double Consciousness*, 18-19.

³²⁸ Mitchell, *Manuscript Letter*, 1, Woods MSS.

nothing was particularly noticeable in my sleep; but in passing from my first to second state, my sleep was so profound no one could awake me. And it not unfrequently continued eighteen to twenty hours.”³²⁹ Her description of her suffering was her own however. “I had some presentiment of the changes, from several days before the event. My sufferings in the near prospect of the transition from within the one or the other state were extreme particularly from the first, to the second state, when about to undergo the change.” Reynolds’ first self did not know what being her second self was like. All she could do in her first state was dread the loss of the totality of her life as she knew it. Her friends and family had told her stories about her second self, but they must have remained stories. The transition caused her to lament she would not “know again in this life those who were dear to me, my feelings in this respect, were not unlike one who was about to be separated by death.”

From her second state, she harbored rather different opinions about the people around her writing that “I felt perfectly free from any trouble... my feelings were such that had all my friends been laying dead beside me, I do not think it would have caused me one moment of mind.”³³⁰ The second Mary was very self-oriented. In her second state, she did as she pleased and spoke freely, rejecting all the conventions imposed on all the women within her family and social sphere; in doing so, she developed what might be called a super-self. It was an identity without memories, at least initially, but one that was fully able to assert itself through freedom of speech and action.

³²⁹ Mitchell, *Manuscript Letter*, 3, Woods MSS. The language here is exactly the same as Mitchell’s or Alden’s. While we cannot know with certainty, Mary may have referred to their descriptions of her to narrate her own experience. As she was writing from her second state, she would have had no memory at all of her other life.

³³⁰ Mitchell, *Manuscript Letter*, 3, Woods MSS.

Though she thought of her condition as a “disease,” she did not say what kind of disease she thought it might be. Sharing an anecdote, Reynolds revealed the extent to which she desired freedom from parental strictures and from biblical scripture. Her mother had tried to teach the second Mary what was appropriate for women. “She told me that I had said those would not work must not eat,” Reynolds recollected, and she responded: “I told her it made no matter of difference to me what Paul said. I was not going to work for Paul or any other person. I did not know who Paul was, for I had no knowledge of the Bible.”³³¹ The second self was utterly free from obedience. She did not know doctrine and she had never heard of Paul the Apostle who enjoined women to stay silent. This was something she used to its full advantage. Mary Reynolds echoes *The Prodigal Daughter*, rejecting her parents’ attempts at discipline and faith for the temptations of night wandering, pranks, and poetry. Rather than entering into a pact with Satan, however, Reynolds simply explored the world anew from her second state and did not find any morals worth imparting to a curious audience. This was a marked change in the life of a woman who was behaving outside of expectations.

Reynolds was so offended by her mother’s attempt to help her lost daughter behave correctly in a remotely located society, that she engaged in her own form of domestic disobedience. She refused to eat her mother’s food, and went to her sister Lydia, who fed her. “Whenever your aunt would bake, she used to provide for me, and continued to do so for some length of time,” Reynolds told her nephew. “I lived upon very little, have wondered how I could live upon the little food, and sleep which I did. For two or three days and altogether I neither ate nor slept.”³³² In her second state, she must have been something of a terror to her family. She had

³³¹ Mitchell, *Manuscript Letter*, 3, Woods MSS.

³³² Mitchell, *Manuscript Letter*, 4, Woods MSS.

little regard for the feelings of others and “would embrace every opportunity to escape from them” One night she hid in a chest of wool in the upstairs in the house and slept there, while her family searched for her. She was “very much disappointed to find I was detected.”³³³ The second Mary, discharged from the responsibility of knowing things and performing her domestic chores, sought constant escape from the watchfulness of her friends and family, putting herself in dangerous situations frequently.

Reynolds recounted one episode of meeting with a rattlesnake on one of her rambles in the woods. The episode of the rattlesnake has been cited by every author who took custody of her story later on, no doubt because it contained an apt moral message about Eve and the snake in the Garden of Eden: a second self, devoid of knowledge, was free to learn about the world outside of scripted gender and social roles and that knowledge could be a very dangerous thing to the social order. Reynolds wrote that she found the snake and thought it was a “beautiful creature.” She tried to grab it and it slithered into a hole where she could not grasp it. This was simply an example of doing dangerous things in a state of ignorance. To the many men who latched onto the story, it was nothing short of original sin.³³⁴ Reynolds told her nephew of the many occasions where her life was in serious jeopardy. Once she was riding carelessly through a “most dismal hollow between two hills” and came upon a bear, which blocked her path. She “shook her whip at it” and proceeded on her way. Every source that recounts this story adds in that it was a “black hog” although Reynolds does not mention a hog at all. She was given to

³³³ Mitchell, *Manuscript Letter*, 4. Woods MSS.

³³⁴ Mitchell, *Manuscript Letter*, 4. Woods MSS.

night rambling (although not somnambulism) and often crossed Oil Creek in the dead of winter, when icy water and collapsing bridges posed grave threats to life and limb.³³⁵

Reynolds craved the comparative excitement of the nearest town of significant population, Meadville, which was approximately twenty-seven miles away from their homestead at Cherry Tree Run. Her older brother John had moved there in 1805 to work as an assistant teacher before becoming a surveyor for the Holland Land Company. He eventually returned to Meadville to pursue law and passed the bar in 1812, but devoted his professional life to real estate. He married a widow in 1814.³³⁶ Reynolds favored him most in both states, and he was the person whose company she sought most frequently. She wrote about her constant surveillance and her increasing desire for freedom. “I at length became rather too cunning for them. Knowing they kept such a strict watch over me I began to form plans,” she reminisced. “I had a great desire to come to Meadville.” She succeeded in borrowing a neighbor’s horse – one belonging to Mr. Hamilton – and making it to Meadville before she was found out. It was her first trip there and she wanted badly to go back. She told Mr. Hamilton that “I had escaped from that nocturnal retreat and found a more salubrious clime, and had exchanged those sons of Jupiter for a more intelligent race of beings.”³³⁷

From Reynolds’ escapades, we learn a great deal about what life was like for an unmarried woman from a family of some means living on the frontier. During one of Reynolds’ sojourns to her second state, which lasted five weeks, John’s wife Jane Kennedy (then fiancée) was quite ill and was permitted to stay with John in his home in Meadville, though they slept

³³⁵ Mitchell, *Manuscript Letter*, 5, Woods MSS.

³³⁶ Bates, *History of Crawford County*, 761.

³³⁷ Mitchell, *Manuscript Letter*, 7, Woods MSS.

separately, and had a friend to chaperone. Reynolds became quite attached to the chaperone, only identified as Miss Drury, or Dewey, with whom she formulated many tricks and schemes to play pranks on her brother. The network of friends and blood relatives who lived together was extensive and quite lax in some regards. Reynolds switched back into her first state in her sleep (the night she was to tie her brother to a chair in his sleep) and woke up confused by her surroundings, for she had never seen them before. She returned to the family home in Cherry Tree, and quickly reverted back to her second state where she picked up right where she had left off mid-prank. Upon realizing her conditions, she attempted to get back to Meadville as quickly as possible. She wrote “I exclaimed what a change transmigrated from the height of happenings into these nocturnal regions, when nought but suffer silence, and death like inactively slumbering. Durst I could not think of spending my days among these poor half-awakened sons of Jupiter.” When it was possible to travel by sleigh, she was allowed to return to Meadville.³³⁸ She was incessantly bored, while in her second state, with “those poor stupid sons of Jupiter, which inhabited this part of the globe.”³³⁹

While she waited to return to society, Reynolds in her second state let her opinions about many things be known. One of the topics she had strong opinions on was religion. “My father’s house was the general stopping place for Clergy Men,” she explained, “His house was open to all. As at that time there was no stated preaching in that part of the country” preachers would sometimes stay with them for several days to minister. There was one particular “Gentleman,” whom Reynolds was “prejudiced against” so “[I] generally spoke my mind pretty freely.” Not caring at all about his purported authority – which she would have done if in her first state – she

³³⁸ Mitchell, *Manuscript Letter*, 8-9, Woods MSS.

³³⁹ Mitchell, *Manuscript Letter*, 9, Woods MSS.

remembered, “I told him I was inclined to think he was one of the wolves disguised in sheep’s clothing spoken of the Prophet Ezekiel.”³⁴⁰

Due to the lack of structured religion in their frontier settlement, William Reynolds hosted informal sermons at the Reynolds’ home on Sundays. “My Father frequently invited the neighbors upon a Sabbath to his house as there was no stated preaching, and he would read a sermon, and pray. We generally had a full house. I used to become very weary at such times. I’d not like to be still long at a time,” she remembered. She interrupted her father “telling him that I thought he had preached long enough.” She had the desire to comment on the discourse, and spoke out when she felt like it. “My friends have said,” she wrote, “that my remarks upon some parts of subjects would be very just, but some times rather singular.” Living in a Calvinist household of dissenters, it must have been extremely untoward and shocking for a daughter to interrupt her preaching father in front of the entire community. Doubtless, Reynolds’ parents felt a need to leave their prodigal daughter behind on occasions when they went to Titusville for religious meetings – a place where her condition might not be so easily comprehended. She recollected that on one of these occasions, being sorely disappointed, she had a dream where her deceased sister Eliza guided her to a preacher who taught her the bible. She mischievously recounted to her nephew that “the next morning I related my Dream to the family and assured them I had been to a much more splendid meeting than the one which they had been to. I was exceedingly pleased and gratified with this vision of the night.” If Reynolds was to be excluded from public discourse on matters of God, she simply dreamed a better meeting where she stood apart from the general company in enlightened defiance.³⁴¹ This incident hearkens back to the

³⁴⁰ Mitchell, *Manuscript Letter*, 10, Woods MSS.

³⁴¹ Mitchell, *Manuscript Letter*, 14, Woods MSS.

trance narratives of the eighteenth century, which people used to claim authority over theological knowledge. Reynolds did not need a trance to speak her dreams to her family. Her defiance was a part of her second identity.

Men professing religious authority were not Reynolds' only targets while in her second state. She also declared war on the doctors who were desperately trying to cure her of her outspoken, independent second state. Her most noted doctor was Dr. Daniel Bemus, resident of Meadville, but trained under Benjamin Rush in Philadelphia.³⁴² After his medical residency, he returned home and started his practice. He was chief surgeon of the division headed by Major General Mead, founder of Meadville, during the war of 1812 and became a trustee of Allegheny College before eventually expanding his business into lumber, cloth, flour, and oil mills in the late 1820s.³⁴³ Dr. Bemus was a proponent of Rush's heroic medical regime of purging and bleeding. Mary was not about to allow him to usurp her agency with his lancet. She recounted one trick she decided to play on Bemus to manipulate him under her control. "At another time I thought to make the Doctor an April fool. Accordingly I sent for him knowing he was in the habit of bleeding me when I would go from my second to my first state." Reynolds was aware he knew "I had a great aversion to being bled when in the second state so I proposed to Miss Drury that I send for the Doctor to bleed me." When Dr. Bemus arrived, Reynolds "put on a very sober face" and told him that she "wished to be bled." Bemus was pleased to find that his patient had returned to her original state, when she had in fact, not. He asked Miss Drury to bring a bandage

³⁴² Kenny, *Passion*, 40. Kenny describes Bemus's medical strategy as follows: "Not being aware that he had a case of 'multiple personality' on his hands, which for posterity would have made him famous as the describer of one of the most unusual psychopathologies known, he proceeded to deal with Mary Reynolds in terms of what he had learned from his own great teacher..."

³⁴³ Thomas Waln-Morgan Draper, *The Bemis History and Genealogy Being an Account in Greater Part of the Descendants of Joseph Bemis of Watertown, Mass.* (San Francisco, CA: [np], 1900), 45. "Bemis" is probably the correct spelling of the name, but for internal consistency with the primary source, I will refer to Dr. Bemis as Dr. Bemus, using Reynolds' spelling.

and the materials required to prepare her arm for the bloodletting. Reynolds, much amused at her prank many years later, wrote: “when he was about to make the incisions I jumped from my seat requesting him to wait a moment. I went to another room took off the bandage then returned reminding the Doctor that it was the first day of April.” Bemus was likely not amused and Mary’s statement that “you may imagine he looked pretty foolish” while the women laughed “heartily at him” was a fair assessment of the doctor’s annoyance. She remembered, “he had often told me it was impossible for me to deceive him.” Perhaps to leave no room for her physicians to question her authority as a patient, she afterwards sent for Dr. Bemus’s assistant, Mr. Blossom, and “acted over the same farce with equal success.” She clearly did not think of herself as diseased while in her second state. “You may be sure that the two Doctors felt pretty cheap,” she proudly wrote.³⁴⁴

On another occasion, reminding the local physicians that it was she who called the shots over her own body, Reynolds played another prank on the apparently dim-witted Mr. Blossom. “It was a bitter cold night, the thermometer was several degrees below zero,” she noted. “I made him suppose there was a sick man and called him up at midnight. He was very unwilling but I insisted he must go, that it was a Militia Man, and he must take some laudanum with him.” Reynolds had disguised herself in a cloak and hat, stuffing her mouth with an object to muffle her voice. Mr. Blossom went to the house of Mr. Freeman, whom she had selected as the target of the midnight call, and found that there was no sick man on the premises. Reynolds’ sister-in-law, told Blossom that it was Mary and she was “plagued considerably” about “using the curry comb” after her trick.³⁴⁵

³⁴⁴ Mitchell, *Manuscript Letter*, 16, Woods MSS.

³⁴⁵ Mitchell, *Manuscript Letter*, 17-18, Woods MSS. “curry-comb | curry-comb,v.” *Oxford English Dictionary Online* (Oxford: Oxford UP, 2014). It is difficult to know exactly what Mary meant by being plagued with using a

Reynolds, in her second state, was fond of writing satirical poetry about her physicians as well. She wrote one called “On Doctor Blossom.” While not a good poem, it did immortalize an incident where Dr. Blossom woke up to find that rats had chewed on his face in his sleep – an incident that Reynolds remembered with amusement. The poem is as follows: “Twas on a Sunday morning / A Blossom were a sleighing / Tho it was sadly storming / Instead of justly praying / and so you want of (illegible) / upon that holy day / He much to liquor drinking / And then without delay / to bed he were and snoring / All in a piteous plight / his wickedness deploring / and with the rats to fight / And as he lay so sweetly / All in a pleasing sleep.”³⁴⁶

According to Reynolds’ account of her double consciousness, she was also a somniloquist. Family and friends often thwarted Reynolds’ plans as they heard her talking about them in her sleep. Reynolds expressed regrets over her sleep-talking habit, which curtailed her freedom and derailed her mischief. “When in the early period of my disease I was so in the habit of talking in my sleep that I would communicate all my plans.” Her friends “frequently overheard” her and “watched [her] movements by that means.” Reynolds acknowledged that “I have been spared many unpleasant excursions both by day as well as by night” but as her second

curry-comb. A curry-comb is a coming grooming brush to remove dried dirt and debris from horses. It is unknown if it was also used in medical procedures, or if this was a mistake Mary made in naming an object. The OED entry has not been updated since 1893, but to curry-comb someone in this time period seems to reference physically punishing them. See this example from the *Dictionary*: “1809: Scott in *C. K. Sharpe’s Corr.* (1888) I. 366, ‘I would willingly embrace your offer of curry-combing Miss Owenson.’”

³⁴⁶Mitchell, *Verses by Mary Reynolds in her State of Double Consciousness; a Diatribe Against Dr. Blossom, Bemus’s Assistant*, unnumbered, Woods, MSS. Mary’s doctors made every effort to restrain her movements and she greatly resented her imprisonment. This was verified in a letter written by Alexander Reynolds, another of Mary’s nephews to Mitchell. He reassured him that Mary did not like Dr. Blossom and recounted at the time Mary played the midnight prank on him, “it was the Dr. who had the control over her.” Mitchell, *A Second Letter to S. Weir Mitchell* (April 23, 1833), 13, 16, Woods MSS. He also mentioned that to circumvent Blossom’s command over Mary’s confinement, she would talk to neighbors through their windows, as she was not permitted to visit them in their homes. Kenny, *Passion*, 42. Another one of her poems Mary Reynolds wrote was about liberty with lines such as “The Doctor thinks he has a right / to be obey’d forever / But were I only out of sight/ I’d take my fill of pleasure.” She also wrote a poem about her treatments. “Calomel, Tartar and Gamboge / He deals me out good measure / could I the dose to him infuse /Would be to me a pleasure. / Blisters and Drafts he makes me wear / For days and nights together / Oh! had I wings to take me where / I could enjoy some pleasure.”

state developed and progressed and her “mind became more composed” she “ceased talking in her sleep” and continued to succeed in her acts of small rebellion, against an oppressive male-dominated authority that continually tried to restrict her personhood and her liberty.

The writings left behind by Mary Reynolds are written as fond memories in the spirit of truth. It is clear from her anecdotes that she relied on community lore for many of her statements about her first, or original state. The letters that remain from that state reveal a sweet and loving daughter and sister who wished for peace to return to their corner of the world – both in her own body and in the nation. Like Rachel Baker, Reynolds was another young woman who craved adventure and a wider world from her outpost on the frontier in the middle of the war of 1812. In a letter she wrote to her brother John from her first state, Reynolds provided some insight into the world her second self yearned to escape from. “Calamity comes upon us like a thief in the night,” she wrote, “and from a quarter we do not suspect. War, destructive war has again invaded our once peaceful land and what the even will be we know not.”

She pleaded for an end to the uncertainty of battle and to live quietly: “Oh that the Olive branch of peace would once more spring from her native heaven and spread over our Continent.” At the time she wrote this letter, Reynolds had just woken up “and required my recollection but I feel very low Spirited though you will think wrong of me to give way to it, but my Brother there is none who knows my feelings.” She wished for “the Lord” to restore her to the “former use of my reason” but acknowledge that she was at the mercy of the Lord’s will.³⁴⁷ Even from her more jovial second state, Reynolds was wistful for the silences in memory and the self she could not remember. Speaking as an older woman, and one who was a second incarnation of herself she wrote to her nephew “it would be a great satisfaction to me if I could once more be in full

³⁴⁷ Mitchell, *Manuscript Letter from Mary Reynolds to her Brother [copy by John V. Reynolds] (1812-1815) January 14, 1813*, Woods MSS.

possession of these faculties of memory, which I once possessed. The two states have become so combined that there is but little difference excepting the loss of recollection.”

If Reynolds saw her two selves reunite in 1836, then both had sacrificed clarity of memory. “At this present time some things will recur to my mind, but do not actually know whether they can be fact or whether I have dreamed for they are much confused for me to communicate and all will again vanish from my mind.”³⁴⁸ She may have had hazy recollections of her first state, and forgotten incidents that occurred while in our second. In this way, Reynolds is a microcosm for history and for the plotting of a story that can be pulled from a busy world of synchronous events and turned into a coherent narrative. What we can suppose, at least from Reynolds’ perspective, that living in two worlds and two memories, was not a form of madness or derangement, but a kind of memory mirror with two selves looking at one another and no way to determine which is the reflection of the other. Through the many stages of her long and contented life (which she spent as an aunt to her nephews and nieces in the Meadville home of her brother John, and her brief, and ordinary death) her memories followed one another, some getting lost along the way. Did she lose an entire self when she permanently entered her second state? Don’t we all when we forget who we used to be? To this day, Mary Reynolds, whatever her motivations were in both of her states, triumphed over an authoritative patriarchal world of fathers and brothers, clergy and doctors. She spoke, she wrote. She was silenced and rewritten, but her autobiography – her little store of self knowledge – survived, and in writing it, so did her all of her selves with their yearning for a different kind of life as a woman.

Reynolds was a strange sleeper and her case, as sometimes happens, and trickled into a different tributary than the one it was intended for. While her truly interesting double consciousness was a seed that justified theories of multiple personality, what a close reading of

³⁴⁸ Mitchell, *Manuscript Letter*, 15, Woods MSS.

her own life reflects is not many personalities but a meditation on memory and self in the early national period. Sleep allowed Reynolds to transition from self to another, and much can be gleaned about what memory meant to American women and men during this period. Her case exemplifies the history of memory and its place in mind. While her brain was not examined for depressions of gradation during different periods of sleep, Reynolds' case of double consciousness can be explained by Rush's theory that parts of the brain, responsible for memory, could become stuck at the sleeping point, while the rest of the faculties were awake and active. Given that Bemus was trained by Rush and that this was the most thorough theory that physicians had access to, Reynolds may have, according to available medical theories of mind/brain – at least by Rush's definition of it – been a somnambulist for her entire adult life. No decision was ever definitively made in her case. There is no way to tell if her physicians, for example, found proof of the mind in Mary Reynolds, although its vacillations may have done much to stymie interest in continuing to seek out the elusive material thing called mind that nested in the folds of the brain.

The broad interest in her situation and the lack of agreeable remedies reveal the extent to which medical queries of the mind was limited in the United States during this period, especially given the preeminence of heroic medicine. The fact that she remained in the care of her family and was never experimented upon attest to a change in the way that the mind was dealt with between 1811 and 1836. If she had experienced her painful fits and headaches later in her life, and split into two people then, she may have ended up in a very different situation. Reynolds was still living at the tail end of the American enlightenment, however, where her curious condition fed the curiosity of genteel people establishing a foothold in what they saw as a savage country.

If nothing else, Reynolds, who never married – by choice it seems – enjoyed a freedom very few women were able to procure: the freedom to act and to have it be remembered.

Memory, or the “Vagaries of Hysteria”

“I wonder skeptically: why has it been essential to organize so many of our present projects in terms of memory?” Ian Hacking muses in his work on the history of Multiple Personality Disorder, *Rewriting the Soul* (1995).³⁴⁹ “I wonder,” he continues, “why there is one creature, “memory,” of which there are so many different kinds.”³⁵⁰ Hacking, intrigued by the history of somnambulism from the position of a philosopher, played with it a bit in *Rewriting the Soul* and revealed some insights into the theoretical landscape of the transatlantic history of somnambulism prior to the thrust of hysteria and hypnotism that came forth in the mid-nineteenth century.

Hacking takes Adam Crabtree’s concept of “symptom language” from *Multiple Man*, and elaborates it into a Continental/Anglo-American divide. The “language of spontaneous somnambulism,” which was “strongly connected to the language of artificial somnambulism” was a way of speaking about sleep-behavior in Enlightenment Continental Europe. The Anglo-American way, Hacking argues, was to speak of somnambulism in the “language of double consciousness, which was largely separated from animal magnetism and hypnotism.”³⁵¹ This statement is half true: somnambulism in the Anglo-American domain was not associated with animal magnetism or hypnotism. “Double consciousness,” however, was a rare term that was

³⁴⁹ Hacking, *Rewriting the Soul*, 3.

³⁵⁰ Hacking, *Rewriting the Soul*, 3.

³⁵¹ Hacking, *Rewriting the Soul*, 150.

literally descriptive of one person in whom there appeared to be more than one self: Mary Reynolds.

What can we do with this creature memory? Mary Reynolds has been diagnosed with a radical case of amnesia of the self, yet damned with several manifestations of identities, different enough from each other as to warrant pigeon-holing into a bogus category of personality-explanation invented by twentieth century psychiatrists: multiple personality disorder. “Mary Reynolds is not the oldest candidate for the earliest modern multiple personality,” Hacking concedes. “Two are known from 1791: a European one was well described by Henri Ellenberger, an American one by Eric Carlson.” Ellenberger uncritically writes that “One of the most famous cases of multiple personality disorder was that of Mary Reynolds, said to have been published by Dr. John Kearsely Mitchell around 1815, and later published in a more extended form with a follow-up by the Rev. William S. Plumer.” Ellenberger attributes the case’s popularity to its publication in MacNish’s *Philosophy of Sleep*, blaming Mitchell’s son Dr. Silas Weir Mitchell for writing such a poor account of Mary’s experience that French physicians could not identify the case in *The Philosophy of Sleep* as being that of Mitchell’s Mary Reynolds. Kenny took a more literary approach towards multiple personality disorder, stating that, “multiple personality disorder is a culturally specific metaphor, not a universally distributed mental disorder.” In his treatment of Mary Reynolds, however, he fell regrettably short of treating her as unique voice in female autobiography. Kenny argued that Mary’s case was “one of the first” on record of multiple personality disorder and attempts to argue that her case “points out the difficulty of arriving at a firm opinion about the status of multiple personality as a mental disorder.” The difficulty is evident, as multiple personality disorder did not exist in an iteration resembling its twentieth-century version at the time. Kenny saw Mary’s case as complex and was perhaps

ahead of the historical trend in recognizing the value of her primary source documents, but did not have the language to articulate their importance. Kenny narrated Reynolds' biographical information but had no clear idea about how to handle her primary source material. He attributed her cultural life a "religious milieu" populated by "hysteria" and diagnosed her with "conversion hysteria" rather than attempting to interpret the changes in personality that occurred during sleep. Kenny envisioned Reynolds as a "pagan daughter of nature" who wrote poetry after a Romantic fashion, resisted Calvinism, and was probably treated by her physician Dr. Daniel Bemus through "mesmeric" experiments. Kenny's grasping at interpretation is useful, however, because it provides a map to interpretation that can extricate a more complex and rich reading of Reynolds' autobiography. Alan Gauld, Adam Crabtree, and Michael Kenny have all taken up Mary Reynolds and bronzed her as the historical patient who validates the path of psychological explanation that came into the world long after she left it: Janet's hypnotism and the all encompassing explanation for woman: hysteria.³⁵²

Reynolds deserves a more truthful account in historical narratives – especially those regarding diseases of the mind. She has been passed from man to man as an object: a self-evident case of multiple personality with no inner life of her own. In the literature she is objectified as a patient: a closed system whose illness is manifestly obvious and whose identity is symptomatic of nothing more than the existence of the history of a disorder. The weak logic involved in attributing the first cause of a disorder to a young woman whose personal life and social order have been ignored is an embarrassment to the record she left us: an autobiography written by her own hand about her own experience with double consciousness and a meditation on the meaning

³⁵² Hacking, *Rewriting the Soul*, 150-151; Henri F. Ellenberger, *The Discovery of the Unconscious: The History and Evolution of Dynamic Psychiatry* (New York: Basic Books, 1970), 128-129. Kenny, *Passion*, 3, 19, 38, 51. Kenny did not have the language to articulate their importance, for example writing on Reynolds' own self-perception: "in some wise [sic] Mary Reynolds knew what she was about."

of memory attached to such a life. It is a wonder indeed that a person who has many states of identity, separated from each other, chose to undertake the task of memory through narrative, knowing there were parts of herself and another life she would likely never remember.

The case of Reynolds is a tangled illusion of shattered narratives, each relying on the ones preceding it, all drawn from the autobiography, and none discussing its own merits as a narrative of a self who lost herself two-fold: in living with two personalities, and in history as a woman who used speech to establish her identity, but has been silenced for so many years. One can deconstruct the layers of narrative embalming Reynolds. The outermost fold consists of historians of this alleged identity disease: multiple personality disorder. The narratives that this contemporary explanation of Reynolds are built on are late-nineteenth century American case studies: one by the Reverend William S. Plumer published in 1860, and one by her ultimate curator, Dr. Silas Weir Mitchell who published her case in 1888. These nineteenth-century sources are in turn derived from correspondence (at various times) between Plumer, Alexander Archibald, D.D., John Kearsley Mitchell, Silas Weir Mitchell, and Mary Reynold's nephews William Reynolds and John V. Reynolds, an acquaintance of Alexander Archibald's at Princeton Theological Seminary in the 1830s. The correspondence is based on memories of Mary (by her nephews) and family stories of a spinster aunt with two personalities. Some of it is a paraphrase and reinterpretation of the source document, Mary Reynolds' manuscript autobiography that she wrote to her nephew John, the son of her favorite brother, when he expressed interest in her history. The autobiography is a memoir written by a woman in her "second state" who relied on memories from friends and family about the life she lived in her "first, or natural, state." It was written in the mid-1830s about the time period 1811-1817.

Compare this paper trail with Hacking's statement that "memory and forgetting were simply unimportant to what was known in the English-speaking world, as double consciousness. This is an absolutely fundamental contrast with the French cases after 1875 which Ellenberger and Hacking rely on to establish a chronological narrative of multiple personality disorder. The chief reason for this is that memory had not yet become an object of scientific knowledge."³⁵³ The very fact that this seed of double consciousness, Reynolds, wrote an autobiography contemplating at length the meaning of memory absolutely refutes Hacking's polemic. As Reynolds has shown us, memory was a meaningful and significant mode of constructing identity over time, especially in the early republic United States. Hacking may believe that "the British and American writers were so indifferent to questions of memory that they did not even bother to say whether the forgetting went both ways or only one way," but all primary sources beg to differ. While they were interested in the "curiosity value of these cases" and "fascinated by the character switch," Americans were deeply intrigued by memory and forgetting.³⁵⁴ Doctors, patients, and ordinary people absolutely acknowledged the centrality of memory to questions of the self.

Benjamin Rush called memory a "wonderful faculty of mind" that served as the "most necessary and useful of all the faculties." He quoted Dr. Hartley in his lecture, noting, "there is no mind without it."³⁵⁵ Rush organized types of remembering into a hierarchy of "different grades" with the most simplistic being "reminiscence" and the more sophisticated being an act of recollection. Memory was dispersed across the brain. It was a "generic term" with "several

³⁵³ Hacking, *Rewriting the Soul*, 155; Kenny, *Passion*, 18. Kenny took a different approach towards the meaning of memory in cases of multiple personality disorder: "memory is generally in relation to an activity, and hence to how an occasion is defined, for this reason memory is as much a social as a psychological fact."

³⁵⁴ Hacking, *Rewriting the Soul*, 154.

³⁵⁵ Rush, *LOM*, 439.

distinct species.” Rush identified a type of memory for “faces, places, words, names, numbers, and ideas,” with each species of memory assigned to a “distinct spot in the brain.” Because of the physical allocation of species of memory, “we find some of them impaired, or destroyed by disease, while others retain their natural, or healthy state.”³⁵⁶ Memory could enjoy health or sickness and recollection was an important part of establishing the continuity of self over time.

Reading Reynolds’ autobiography generates questions about the meaning of memory in early-nineteenth century America and confronts the meaning of the continuity of self in the form of remembering two personalities, unacquainted with each other. How can we read her autobiography as a historical document and as a memory box of a woman whom historians have appropriated as evidence for the existence of a disorder centered on multiplicity?³⁵⁷ Historians have tackled the question of the evolution of a modern self from a variety of positions, but the field is so broad and amorphous it will suffice to limit reflections on identity to those scholars who work within an American context. Mechal Sobel’s work on interpreting autobiography provides a great deal of insight into how one can make sense of a historical figure’s sense of self (or selves). “The mapping of new territories of the self demanded a new cartography,” Sobel

³⁵⁶ Rush, *LOM*, 441-443.

³⁵⁷ Paul Ricoeur, *Time and Narrative: Volume 1*, trans. Kathleen McLaughlin, and David Pellauer (Chicago: The University of Chicago Press, 1983), 77. While I do not endorse postmodernism or poststructuralism as the appropriate methodological approach towards historical autobiography, I do wish to offer Paul Ricoeur’s reflections on reading as a possible avenue of thought when approaching a source such as this. Ricoeur’s schematic of mimesis 1, 2, and 3, roughly aligns with three different philosophical worlds of translating real-life events into narrative. Mimesis 1, the chaotic real world of random, concurrent actions provides the basis for Mimesis 2, the world of writing down a selection of these events. Mimesis 3, which involves the act of reading and the reader herself in making meaning of the artifacts from the world of Mimesis 2, calls upon Aristotelian emplotment: the choice selection of logical events, ordered in sequence to create a satisfying narrative. According to Ricoeur, it is the responsibility of the sometimes-unaware reader to emplot a text by reading it - choosing the events to discuss, plucking one from many that have already been narrativized. Through this action on the part of the reader, “what is communicated, in the final analysis, is, beyond the sense of a work, the world it projects and that constitutes its horizon. In this sense, the listeners or readers receive it according to their own receptive capacity, which itself is defined by a situation that is both limited and open to the world’s horizon.” While I do not wish to follow Ricoeur down the rabbit hole of symbols, internality, and externality, I do think it is critical to reflect on the fact that I am a *reader* of Reynolds’ memories of herself and that I too am subject to the errors of Mimesis 3, as I make her story into a broader world.

writes in her article “The Revolution in Selves: Black and White Inner Aliens” (1997). Sobel determines that “self-narratives were records of the great changes occurring in the self and were also agents of change in and of themselves.” We see Reynolds’ original document of herself creating a change in the construction of psychiatric categories. I agree with Sobel’s claim that “creating narratives of their lives gave individuals coherence and purpose and gave structure to the self itself.” While autobiographical writing may be generally thought of as a “ritual act,” in Mary’s case she was, at least superficially, trying to provide information to a nephew interested in her powers of recollection and the course of her transformation from one person into another.³⁵⁸ Whether she saw it as a ritual act of self-preservation is not something we can know.

Sobel sketched out three categories of self-narration or autobiography: repetitive events written in the voice of a passive narrator, the dramatic autobiography that supported the narrator as an actor, and the “self-fashioners” who were, to a marked degree, responsible for the direction their lives were taking.” Mary’s autobiography best fits into the third category, though she seems to have had very little control over which self she was going to be and when. What is notable about her autobiography is that it seems to have been written against the grain at least so far as American self-narratives were concerned. Sobel remarks that, “it was not considered proper to record personal happenings or much emotion. In fact, the great majority of American life narratives of the eighteenth and early-nineteenth centuries were written by individuals who apparently sought to limit or eliminate their personal concern with self.”³⁵⁹ Reynolds was quite

³⁵⁸ Mechal Sobel, “The Revolution in Selves: Black and White Inner Aliens,” *Through a Glass Darkly: Reflections on Personal Identity in Early America*, eds. Ronald Hoffman, Mechal Sobel, and Fredrika J. Teute (Chapel Hill, NC: UNC Press, 1997), 166.

³⁵⁹ Sobel, *Through a Glass Darkly*, 169.

concerned with herself as stable selfhood was the central event upon which her entire life revolved. She also wrote extensively about her emotional life and personal concern for herself.

Men have leached Reynolds' story into the public sphere. Excavating her own interpretation of her experience with double consciousness would be impossible without access to the original autobiographical manuscript. Because it is intact and is the central element of this chapter, we have the rare opportunity to compare published medical cases about a female patient against her own written experience of her illness and recovery. The earliest description of Reynolds' case was published in the *Medical Repository* in 1817. Samuel Latham Mitchill, who also presided over the dissemination of Rachel Baker's case, was an avid collector of medical curiosities and eagerly included Mary Reynolds in his repository. The brief article was titled "A Double Consciousness, or a Duality of Person in the Same Individual." It was summarized from a gentlemanly conversation between Mitchill and the Reverend Dr. Eliphalet Nott, then president of Union College in Schenectady New York, one of the three largest American universities in the early-nineteenth century.³⁶⁰

On January 16, 1816, Mitchill had written to Nott about a visit he made to the "United States Military Academy at West-Point" where he heard about "a very extraordinary case of double consciousness in a woman" from one of the Academy's professors of mathematics, Major Andrew Ellicott, who was related to Mary Reynolds.³⁶¹ Referred to as "Miss R.," Reynolds was

³⁶⁰ Bruce Leslie, "Nott, Eliphalet (25 June 1773-29 Jan. 1866)," *American National Biography Online* (Accessed January 8, 2014): <http://www.anb.org.ezp-prod1.hul.harvard.edu/articles/09/09-00547.html?a=1&g=m&n=Nott%2C%20Eliphalet&ia=-at&d=10&ss=0&q=1>.

³⁶¹ Silvio A. Bedini, "Ellicott, Andrew (24 Jan. 1754 – 20 Aug. 1820)," *American National Biography Online*. (Accessed January 8, 2014), <http://www.anb.org.ezp-prod1.hul.harvard.edu/articles/13/13-00482.html>. Andrew Ellicott was born in Buckingham (Bucks County), Pennsylvania in January 1754, but spent his early adulthood in Baltimore helping his family build a prosperous milling business and maintained his father's clock-making business. Trained in astronomy, mathematics, and mechanics, Ellicott was an excellent example of an American Enlightenment man. Versed in the natural sciences and engrossed with domestic trade, the Revolutionary War veteran was hired by George Washington and Thomas Jefferson to undertake major surveys of the territories in

described by Mitchill in the standard sentimental terms reserved for a young woman of good standing. She “possessed naturally a very good constitution,” good health, “an excellent capacity,” and plentiful opportunities to acquire knowledge. She had ventured so far as to improve “her mind by reading and conversation, and was well versed in penmanship.” She had a “capacious memory” that was “stored with a copious stock of ideas.” As a slightly above average young woman living robustly on the far Western Pennsylvania frontier in the Allegheny foothills, Reynolds’ existence would most likely have gone unremarked completely. As it happens she “unexpectedly” fell asleep and slept longer than an ordinary person would.³⁶² Much like Rip Van Winkle, that Dutch time traveler birthed from the imagination of Washington Irving in 1820, Reynolds may have woken up to a strangeness in the world: “The poor fellow was now completely confounded. He doubted his own identity, and whether he was himself or another man.” When asked his name Rip Van Winkle responded: ““God knows’ ‘I’m not myself – I’m somebody else – that’s me yonder – no that’s somebody else got into my shoes – I was myself last night, but I fell asleep on the mountain... and everything’s changed, and I’m changed, and I can’t tell what’s my name or who I am!””³⁶³

Perhaps an inspiration to Mr. Irving, Reynolds, according to Mitchill’s account, was “discovered to have lost every trait of acquired knowledge.” She became an extraordinary object from which one could learn about the capacity of the human mind. Paying special note to the state of her mind, Mitchill exclaimed that “her memory was tabula rasa; all vestiges, both of words and of things, were obliterated and gone.” Quite extraordinarily, Reynolds was somebody

western Pennsylvania, New York state, Florida, the Carolinas and, eventually was the astronomy for the international resolution of the forty-fifth parallel determined by the Treaty of Ghent. At the time he met Mitchill he was reaping the rewards of his federal reports, teaching mathematics to West Point students.

³⁶² Mitchill, “A Double Consciousness,” 185.

³⁶³ Washington Irving, *Rip Van Winkle and Other Stories* (New York: Puffin Classics, 1986), 24-25.

else and this new person had to painstakingly relearn everything again: spelling, reading, writing, the names of people and things. She made great progress in re-imprinting the world, but Mitchill was not primarily interested in the mechanisms of learning. He was interested in the powers of sleep. After several months she was “invaded” by another fit of “somnolency” and when she awoke she was herself again “but was wholly ignorant of every event and occurrence that had befallen her afterwards.” As of 1816, Reynolds had been enduring changes from her old state to her new state and the “alternations are always consequent upon a long and sound sleep.” With no end in sight and no small amount of humility, “both the lady and her family are now capable of conducting the affair without embarrassment. Sustaining some degree of detachment, Mitchill had little to say on the nature of consciousness derived from this particular curiosity. He did however emphasize “she is as unconscious of her double character as two distinct persons are of their respective separate natures.”³⁶⁴ He said nothing of disorder. This was the extent of it.

Another contemporary who was deeply invested in Mary’s experience was the Reverend Timothy Alden, a neighbor of the Reynolds family, and the first documentarian of her case from an outsider’s position.³⁶⁵ Alden’s account of his encounter with Reynolds’ “twofold consciousness” was the only one published by a male purveyor of medical curiosities that actually knew her in both of her states, and was able to witness first hand the unusual phenomenon (her family members who provided recollection and facts through letters are

³⁶⁴ Mitchill, *A Case of Double Consciousness*, 186.

³⁶⁵ Bates, *A History of Crawford County*, 412-413. For a biography of Timothy Alden see: Jonathan E. Helmreich, *Eternal Hope: The Life of Timothy Alden, Jr.* (Cranbury, New Jersey: Cornwall Books, 2001). Reverend Timothy Alden moved to Meadville from New York City in the spring of 1815. John Reynolds, Mary’s father, exercised considerable influence over town affairs. Alden approached Reynolds about his motivation for forging west into frontier country: he was searching for a “suitable location for a college.” A general meeting was called, and the outcome was favorable. In June of 1815 the first steps were taken to form Allegheny College, with Alden appointed as the president. The college was to be outfitted with professors of logic, metaphysics, and ethics. The college would host Alden’s ambitious attempt at a scientific magazine, which he called *Alleghany Magazine*. Though short-lived, it yielded the second account of Mary Reynolds, which would push her case one step further on its paper journey towards psychiatric doctrine.

excluded from the category of publishers).³⁶⁶ Alden published a letter written to Mitchill in his short-lived *Alleghany Magazine* in 1816. It was the second item in the first of two issues printed. Alden explained to Mitchill that the Reynolds family had immigrated to Oil Creek, Pennsylvania, twenty-seven miles away from Meadville, in 1797. He made the acquaintance of John Reynolds, a lawyer, and Reynolds' favored brother, in 1815 when he and his wife moved to Meadville and became their "nearest neighbours." Alden did not at first realize that Reynolds was of two characters. He first met her "when she was in the exercise of her original consciousness, the last evening of which" she spent in company at his home. He was mightily surprised when the next evening, he was "introduced to her anew." Such a strange occurrence excited his curiosity and he sought a more complete history of "her singular case."³⁶⁷

According to the history Alden compiled, Reynolds had been "afflicted with fits" since reaching an "adult age." No cause was known, but they were evidently quite severe. In spring 1811, Reynolds endure a "severe visitation" that convulsed her entire body, and her "sight and hearing left her, insomuch that she became totally blind and deaf." It took her five weeks to recover her "visual and auditory faculties," but in Alden's ministerial opinion, "a more remarkable dispensation of Providence, however, awaited her." Slightly before her twelve-week foray into darkling silence ended, Reynolds awoke and "appeared to have lost all recollection of every thing." The people who populated her life were strangers. She could speak, but in a slurry, imperfect way. For the next five weeks she struggled to regain "various kinds of knowledge" that she had retained before her fit. At the end of this period, she transitioned back to her first, or original state, with all knowledge of that life restored fully to her. This was not to last, however,

³⁶⁶ Alden, *Letter Address*, 19.

³⁶⁷ Alden, *Letter Address*, 19-20.

and three weeks later, “in her sleep, the transition was renewed, and she awoke in her second state” to take up “the small fund of knowledge, she had gained in the former second state” and could, “day to day... add to this little treasure.”³⁶⁸

Alden, unlike the curious theorists that followed him, was most fascinated by the ebb and flow of knowledge that accompanied the rapid switching between states of consciousness. He was fascinated by the continuity of memory in both states, but did not, like Plumer and Mitchell would, separate them totally and irrevocably from one another. Alden documented that Reynolds had “gone through the usual process of learning to read” in her second state, and took the same “satisfaction in the use of books” as she did in her first. Her intelligence in both states was thought to be equal (at least by Alden), but writing for Reynolds in her second state, was more difficult to acquire. For three years her brother John attempted to “re-teach her chirography.” Though she eventually reached a “tolerable” level of skill, she wrote from “the right hand to the left, in the Hebrew mode,” and used her penmanship to write poetry – something she never did when in her first state.³⁶⁹

Though Alden was very much concerned with the state of Reynolds’ consciousness, it was sleep that dominated and made possible her transitions from one self to the other. “This astonishing transition,” he wrote to Mitchell, “always takes place in her sleep.” When she passed from her second state to her first state, “nothing is particularly noticeable in her sleep” but when the situation was reversed, “her sleep is so profound that no one can awake her, and it not unfrequently continues eighteen or twenty hours.” Alden thought to include a detail that would be henceforth excluded from any public accounts of Mary Reynolds: it was perhaps the most

³⁶⁸ Alden, *Letter Address*, 20.

³⁶⁹ Alden, *Letter Address*, 20.

critical detail attached to her transitions from one state to another, but it was also the detail most likely to weaken claims that the two states were utterly disconnected from one another.

Reynolds, Alden wrote, “generally has some presentiment of the change, and, frequently, for several days for the event.” Each version of Mary knew that there was another Mary, and generally when the alternate would emerge. While they could not know each other, she had been “persuaded by the representation of her friends” that there was indeed another Mary to fulfill her internal prophecy.³⁷⁰

Alden was indeed sensitive to Reynolds’ suffering because she endured these presentiments. When she was “about to undergo the transition fearing she should never revert so as to know again in this world those, who were dear to her, her feelings, in this respect, were not unlike the feelings of one entering the valley of the shadow of death.” She eventually came to be at ease with the transitions and not regard them with “that horror, or distressing apprehension” which she did for the first several years of her condition.³⁷¹ Each Mary had an original life, and returning to either the first or second state from the alternate must have felt like going to the afterlife of one’s own life time and again. For Reynolds, to go to sleep always held the latent threat of enduring what must have felt like a conscious death. This was one of the facts of the case that passed away with the next iteration, many years later, in 1860.

Reynolds began to write her autobiography in the 1830s. Mitchill and Alden’s articles had little influence beyond fostering a continued interest in the case after their respective publications. When their accounts were published in 1816 and 1817, Reynolds had not yet asserted written authority over her own story. Rather than privileging chronology which would downplay the importance of Reynolds’ autobiography, it is necessary to split time and examine

³⁷⁰ Alden, *Letter Address*, 20.

³⁷¹ Alden, *Letter Address*, 21.

the 1860 piece written by the Revered William Swan Plumer and the definitive last article on Reynolds' case published in 1888 by Silas Weir Mitchell, taken from the papers and personal letters of his father, John Kearsley Mitchell, gathered mostly in the 1830s and 1840s. Both Plumer and Mitchell might be thought of as historians themselves, pulling a certain kind of plot from the raw material of the autobiography to suit their own narrative ends.

Plumer was a Pennsylvania-born Presbyterian minister who traveled throughout Virginia and North Carolina, establishing churches concomitant with the teachings of the Old School of Presbyterianism. He moved around frequently, with brief periods of theological tenure at various institutions. In the training years of his education he studied at the Princeton Theological Seminary, where he likely met Archibald Alexander and John Kearsley Mitchell, who provided him with the material to write a popular magazine article on Reynolds for *Harper's Monthly* in 1860.³⁷² Plumer's writing was not atypical. It was a mix of subtle repetition of previous articles and second-hand facts, embellished for a popular audience. He wrote that "all of the accessible details of a case so singular should be place upon permanent record" with the assurance that Reynolds' brother, John, would vouch for the credibility of his facts, suggests that he intended to provide a serious account.

After crafting a biographical narrative about the progress of Reynolds' emergent second state, and a long uninterrupted quotation from her autobiography – both chosen to emphasize emotional distress, but taken out of context – Plumer made several observations about what he thought it meant to be two persons in one body. He was certain that "the two lives which Mary

³⁷² Plumer, *A Case*, 807. For biographical information see: See John M. Mulder. "Plumer, William Swan (26 July 1802-22 Oct. 1880)" *American National Biography Online* (Accessed on January 8, 2014) <http://www.anb.org.ezp-prod1.hul.harvard.edu/articles/08/08-01193.html?a=1&g=m&n=Plumer%2C%20William%20Swan&ia=-at&ib=-bib&d=10&ss=0&q=1>. Plumer explained the provenance of his interest in Mary Reynolds case in his article. "The late Archibald Alexander, D.D., many years later, became interested in the subject, and secured materials for a full statement, which he proposed to place in the hands of Professor Henry to be communicated to the American Philosophical Society. But the death of Dr. Alexander prevented the execution of this design."

Reynolds lived for many years were thus entirely separate.” The states followed each other in succession and “the thoughts and feelings, the knowledge and experience the joys and sorrows, the likes and dislikes of the one state did not in any way influence or modify those of the other.”³⁷³ This assumption, made in good faith, that there were two distinct persons with no memory of each other, and did not influence one another was not entirely correct. In Reynolds own writing she dwells on what has been lost by living from one state to another, and the knowledge that she was not herself affected her deeply. Plumer did much to turn her into a character in a story – one that extorted consequences from a variety of improper actions. “The leading facts are authenticated by a chain of testimony furnished by witnesses of unimpeachable character, covering the whole period,” Plumer told his audience. He was credible and he believed Reynolds to be as well. He was not about to acquiesce that a woman, who was apparently devoid of motive, could maintain the fraud of dual character for fifteen years.³⁷⁴

Plumer’s description of Reynolds’ duality is suggestive of a societal, if not medical move towards a conception of stable, discrete, multiple personalities existing simultaneously in one individual. What is critical about his somber evaluation, however, is that personality was, in 1860, a nascent concept. The soul reigned still. “The phenomena presented were as if her body was the house of two souls, not occupied by both at the same time,” Plumer wrote, hearkening back to a mystical Puritan web of bodies expressed through houses to protect the souls of humans. “Alternately, first by one, then by the other, each in turn ejecting the other,” was how the two souls communicated with one another beyond an impassable divide. “At last the usurper

³⁷³ Plumer, *A Case*, 808.

³⁷⁴ Plumer, *A Case*, 812.

gained and held possession after a struggle of fifteen years.”³⁷⁵ While soul might be a placeholder for personality, Plumer had in one respect passed over a threshold into a new phase of modernity. Duality implied struggling parties: one could win. Ending his article with an open question, Plumer wondered what bearing Mary’s case might have on “the sanitive treatment of the insane, on questions of mental science beyond those alluded to, on questions of conscience or casuistry, and on the religious aspect of the matter.”³⁷⁶

Dr. Silas Weir Mitchell’s more analytical presentation of Reynolds case furthered Plumer’s suggestion that she had gone insane. By 1860, Reynolds had been dead for six years. By 1888, new treatments for the insane were reaching an apex in Europe and were keenly followed in the United States. It is not difficult to see how Reynolds could have been easily appropriated by psychiatrists, but in her own time, and in her own estimation, insanity was simply not something she or her family attributed to their unusual situation. Mitchell was a formidable figure in the medical profession in the 1880s and 1890s, but so far removed from the beginning of the century that he may as well have been a time traveler. His credibility and the seriousness with which he was regarded did much to cement his revisionist account of Reynolds’ case and shore up the concept of multiple personality in American psychiatry for many decades to come. Cervetti’s recent biography is an excellent source to get a full picture of the life of a man who defined himself as a leading physiologist in antebellum America through his experiments on rattlesnake venom, which led him to further experiment in immunology and

³⁷⁵ Plumer, *A Case*, 812. Robert Blair St. George, *Conversing By Signs: Poetics of Implication in Colonial New England Culture* (Chapel Hill: UNC Press, 1998), 121. St. George studies the architectural design and land uses of the Puritan settlers, comparing their religious doctrines to the material artifacts they created in their new kingdom. “With houses and bodies metaphorically fused, people extended the analogy to suggest the heavenly mansion or perfect house that the souls of the elect would inhabit after death in the sanctified city that Revelation promised would arrive on earth following the Last Judgment. The house-body metaphor was elaborated in anticipation of heavenly salvation. It appeared, spread across the providential landscape of Massachusetts Bay...”

³⁷⁶ Plumer, *A Case*, 812.

toxicology. Mitchell is most well known for his invention of the rest cure, immortalized in fiction by Charlotte Perkins Gilman's short story *The Yellow Wallpaper*. After experiencing the Civil War, Mitchell became interested in neurasthenia as a condition of nervous disorders. He turned, later in life, to a rather successful career in writing fiction, and served on the boards of many reputable research institutions. His popularity was so broad that he was the center of an article written by Edward Wakefield for McClure's Magazine. The article described a day in the life of the famous nerve doctor, including a section titled "Doctor S. Weir Mitchell At Home," and outlined Mitchell's explanation for the increase in "nerve deaths" occurring on a yearly basis. Mitchell "considers it proved beyond any dispute that nervousness is the characteristic malady of the American nation" caused by the unique effects of the American climate on various racial temperaments, Wakefield wrote, illustrating the scope of Mitchell's interests.³⁷⁷ Mitchell's fascination with Reynolds' case was perhaps more closely related to his medical pursuits than some of his other vagaries of thought. His eulogist and friend wrote, "I often called him a 'yeasty' man. His mind was ever fermenting, speculating, alert, and overflowing with ideas. With this he leavened the minds of his fellows and set their ideas fermenting."³⁷⁸ Rather than seeking her out, the yeasty Dr. Mitchell inherited the case.

³⁷⁷ Nancy Cervetti, *S. Weir Mitchell, 1829-1914* (Penn State University Press, 2012), 1-5; Edward Wakefield, "Nervousness: The National Disease of America," *McClure's Magazine* Vol. II (Dec. 1893- May 1894): 302-306. (New York: S.S. McClure, 1894), 305; W.W. Keen, "Tribute to S. Weir Mitchell," in *S. Weir Mitchell, M.D., LL.D., F.R.S., 1829-1914. Memorial Addresses and Resolutions* (Philadelphia, 1914), 13-14. An amusing anecdote illustrating Mitchell's professional reputation included in his College of Physicians of Philadelphia memorial address in 1914, written by his friend of 53 years, Dr. W.W. Keen attests to his range of interests and quite well to the man he must have been: "I had just begun the study of the bones - *Gray's Anatomy* - then quite a new book - lay before me and in my hands was a skull. The window was open and the hot September sun was shut out by Venetian blinds, as in the early afternoon I sat in my preceptor's office where now the Jefferson Medical College building stands. Suddenly I heard the blinds move and turning around I saw a pair of eyes looking between the new horizontal slats, while a voice outside said, 'Doctor, don't you want to help me in some experiments on snakes?'"

³⁷⁸ Keen, *Tribute*, 16.

In his 1888 article on Reynolds and the phenomenon of double consciousness he stated “my attention was first drawn to it by a MS, found among the papers of my father, the late Prof. John K. Mitchell.”³⁷⁹ Mitchell verified that his father had received the case from John V. Reynolds, Mary’s nephew, and the son of her brother with whom she lived, while he was studying with Alexander Archibald at the Princeton Theological Seminary during 1835-1836. John V. Reynolds also provided Plumer with his account of the case. He was diligent about sourcing every printed description of the case.³⁸⁰ Despite his access to the manuscript material, Mitchell was eager to provide an account of “these two persons in one body – two distinct lives antipodal from every mental and moral point of view.” In doing so, he created something of a myth about Reynolds and failed to notice that the meaning of “persons” did not resonate with the meaning of “character” or “state” that was emphasized in the original case studies and in her autobiography. By 1888, Reynolds was no longer the cheerful girl that Alden had lived next to and reported on, but was rather melancholy in her first state, and “cheerful to extremity” in her second.³⁸¹ Mitchell wrote a readable narrative, clearly drawn to the story elements of the case, and quoted at length, the manuscript material bequeathed to him. Mitchell could hardly seem to resist narrativizing from the autobiography, switching duplicitously between block quotations and literary devices: for example, he referred to Reynolds a “wily creature” and attributed fictive characteristics to her such as a “contemptuous laugh.”³⁸² Passively, Mitchell wrote that “the two lives which Mary Reynolds lived for many years were thus entirely separate; each was complete in itself, the fragments of which it was composed, though in reality separated by the portions of

³⁷⁹ Mitchell, *A Case of Double Consciousness*, 1.

³⁸⁰ Mitchell, *A Case of Double Consciousness*, 1-2.

³⁸¹ Mitchell, *A Case of Double Consciousness*, 8.

³⁸² Mitchell, *A Case of Double Consciousness*, 9, 18.

the other life intervening, sustained a due relation... In her natural state the strange double life which she led was the cause of great unhappiness. She looked upon it as a severe affliction from the hands of Providence.”³⁸³

Professional responses to Mitchell’s report challenged the truth of a condition called double consciousness. A physician, H.C. Wood, who also worked on nervous disease, responded saying “with regard to the name of this condition, I think that double consciousness is about as bad a term as could be selected.” He doubted that the condition had very much, if anything to do with consciousness, and was rather made up of “the two thing, change of character and failure of memory.” Wood pointed out that every case of insanity “presents part of the features of so-called double consciousness.” He was skeptical enough to suggest that sunstroke was a probable cause.³⁸⁴ Dr. Henry Hartshorne, the second respondent, thought an explanation could be found in the double-hemisphere structure of the brain, and mused on the connection between “the possible separable junctions of the two hemispheres of the brain” with double consciousness.

Harrington’s work on the history of the double brain is an excellent reference that tracks the discovery of the double hemisphere and the resulting theories about madness and consciousness that resulted from the anatomical reality of the brain organ. At the beginning of the nineteenth century, Harrington writes, “the phrenologists, as well as certain others willing to envision the mind as somehow spatially congruent with the brain, were led to think along rather different lines. People began to ask whether certain circumstances might arise in which each hemisphere could take on an independent life of its own.” In the United States, Rush questioned the meaning of cases in which people acted as if they had two minds and in Europe, the phrenologists Gall,

³⁸³ Mitchell, *A Case of Double Consciousness*, 14.

³⁸⁴ *Transactions of the College of Physicians of Philadelphia*. Third Series, vol. 10 (Philadelphia: Printed for the College, 1888), 385-386.

Spurzheim, and later, Watson, would all probe the question of correlating the insanity of double consciousness with the double brain.³⁸⁵ Hartshorne believed that double consciousness could be explained by “some interruption of the function of the corpus callosum” resulting in a “separate action of one hemisphere from that of the other.”³⁸⁶ Dr. Charles K. Mills, who specialized in epilepsy thought that Reynolds’ condition had started with an epileptic fit, but was not a case of the “two hemispheres of the brain acting separately,” but rather comparable to “certain forms of insanity” such as “insanity of the ‘double form’” that included prolonged states of mania and melancholy.³⁸⁷ Mitchell took his respondents seriously, reflecting on the cases of double consciousness that “show simply changes of a same character.” He refused however to admit that Mary was insane. Her case “does not read like a history of insanity.” He did however firmly state that, “undoubtedly the case I have described was of hysterical origin” and while not a form of insanity, “exhibited every evidence of the hysterical condition.” No matter what objections were posed, Mitchell was determined to establish a lineage for hysteria. His work would lead twentieth-century historians of psychiatry to find a multiple personality in Mary Reynolds. Reynolds was a perfect foil.³⁸⁸ Mitchell’s instinct for preservation led him to keep Reynolds manuscript. Reynolds own instinct of self-preservation had led her to write it. From both we can reconstruct a dual story with a single truth.

³⁸⁵ Anne Harrington, *Medicine, Mind, and the Double Brain: A Study in Nineteenth Century Thought* (Princeton, NJ: Princeton UP, 1987), 17, 19.

³⁸⁶ *Transactions of the College of Physicians*, 386.

³⁸⁷ *Transactions of the College of Physicians*, 387.

³⁸⁸ *Transactions of the College of Physicians*, 388-389.

CHAPTER FIVE:

“MY THOUGHTS WERE WILDERING”: THE SOMNAMBULISM DEFENSE

By the mid-1830s, somnambulism was a firmly instantiated correlate of insanity, but physicians were still unable to stabilize the somnambulist's body as an exclusive source of medical knowledge on the meaning of volition and the mind. The mysterious and curious state of somnolent behavior was no longer the province of medical observation, public curiosity, and personal freedom, but an egregious condition that required treatment, confinement, and, if possible, reversal. At the very least, it required regulation. Whether or not somnambulism ought to be legally treated as a species of insanity was addressed in an 1833 trial: the first in the United States where the sleepwalking defense was offered as an explanation for murder without consciousness.

The defendant, Abraham Prescott, was the central figure of two trials in which the essential legal question of whether volition was a condition of intent was explored. The question of Prescott's legal guilt allowed medical experts and lawmakers to battle out the ambiguous meaning of somnambulistic action in criminal cases. This case resulted in the medical profession failing to assert their authority over diagnosing and using somnambulism to further medical theories on the workings of the body. It also resulted in the legal profession's attempt to make somnambulists an example of legal knowledge regarding intent and culpability. Both professions left the trial without having produced any evidence that either had the true interpretation, and therefore, rightful intellectual ownership of somnambulistic knowledge. Because medicine could not explain somnambulism, despite physicians' many attempts to classify the knowledge produced by somnambulistic bodies in action, the legal profession became the de facto guardians of somnambulists for lack of a more convincing authority.

The trial also ensured somnambulism would emerge as a rather different condition from what it was prior to the case. Legal questions and medical testimony were the twin restraints that removed somnambulism from the wilderness and settled it firmly in the territory of medical attempts to impose control over wayward bodies and minds. The somnambulist in the medico-legal setting had no authority of his or her own to exert. The Prescott case ended the period in which female somnambulists could find their liberty in ungoverned, but purposeful reverie. Female somnambulists who persisted past the Prescott case, especially Jane Rider, were diagnosed more readily as insane and confined to the new asylums that were being built to house society's uncontrollable mad. In the United States prior to 1840, the male somnambulist was a violent figure at the mercy of his primitive passions and savage creole nature. Unlike female somnambulists who gained a public voice and personal liberty of movement and thought through somnambulism, male sleepwalkers represented the degeneration earlier European settlers so feared would be the inheritance of the new world. Men without self-governance were no better than bloodthirsty automatons. Women without self-governance were dangerous revolutionaries, spreading the contagious of public speech through sympathy. It would ultimately be ungoverned men who silenced the disenfranchised women who used their absence of volition to gain volition.

By examining the Prescott case through testimony and the roles of the witnesses, we have the rare opportunity to see the clear emergence of a criminal defense. While Karen Halttunen has written on the development of crime narratives in colonial America and the United States, hers is a genre study that ties the social world to the narrativizing of the act of crime. Daniel Cohen creates a very similar narrative argument in his work *Pillars of Salt, Monuments of Grace* (1993), also about crime literature during the same period. British historian Joel Eigen's two

works on the emergence of medical witnesses in British common law and unconscious crimes in the Victorian period attempt to show the evolution of the “unconscious” crime defense but are far removed in time from a case in 1833 New Hampshire.³⁸⁹ The case involved the first use of the sleepwalking defense for murder in American legal history. Abraham Prescott, the defendant, was an outlier in the traditional historical narrative of the insanity defense. The Prescott case is not part of the historical literature on the topic but helps explain how the balance of power shifted from somnambulists to physicians and lawyers through the use of expert medical witnesses during the trial. While the medical witnesses did not seek to control Prescott as physicians sought to control their female somnambulistic patients, we see an analogous trend in which doctors came together to assert their medical authority over the condition of somnambulism.

There are several landmark cases in the nineteenth-century legal history which addressed a confluence of three factors in the commission of crime under the insanity defense: the role of inheritance in insanity, the ability of an insane or unconscious person or form intent and attach culpability, and the balance between *actus reus* and *mens rea*: bodily action and mental action. The Prescott case has not been examined in any detail, but precedes the British M’Naughten case (which set international standards for insanity tests) and the Guiteau case in serving as the first case in American jurisprudence that attempted to develop a legal precedent for sleep-walking related insanity by sketching out a relationship between somnambulism and insanity through legal witnesses and application of common law rule. While Prescott did not result in a rule in the

³⁸⁹ Karen Halttunen, *Murder Most Foul: The Killer and the American Gothic Imagination* (Cambridge, MA: Harvard University Press, 1998); Daniel A. Cohen, *Pillars of Salt, Monuments of Grace: New England Crime Literature and the Origins of American Popular Culture, 1674-1860* (Amherst: University of Massachusetts Press, c1993); Joel Peter Eigen. *Unconscious Crime: Mental Absence and Criminal Responsibility in Victorian London*. (Baltimore: Johns Hopkins UP, 2003), and Joel Eigen, *Witnessing Insanity: Madness and Mad-Doctors in the English Court* (New Haven: Yale University Press, 1995).

way M'Naughten would in 1843, it an example of the earlier history of legal decisions on the topic of forming. It also provided a platform for the premier experts on insanity at the time to voice their authority on what it was to be insane and how that definition ought to be grafted onto medical jurisprudence. Experts were unable to clearly identify somnambulism as insanity, but testified that it was related to it through a defect of the mind. That was enough to provide the legal and medical means to incarcerate the prodigal daughters of somnambulism after 1834.

“A Mind Sorely Wounded”³⁹⁰: *Edgar Huntly* and the Savage Sleepwalker

Somnambulism was never entirely separate from mental derangement in medical writings on the topic. It was widely understood that sleepwalkers, while behaving in a rational manner, did not possess bodily authority. It followed that they did not possess authority of mind either. Those who were clearly insane presented problems for the inclusion of somnambulism in the category of insanity. The presentation of somnambulism when compared with that of insanity was simply too different to allow physicians to further clarify what somnambulism was and where it belonged.

That American oddity, Charles Brockden Brown, has provided the readers of American literature plenty of fodder for historical speculation since he first published his novel about sleepwalking in 1799. *Edgar Huntly, or Memoirs of a Sleepwalker* has been widely and extensively interpreted as a parable about frontier violence and anxiety over masculine citizenship in the early republic.³⁹¹ It also happens to provide a great deal of insight into how

³⁹⁰ Charles Brockden Brown, *Edgar Huntly; or Memoirs of a Sleep-Walker with Related Texts* eds. Philip Barnard and Stephen Shapiro, (Indianapolis: Hackett Publishing Company Inc. 2006), 11. When the comment comes from the editorial essays I will refer to the work as Barnard and Shapiro. When the quotation comes from the text, the notes will refer to it as Brown, *Edgar Huntly* etc.

³⁹¹ Barnard and Shapiro, *Edgar Huntly*, xvii. Scholars of Charles Brockden Brown's novels generally agree on the elements used to devise *Edgar Huntly*. I generally agree with their evaluation of the text as a piece of literature. The most recently edited edition describes the role of frontier violence in the context of American-Indian wars, land purchases by the Dutch, Brown's interest in the Woldwonite platform of individual growth through social

somnambulism was regarded as a male-gendered state of violence during a frightening period of warfare and settlement in the same Pennsylvania back country and upstate New York frontier that yielded Rachel Baker and Mary Reynolds. Without rational, intentional governance, the new country would sleepwalk its way into a disordered wilderness of destruction. Merchants in the wild would find themselves scalped in a cavern, or teetering on a precipice while the cunning American panther stalked them in their land surveys, uncomfortably overlaid on Native American footpaths. As we have seen, women in the wilderness were not immune from the dangers of the absence of a mind to govern the body; in their cases however, they did not fall prey to nature's baser instincts, as they were already perceived to be physically closer to nature than men, but rather grabbed the rare chance for self-government without interference from family or state.³⁹²

The most credited source on somnambulism and other errata of volition in the Anglo-Atlantic quarry of ideas was Erasmus Darwin's analysis of sleep and reverie. Samuel Mitchill had prepared the first volume of Darwin's two-volume work *Zoonomia: or, The Laws of Organic Life* (volume two being edited by Charles Caldwell) for publication in the United States in

environment, homo-social bonds, and sympathy in historical context. For example, Barnard and Shapiro write: "Brown understood sleepwalking in terms of the associative physiology of sentiment and sensibility, and as a socially generated symptom of emotional damage. In the moral and psychological theories of the Enlightenment, physical responsiveness to external stimuli is a basic link in the associative chain of sentiments and emotions that drives human interaction."

³⁹² Several historians have written about the relationship between taxonomies of nature and women's proximity to the level pertaining to so-called savage races and animals. Haraway, in particular, has written about women as mediating actors between the tabulation of knowledge in the laboratory and the chaos of the "field." For critical arguments on race, gender, and the history of classifying nature, see Londa Schiebinger, *Nature's Body: Gender in the Making of Modern Science* (Boston: Beacon Press, c1993); Jennifer L. Morgan, "'Some Could Suckle Over Their Shoulder': Male Travelers, Female Bodies, and the Gendering of Racial Ideology, 1500-1770," *William and Mary Quarterly* 54 no. 1 (January 1997): 167-192, doi: 10.2307/2953316; Donna Haraway, *Primate Visions: Gender, Race, and Nature in the World of Modern Science* (New York: Routledge, Chapman & Hall Inc., 1989); and Cynthia Russett, *Sexual Science: The Victorian Construction of Womanhood* (Cambridge, MA: Harvard University Press, 1989).

1796.³⁹³ Brown's dear friend, Friendly Club founder Elihu Hubbard Smith, was responsible for disseminating Darwin's other work in the United States starting with the famed epic poem on plant life, *The Botanic Garden*, in 1798.³⁹⁴ Brown was quite the Darwin enthusiast and eagerly read the works as they were published so as to discuss them with his learned compatriots in his intellectual haven. *Zoonomia* provided a rather important Enlightenment basis for Mitchill, Brown, and to an extent, Rush's thinking about sleep, somnambulism, and volition. Brown was most directly influenced by it in writing *Edgar Huntly*, and had long-standing interest in somnambulism, having tried his hand and failed at two pieces on the topic: *Somnambulism, A Fragment*, and the regrettably lost novel, *Sky-Walk; or The Man Unknown to Himself*.³⁹⁵ *Somnambulism, A Fragment* While little else can be said about *Sky-Walk, Somnambulism, A Fragment*, published as a short story in 1805 shows his continuing interest in the topic of insanity, its relationship to somnambulism, and inherited traits – all topics which Darwin explored in *Zoonomia*.³⁹⁶

³⁹³ Waterman, *Republic of Intellect*, 81. Waterman argues that Brown was influenced by Darwin's elaboration of *mania*, including the symptom of hearing voices when writing *Wieland*, his novel about spontaneous combustion, ventriloquism, and Greek and Roman learning, transplanted, of course, to Pennsylvania.

³⁹⁴ Barnard and Shapiro, *Edgar Huntly*, 202.

³⁹⁵ Barnard and Shapiro, *Edgar Huntly*, 216-217. Erasmus Darwin, *Zoonomia, or, the Laws of Organic Life* Vol. 1 (New York: T. & J. Swords, 1796). Research indicates that a full manuscript of *Sky-Walk* was written between 1797 and 1798, but the printer, James Watters died in the 1798 yellow fever epidemic. The price to reclaim the manuscript was evidently so high that Brown and his friends could not purchase the pages. *Sky-Walk* formed the basis for *Edgar Huntly* as did *Somnambulism, A Fragment*.

³⁹⁶ Charles Brockden Brown, "Somnambulism, A Fragment," *Somnambulism and Other Stories*. ed, Alfred Weber. (New York: Peter Lang, 1987). *Somnambulism, A Fragment* is based on a case from Silesia, which made trans-Atlantic news in 1784. Alfred Weber identifies the piece as coming from the Vienna Gazette of June 14, 1784. This true story recounted a young man who followed his love interest and her father on a nighttime journey, upon which they were murdered. The young man was discovered to be a somnambulist murderer, though he had no recollection. A story, which appears to be a rewrite of *Somnambulism, A Fragment*, appeared in German sometime around 1810 and was retranslated back into English. The anonymous piece, which seems to be a plagiarism or monstrous mistranslation of Brown – was called *The Sleep-Walker, A Most Dreadful Tale of a Young Man who Murdered Miss Martha Davis, the Object of his Affections, in his Sleep, After following her, and her Father, several miles on their Journey to visit a Friend*. Translated from the German. (London: Printed and Sold by J. Bailey [1810?]). *The Sleep-Walker* was written from a first person perspective of a man whose love interest was summoned

Zoonomia was a marvel of English Enlightenment science and medicine. First published in 1796, the two-volume tome probed every area of physiological response and human bodily function. Darwin addressed irritability, heat, fever, debility, torpor, stupor, and the general splendor of the convulsing body over approximately 1000 pages of carefully written and credited text.³⁹⁷ Darwin wrote an extensive article on sleep and its disorders in the first volume of *Zoonomia*. For Darwin, the “immediate cause of sleep consists in the suspension of volition.” The suspension of volition could occur through a variety of means – anything from imbibing in pleasure-giving substances, to listening to “soft music” or “mental exertion.”³⁹⁸ Darwin’s theory of sleep was an obvious choice for American gentlemen. If they did not adopt it into their practice, they at the very least perused and discussed it. Newspapers readers were also regaled with publication notices and excerpts of interest beginning in 1796. It was a work worth mentioning.

Darwin proposed a perfect sleep in which “all these trains and tribes of animal motion, which are subjected to animal volition” were “entirely suspended during sleep.” He was quick to distinguish between the volition assigned to the mind, and that assigned to the mechanisms of the body. The “other classes of motion, which are more immediately necessary to life... continue to

away in the night on urgent business with her father. The two were accosted and murdered by a sleepwalker on the road to their destination. In *Somnambulism, A Fragment*, Althorpe, the narrator, is not clearly the murderer, but runs into a local cretin, called Nick Handyside, described as a “mischief loving idiot,” (19) who enjoys stalking and then frightening wayward travelers. Nick Handyside ends up causing an accident leading to injury. Miss Davis’s father goes for help and when he comes back his daughter has been murdered: by the boogey-man or Althorpe. The answer is left ambiguous. *The Sleep-Walker*, which is at times nearly unintelligibly hard to follow is clearly a copy of *Somnambulism, A Fragment* with changes to language and description, however the plot remains the same. The characters in both works share the same names and unfortunate outcomes. Regardless of this literal clue, Brown’s short story was popular enough to warrant translation and imitation.

³⁹⁷ For a biography of Erasmus Darwin and information on the circumstances surrounding the production of Darwin’s works, see: Patricia Fara, *Erasmus Darwin: Sex, Science, & Serendipity* (Oxford: Oxford, UP, 2012).

³⁹⁸ Darwin, *Zoonomia*, 158, vol. 1.

strengthen their habits without interruption,” Darwin explained, showing his materialist colors.³⁹⁹ He had also made up his mind about how to qualify somnambulism: “no one in perfect sanity walks about in his sleep, or performs any domestic offices; and in respect to the mind, we never exercise our reason or recollection in dreams.”⁴⁰⁰ The faculty of the imagination was responsible for the content of dreams while the physiological machinery of the muscles manipulated the body through movements with varying levels of input from nervous irritability or debility.⁴⁰¹ Darwin found that sleep could be induced mechanically through conditions, like spina bifida, or tumor. He supplied on delightfully deistic example relayed by the canal engineer Mr. Brindley regarding a man who would extend “himself across the large stone of a corn-mill, and that by letting the stone whirl,” would fall asleep “before the stone had gained its full velocity.” It was supposed the mechanical sleeper “would have died without pain by the continuance or increase of the motion.” Centrifugal force would have made his brain implode, in other words. One may dispute the claim of painlessness.⁴⁰²

In *Zoonomia*, and the year 1796 in general, somnambulism had not yet been articulated as a disease of the mind within medicine. There was a great deal of categorical blurring between somnambulism and the ephemeral “reverie” that became popular with the Romantics a decade or so later. Darwin could not quite bring himself to commit to separating “reverie” entirely from somnambulism, but was also quite in favor of wielding somnambulism as an example of disease. To resolve his own vertigo on the topic, Darwin filed sleepwalking in both “reverie” and in the

³⁹⁹ Darwin, *Zoonomia*, 144, vol.1.

⁴⁰⁰ Darwin, *Zoonomia*, 144-145, vol. 1.

⁴⁰¹ Darwin, *Zoonomia*, 145, vol. 1. Benjamin Rush would echo Darwin’s notion that certain parts of sleep were the result of disease, such as the nightmare or “incubus.”

⁴⁰² Darwin, *Zoonomia*, 159, vol. 1.

Disease Classes III.1.1.9 “Of Volition,” in Volume II of *Zoonomia* under the heading *Somnambulismus*. The interchangeability of the two conditions contributed later on to the delay in physicians automatically assigning somnambulism to the realm of mental disease.

“Sleep-walking is part of reverie,” Darwin wrote.⁴⁰³ “Those persons who are said to walk in their sleep are affected with reverie to so great a degree, that it becomes a formidable disease: the essence of which consists in the inaptitude of mind to attend to external stimuli.” Reverie was described as an intermediate state between normal awareness of one’s sense-laden surroundings and abstraction. Reverie was a disorder of thought in which trains of thought blotted out the landscape of one’s typical sensorium until they were “exhausted” and “we return with surprise, or with regret, into the common track of life.” And it was something of a double bind. On the one hand, those absorbed in “reading a romance” might “forget their usual time of sleep” and “neglect meals,” or participate in other useful escapes, such as becoming “insensible to torture of the rack.” Being a condition dependent on volition, unlike sleep or delirium, reverie could also be taken to an extreme. Darwin judiciously pointed out that if “the whole sensorial power is so employed on these trains of complete reverie, that, like the violent efforts of volition, as in convulsions or insanity... they preclude all sensation consequent to external stimulus.”⁴⁰⁴ It seemed, though Darwin was navigating rough waters between somnambulism and reverie, that volition was the key aspect to classifying both states. Sleep walking, thus, could both be reverie and somnambulismus because muscles and mind were operationally different when it came to volition.

Choosing a case to illustrate sleep-walking as reverie, Darwin selected the case of an “elegant young lady” who was doubly blessed with “light eyes and hair,” as well as youth

⁴⁰³ Barnard and Shapiro, *Edgar Huntly*, 202.

⁴⁰⁴ Darwin, *Zoonomia*, 161, vol. 1.

(seventeen years of age), but inevitably cursed with the “wonderful malady” of sleep-walking reverie soon after her “usual menstruation.” This poor young woman was subject to “vehement convulsions of almost every muscle of her body,” fruitless attempts at vomiting, “the most violent hiccoughs that can be conceived” (and how), and then muscles spasms. Unluckily for her, “the reverie began suddenly.” She began to talk to “imaginary persons” and could not be revived by any means. Evidently she went through this process every day, continuing the conversations with her imaginary companions where she left off, and lacked any memory of what occurred during her convulsion. It is curious that Darwin did not mention double consciousness, but it is likely that the convulsive nature of the episodes made it more appealing for reverie. Like the women before and after her impinged upon by this strange condition, Darwin’s young lady, when in her reverie, was moody, musical, and especially good at reciting poetry. She said the usual, dreadful things, such as “I love the colour black” and was eventually cured with enormous doses of opium.⁴⁰⁵ Darwin could find no evidence of “suspension of volition” in this case, and thus could not rule out the diagnosis of reverie. As he charmingly wrote of the mind-body problem – that is, could the mind and muscles have separate volitions – this sorely afflicted young woman seemed to have enjoyed “the natural motions of the arterial system” as they continued “by their association with each other” just “as the heart of a viper pulsates long after it is cut out of the body, and removed from the stimulus of the blood

Sleep-walking associated with reverie was “totally different from sleep” because the “essential character of sleep consists in the total suspension of volition, which in reverie, is not affected.” Reverie, at its extremities, was a disease related to epilepsy and catalepsy.⁴⁰⁶

⁴⁰⁵ Darwin, *Zoonomia*, 162-163, vol. 1.

⁴⁰⁶ Darwin, *Zoonomia*, 165, vol. 1.

Sleepwalking was simply the end of the line: as far as reverie could take the mind.

Somnambulismus, however, was a slightly different disease, also manifested through sleepwalking. Somnambulism was marked by “voluntary exertions to relieve pain.” For a somnambulist, the “muscles are subservient to the will” as well as the ideas of the mind.⁴⁰⁷ The element that seemed to most distinguish the disease of somnambulism from the disease of sleepwalking reverie was the matter of somnambulists having the ability to “become sensible of the objects they attend to” in the outer world, without those objects asserting any violence against the somnambulist. This was a more frightening scenario indeed. The reverie-stricken individual could not force himself or herself to become sensible to external objects; they were at the mercy of the train of associations tunneling through their minds.

This disease of somnambulism “arises from excess of volition, and not from suspension of it.” Somnambulism was the umbrella disease that allowed sleepwalking reverie to occur; reverie was a sufficient, but not necessary condition of Somnambulism. Darwin could not quite put his finger on this concept, but managed to come close in stating that, “Somnambulismus is a part of reverie, somnambulism consisting in the exertions of the locomotive muscles, and reverie in the exertions of the organs of sense.” The purpose of both was to relieve pain.⁴⁰⁸ The problem with stringing somnambulism, sleep-walking, and reverie together so clumsily was that Darwin could not be entirely certain that the engines of locomotion were entirely independent of the tribes of ideas camping out in the mind. The most dangerous figure that could emerge from this disease binary was an unconscious somnambulist who had far more volition than anyone ought to possess, the power of external object fixation, and a lack of the tempering process of reverie.

⁴⁰⁷ Bernard and Shapiro, *Edgar Huntly*, 202.

⁴⁰⁸ Bernard and Shapiro, *Edgar Huntly*, 203.

While Darwin maintained that somnambulists were engaged with reverie, the difference between occasional perception of stimuli in reverie, and fixation in somnambulism was vast.⁴⁰⁹

Charles Brockden Brown, in inventing the fictional male American somnambulist, worked through this problem of somnambulism without significant reverie in the character of Edgar Huntly, an orphan in Pennsylvania back-country, overwhelmed by his sensibility, and decaying madly into an unrecognizable “savage” in the wild, while seeking justice for the murder of his friend Waldegrave. *Edgar Huntly* is a marvelous American novel, rich with metaphor and descriptive of the social and political tensions that convened on the middle ground between Quaker merchants and displaced Native Americans. Early republic readers thought the book was a scandalous marvel too. Writing a biography of Charles Brockden Brown in 1815, William Dunlap wrote of Brown’s “fourth romance”: “the author has chosen for a cause by which to produce effects at once stupendous and mysterious, that disease, which is called somnambulism.” Stupendous and mysterious effects were caused by somnambulism, admittedly “a hitherto not sufficiently explained malady.” While Dunlap was familiar with the frequency of published and discussed interest in the dire malady affecting volition, he praised Brown for being the first to use it as a “foundation for fiction.” Praise was likewise doled out for Brown’s forays into “self-combustion and ventriloquism,” topics very much objected to by contemporary readers.⁴¹⁰ Dunlap seems to have thoroughly enjoyed summarizing – or perhaps more accurately – abridging Brown’s novels, though his pithy summation of the entire story is one of the best accounts of what contemporaries thought it was about. Dunlap wrote: “Edgar Huntly, unites to

⁴⁰⁹ Bernard and Shapiro, *Edgar Huntly*, 204.

⁴¹⁰ William Dunlap, *The Life of Charles Brockden Brown: Together With Selections from the Rarest of his Printed works, from his Original Letters, and from his Manuscripts Before Unpublished. In Two Volumes* vol. 1 (Philadelphia: Published by James P. Parke, 1815), 30.

events, founded on somnambulism, “incidents of Indian hostility, and the perils of the western wilderness.” The hero tells his own story.”⁴¹¹

The subplot of somnambulism is convoluted, but ultimately relies on the trope of doubles. Edgar Huntly discovers the weeping Irishman Clithero, who works for a neighbor, under an Elm tree. Clithero is burying boxes in the ground, and in his passion of fear and anger, Edgar assumes that Clithero murdered Waldegrave. Instead, he discovers that Clithero is a somnambulist (one whom we discover is actually driven to murder in a frenzied reverie multiple times over; if Brown loved one thing, it was a bloody murder) with a mysterious tale of lost love, dispossession, and synchronous twin injuries (though Brown wrote it as a specific sympathy between identical twins). Clithero vanishes and as Edgar grows continuously more nervous and spends increasing amounts of time in the wilderness looking for him, he becomes more savage. Eventually Edgar begins to delve deeper and deeper into the woods in search of Clithero and finds himself in not one, but two, man-on-panther fights: he wins both. He saves himself by murdering a clan of Native Americans who have kidnapped a white child, and is so savagely unrecognizable in the protracted battle of the third act that his own teacher mistakes him for an Indian and attempts to shoot him with a musket. Edgar is spared, and it is revealed that Clithero is in fact a somnambulistic killer, who in murdering (by accident) the twin brother of his patroness, attempted to murder her as well to spare her the physical hurt and harm she would endure as a result of the twin-murder. It is revealed by the teacher, Sarsefield, and husband of Clithero’s patroness, Mrs. Lorimer, that Clithero is actually just deranged and is committed to murder Mrs. Lorimer in a never-ending cycle of over-excessive, frenzied volition. The novel ends with Clithero being permanently confined to “the noisome dungeon of a hospital” and Mrs.

⁴¹¹ Dunlap, *The Life of Charles Brockden Brown*, 30.

Lorimer escaping somnambulist inflicted twin telepathy by a lunatic, once again.⁴¹² The plot suggests that somnambulism and insanity were not easily distinguishable from one another, but were still seen as separate conditions – especially in public understanding of the mind.

Edgar is Clithero's double, or twin, in the narrative and as he chases him through the savage landscape, he gradually loses control of his self-governance and becomes a shadow somnambulist himself. The signs first appear when he discovers that a packet of letters from Waldegrave have vanished from his trick desk that only he knew how to open. Dunlap delights in this twist writing, "that restlessness and anxiety had produced in Edgar the disease of somnambulism."⁴¹³ Edgar himself realizes his predicament when he goes to sleep in his house and wakes up on the floor of a cavern without any idea of where he is. Brown's imagining of the sensation of somnambulism is revealing of how he might have interpreted the medical literature. Edgar, as the narrator describes his awakening: "I emerged from oblivion by degrees so slow and so faint, that their succession cannot be marked... My thoughts were wildering and mazy, and though consciousness were present, it was disconnected with the loco-motive or voluntary power."⁴¹⁴ Having read *Zoonomia* intently, Brown must have developed the understanding of somnambulism as a disease with or without reverie. Edgar Huntly was not so lucky as to have reverie to accompany him to savage country. Shaking off somnambulism was physically arduous. "I attempted to open my eyes," Edgar laments, "the weight that oppressed them was too great for a slight exertion to move." He "attempted to rise, but my limbs were cold, and my joints had almost lost their flexibility." Clammy, and throbbing with bodily pain, Edgar shared his

⁴¹² Brown, *Edgar Huntly*, 194.

⁴¹³ Dunlap, *The Life of Charles Brockden Brown*, 35.

⁴¹⁴ Brown, *Edgar Huntly*, 107.

greatest woe: that which threw me into deepest consternation was, my inability to see. I turned my head to different quarters, I stretched my eye-lids, and exerted every visual energy, but in vain.” He was “wrapt in the murkiest and most impenetrable gloom.”⁴¹⁵ Blindness was a hallmark condition of somnambulism, suffered most intensely by Jane Rider and Mary Reynolds.⁴¹⁶ Naked, blind, suffering intense pain and thirst, and wielding only “an Indian Tomhawk” Edgar goes on to fulfill his unconscious purpose of murdering native Americans, but not before he undergoes the torments of somnambulism.

As Edgar wanders through the cavern, he contemplates that “surely my senses were fettered or depraved by some spell. I was still asleep, and this was merely a tormenting vision, or madness had seized me, and the darkness that environed and the hunger that afflicted me, existed only in my own distempered imagination.” Somnambulism brought him into a state of madness – much unlike the nation-state he had left behind when his will submitted to the volition of his muscles. He was so hungry he “felt a strong propensity to bite the flesh from my arm” and his “heart overflowed with cruelty.”⁴¹⁷ He ends up satiating himself on a panther that he kills, though he finds the whole process immensely disgusting. It is only when Edgar comes across the campsite of the Indians he is about to slaughter that he is able to differentiate himself from the bestial creature that tore apart a raw panther with his ferocious hunger and human teeth. He is temporarily restored to his reason explaining, “no spectacle was more adapted than this to excite wonder and alarm. Had some mysterious power snatched me from the earth, and cast me, in a

⁴¹⁵ Brown, *Edgar Huntly*, 107.

⁴¹⁶ While the history of vision could factor heavily in this dissertation, I ultimately decided to leave it to future scholarship. Some references for the social and scientific history of vision see: Nicholas J. Wade, *A Natural History of Vision* (Cambridge, MA: MIT Press, c1998); Lorraine Daston and Peter Galison, *Objectivity*, (New York: Zone Books, 2007); Stuart Clark, *Vanities of the Eye: Vision in Early Modern European Culture* (Oxford: Oxford, UP, 2007).

⁴¹⁷ Brown, *Edgar Huntly*, 110.

moment, into the heart of wilderness? Was I still in the vicinity of my paternal habitation, or was I thousands of miles distant?”⁴¹⁸ Perhaps no other phrase in the entire novel so well describes the vision Americans had of their forthcoming vast continent. Somnambulism was a land so distant from the familiar that it was akin to being ripped from the ground, flown through the air, and deposited in an alien world. Brown’s memorable novel entrenched the figure of the voracious male somnambulist as a murderer in the American literary consciousness. The real somnambulist murderers (of whom there were at least three that achieved notoriety in a fifty year period – 1790-1845), despite summoning fantasies of degeneracy and savagery in the wilderness, would stimulate a much more critical debate on the role of the mind in somnambulism and the culpability of a criminal who committed heinous crimes on the defense of being diseased.

The Trial of Abraham Prescott

The history of the sleepwalking defense is both long and short. Cases in Europe date back to 1313, notably the Council of Vienne, which ruled that a sleepwalking person was not responsible if they happened to kill or wound someone in the act.⁴¹⁹ It is short in the sense that the history has been covered primarily in legal articles, which are brief and to the point. In all cases, Abraham Prescott’s name is not mentioned. This is a peculiar oversight. Putting somnambulism and the law together is a known quantity. For example, *Fain v. Commonwealth*,

⁴¹⁸ Brown, *Edgar Huntly*, 115-116. Upon seeing the Indians, Edgar recollects that his family had been “murdered in their beds” during a raid, and their home pillaged and burnt to the ground. He describes the geopolitical state of Pennsylvania: “I knew that, at this time, some hostilities had been committed on the frontier; that a long course of injuries and encroachments had lately exasperated the Indian tribes; that an implacable and exterminating war was generally expected. We imagined ourselves at an inaccessible distance from the danger.”

⁴¹⁹ Alexander Bonkalo, “Impulsive Acts and Confusional States During Incomplete Arousal From Sleep: Criminological and Forensic Implications,” *Psychiatry Quarterly* 48 (1974):400–409; Mike Horn, “A Rude Awakening: What to Do With the Sleepwalking Defense,” *Boston College Law Review* 46 no. 149 (2004-2005): 149-182.

an 1879 case from the Court of Appeal of Kentucky is cited by Mike Horn as one of the earliest instances of the use of the sleepwalking defense in American legal history. Fain shot the man who tried to wake him and claimed that the court ought to have taken his history of sleepwalking into account for an acquittal.⁴²⁰

The accepted historical narrative for the insanity defense determines, in large part, where the history of the sleepwalking defense should to fall. In this narrative, *Prescott* is an oddity. The year 1833 is an outlier in the history of major court decisions on insanity defenses are concerned.⁴²¹ In 1843, a Scottish woodcutter named Daniel M’Naghten (or McNaughten: no history-based convention has been firmly established as to spelling) shot and killed Edward Drummond, the secretary of Prime Minister Robert Peel. The fifteen high court judges met to change the legal understanding of insanity. The defendant had to prove beyond a reasonable doubt that the mens rea was corrupted by his or her inability to distinguish right from wrong. The famed rule that resulted from the trial states that it must be proven that “at the time of committing the act, the accused was laboring under such a defect of reason, from disease of the mind, as not to know the nature and quality of the act he was doing, or if he did know it, that he did not know what he was doing was wrong.”⁴²² This standard would be applied to all subsequent insanity defense claims reaching trial.

⁴²⁰ Horn, “A Rude Awakening,” 160-161. “The sleepwalking defense is asserted rarely in American courts, leaving judges and criminal defendants wondering how the defense should be applied. Sleepwalking has been raised under three criminal law defenses: automatism, unconsciousness, and insanity.”

⁴²¹ “Daniel H. Corey: Madman,” in P.R. Hamblin, *United States Criminal History; Being a True Account of the Most Horrid Murders, Piracies, High-Way Robberies, &c...* (Fayetteville: Mason & De Puy, Printers, 1836), 187-189. There is a record of at least one successful insanity defense case in the United States preceding Prescott. The defendant, Daniel H. Corey, who suffered from hereditary insanity, held his family hostage and then killed two of his neighbors. He was acquitted due to insanity in June 1829.

⁴²² As cited in the article “Insanity Defense.” *Legal Information Institute*. Cornell University Law School. http://www.law.cornell.edu/wex/insanity_and_diminished_capacity (Accessed January 27, 2014). See also Alan Rogers, *Murder and the Death Penalty in Massachusetts* (Amherst: University of Massachusetts Press, 2008), 209. There is a wide literature on the history of the insanity defense in England and the United States. For specific

United States courts adopted the M’Naghten rule in the years following the verdict and ruling. The case most often cited in American legal history involves the Massachusetts Supreme Judicial Court’s ruling during the trial of Abner Rogers (*Commonwealth v. Rogers*). Isaac Ray, the preeminent medical jurisprudence expert in the late 1830s and early 1840s, helped to refine the M’Naghten rule in American jurisprudence by encouraging Justice Lemuel Shaw, presiding, to prompt the jury to consider “whether the prisoner in committing the homicide, acted from an irresistible and uncontrollable impulse: If so, then the act was not the act of a voluntary agent, but the involuntary act of the body, without the concurrence of the mind directing it.”⁴²³ The test of irresistible impulse met with transatlantic resistance and popular unease. It did, however, become a part of the American approach to the insanity defense. Shaw’s carefully worded definition of irresistible impulse is a direct descendent of the theories on somnambulism which were adopted from Darwin in the late 1790s. The involuntarily acting body, whose volition had been deprived by absence of mind and will, became the test for the insanity standard in the 1830s and 1840s.⁴²⁴

The irresistible impulse doctrine was based on decades worth of medical speculation on the causes of sleepwalking; somnambulism had proven to be a good way to examine bodies operating without volition. Following *Commonwealth v. Rogers*, the next famous nineteenth-century insanity defense case involved another assassination – that of President Garfield in 1881

information on the McNaughton trial see: Thomas Maeder, *Crime and Madness: The Origins and Evolution of the Insanity Defense* (New York: Harper and Row, 1985). For a broad history of the insanity defense from Roman law to present day see: Daniel N. Robinson, *Wild Beasts & Idle Humours: The Insanity Defense From Antiquity to the Present* (Cambridge MA: Harvard University Press, 1996).

⁴²³ Rogers, *Murder and the Death Penalty*, 209; Maeder, *Crime and Madness*, 48-49. Rogers writes that Shaw’s instructions were “the first opinion delivered by a U.S. court of last resort on the criminal responsibility of the insane.” The instructions led the jury to “a verdict of not guilty by reason of insanity.”

⁴²⁴ Rogers, *Murder and the Death Penalty*, 210; Maeder, *Crime and Madness*, 49-50.

by a man from Illinois named Charles J. Guiteau. Rosenberg's assessment of nineteenth-century American jurisprudence regarding criminal responsibility gives us an indication of how incremental the development of the insanity defense was:

“The late nineteenth-century controversy over criminal responsibility was, however, more complex than a simple struggle between conservative and liberal, orthodox believer and agnostic... All assumed that insanity was, at least ultimately, a physical disease; all assumed as well that emotional pressures in an individual's environment could cause mental illness. Differences, as we shall see, arose over the problem of symptomatology.”⁴²⁵

Guiteau's defense showed the impasse one faced in trying to circumvent the M'Naghten rule. Rosenberg writes of the case, “even those jurists and lawyers unenthusiastic about the M'Naghten rule could see little in the way of a workable successor to it.” Lawyers and medico-legal theorists did not want to reintroduce “moral insanity,” an ambiguous category of behavior from earlier in the nineteenth century, back into the justice system. If insanity was a disease, then somatic and hereditary explanations needed to be protected.⁴²⁶

In 1834, however, the germ of “irresistible impulse” was cultured in the Boston courtroom that housed the trial of Abraham Prescott. The ramifications of introducing the sleepwalking defense into the narrative of the insanity defense are significant only in the sense that the case indicates a juridical move towards attaching a firm definition of volition to somnambulists as a subset of insane people. This trial is the moment when physicians and lawyers struggled for control over defining criminal culpability in incidences of unconsciousness or absence of will in the commission of a crime. The fact that this decision precedes McNaughten by a decade adds a fascinating twist to the long history of the insanity defense.

⁴²⁵ Charles E. Rosenberg, *The Trial of the Assassin Guiteau: Psychiatry and Law in the Gilded Age* (Chicago: University of Chicago Press, 1968), 63.

⁴²⁶ Rosenberg, *The Trial of the Assassin Guiteau*, 102. By 1881, moral insanity had become a reified term with specific connotations indicating materialism and “moral subversion.” “Moral insanity did clearly imply an interpretation of criminal responsibility that would, if adopted, become inevitably more open-ended” leaving control in the hands of medical, rather than legal professionals.

Prescott was an intermediary point between the “wild beast” test derived from the 1736 trial of Englishman Edward Arnold for murder, and then from M’Naghten.⁴²⁷

From the early-eighteenth century to the early-nineteenth century, the interpretation of the criminal with mental problems pivoted from that of a depraved sinner to a diseased mind.⁴²⁸ By introducing medicine into the legal parameters of guilt, the concept of deviance, and the figure of the “mental alien” – someone who was mad or set apart from the average individual – was recast as a criminal.⁴²⁹ The landscape of mental jurisprudence in the first decades of the nineteenth century drew from the new medical explorations of the mind. As shown especially in Rush’s lectures, there was an emphasis on both somatic causes of insanity and “faculty psychology,” which was entangled with phrenology. Both relied on the precept that there were areas of the brain that generated particular behaviors and emotions. Faculty psychology allowed for the theory of monomania to gain widespread usage; if a seemingly sane individual suddenly went mad over one specific incident or notion, it could be attributed to a defective faculty in the mind and explain the continuity of volition. This defense of “partial insanity” would prove to fit the prevailing medical theories and extricate individuals from grappling with the difficulties of moral insanity. Eigen expands on the thematic psychological approaches that were applied to jurisprudence in insanity cases. Between the years 1760-1843, Eigen identifies four broad categories of insanity. “Broadly termed *associationism*, this school addressed principles of

⁴²⁷ Karen Halttunen, *Murder Most Foul: The Killer and the American Gothic Imagination*. (Cambridge MA: Harvard University Press, 1998), 211, 214-215. Halttunen’s excellent book on the trajectory of crime literature in the United States addresses this topic throughout. As Halttunen quotes from Judge Tracy presiding over the Arnold trial: “it must be a man that is totally deprived of his understanding and memory, and doth not know what he is doing, no more than an infant, than brute, or a wild beast.” The “wild beast” test was used as the general standard for determining insanity throughout the eighteenth century in the Anglo-imperialized world. See also Maeder, *Crime and Madness*, 10; Robinson, *Wild Beasts*, 134-138. The first challenge to the “wild beast test” occurred in England in 1800 in the James Hadfield trial (ironically, he tried to assassinate mad King George).

⁴²⁸ Halttunen, *Murder Most Foul*, 209.

⁴²⁹ Halttunen, *Murder Most Foul*, 210.

thought common to all persons. A second school aimed to explain the opposite: the particularity of character that distinguished one person from another. The explanation for such idiosyncratic behavior was sought in pronounced physical alteration of specific organs of the brain. Among the behaviors of most interest to phrenologists were instances of derangement limited to a particular sentiment or idea and linked directly to extraordinary, seemingly inexplicable episodes of criminal behavior. A third school of medical psychology, which grew out of French asylum supervision, broke with the associationist tenet that madness was necessarily a matter of intellectual delirium and asserted instead the existence of a type of insanity that was unaccompanied by mental confusion. Finally, borrowing from both associationism and the French clinicians, a fourth approach posited a fully formed moral insanity, in which the afflicted person's moral sensibilities, not ideas per se, were altered. This insanity was revealed in the very absence of a motive for the outrageous act." The testimony in the Prescott trial would address associationist thinking through the relationship between dreaming and somnambulism, phrenology by means of examining Prescott's irregular head shape, monomania as a category on its own, and the possibility of moral insanity, though by 1834 it was no longer favored in the United States. Eigen identified four categories of psychology that were used to explain mental impairment between 1760 and 1843. Associationism, phrenology, lesion-based insanity allowing for monomania, and moral insanity were the four categories of psychological thought at the disposal of doctors attempting to make sense of somnambulism. The testimony in the Prescott trial would address associationist thinking through the relationship between dreaming and somnambulism, phrenology by means of examining Prescott's irregular head shape, monomania as a category on its own, and the possibility of moral insanity, though by 1834 it was no longer favored in the United States.⁴³⁰

⁴³⁰ Halttunen, *Murder Most Foul*, 215-216; Joel Eigen, *Witnessing Insanity: Madness and Mad-Doctors in the*

The Prescott trial was a stage for testing the longstanding theories of medical jurisprudence that circulated throughout the Anglo-Atlantic world. The precise role of a medical witness as opposed to a lay witness, chosen to provide evidence of character, was very much in flux in the nineteenth century. The purpose of medical testimony in the courtroom was not always clear, but the proponents of a separate, expert witness approach were eager to explain what a physician ought to do at all stages of a criminal investigation in order to set himself apart as a professional with tacit, specialized knowledge that an ordinary person would not have access to. The Prescott trial included many of this first generation of American expert medical witnesses who, in testing out somnambulism against theories of criminal insanity, also did much to ensure that the edicts laid out in medical jurisprudence would enter common practice by expert witnesses (though the use of medical expert witnesses remains highly contestable to this day).

By the late-eighteenth century, medical jurisprudence was thought of as “a kind of medical knowledge, which is not so much concerned in the cure of diseases, as in the detection of error and conviction of guilt.” Samuel Farr, the author of this tract on categories of criminal insanity and behavior, published his work in English in 1787, based on a treatise first published in Geneva. This category of knowledge was split into two sub-divisions: “in one of which is explained those rules by which a court may form an accurate opinion of the cause; in the other, an acquaintance is acquired with the best methods preserving the health of our fellow citizens.”⁴³¹ It was broadly understood throughout the eighteenth century that there were two general classes of people in whom “the ideas of the mind are distracted, and thought and reason

English Court (New Haven: Yale University Press, 1995), 60.

⁴³¹ Samuel Farr. “Elements of Medical Jurisprudence...” in Thomas Cooper. *Tracts on Medical Jurisprudence...* (Philadelphia: Published by James Webster, 1819), 65.

are confused and destroyed.” A mad person was either considered insane or, in cases of limited mental capacity, to be diseased by idiotism.⁴³²

Medical jurisprudence instructed practitioners of medicine in the law to pay close attention to the brain and the body. The connection between the two, fortified by good medical jurisprudence practices, would help medical witnesses later testify affirmatively that insanity was a disease that could cause criminal behavior. William Dease, who published his *Remarks on Medical Jurisprudence* in 1793, insisted on the importance of proper anatomical inspection of the corpse post-mortem. Dease informed his readers of the dangers of “the melancholy effects of popular prejudice when joined with medical ignorance” during a trial. He called for “surgeons to avail themselves of every opportunity that may tend to improve them in practical anatomy” so that they could “discriminate with accuracy between a sound and diseased state of parts.”⁴³³

Dease outlined the proper procedure for dissecting a corpse, including the order of cavity examination, as well as the proper lighting and standard of cleanliness to avoid error. In England, juries were often called to observe the inquest to determine the facts of death, making it all the more critical for a surgeon to be accurate and precise in his evaluation.⁴³⁴ Dease was especially concerned with the incidence of wrongful convictions stemming from inaccurate medical testimony during trials. He advised the “young surgeon to retire” before making his case to “reconsider his report.” The surgeon’s “character is at stake, as well as the accused person’s life,” Dease warned: “both by imprudence may be irretrievably lost.” He advised medical witnesses to use “as few technical terms as possible” to both communicate properly with the

⁴³² Farr, *Elements*, 66-67.

⁴³³ William Dease, *Remarks on Medical Jurisprudence; Intended for the General Information of Juries and Young Surgeons* (Dublin, James Riley [1793]) in Thomas Cooper, *Tracts on Medical Jurisprudence....* (Philadelphia: Published by James Webster, 1819), 88.

⁴³⁴ Dease, *Remarks*, 96.

jury, and avoid being embarrassed by lawyers.⁴³⁵ To avoid “the abuses in our medical jurisprudence” leading to wrongful conviction and the life of penury and despair that was to follow it, Dease recommended that magistrates should not write warrants committing a person to jail on the oath of the victim alone. In a just procedure, the attending doctor ought to provide a certification that the life of the victim was in danger.⁴³⁶ He also mused on the dangers inherent to a physician’s practice and reputation upon engaging in medical witnessing. “To attend an inquest,” Dease wrote, “is, to the surgeon, unprofitable, the loss of time highly inconvenient, and in the event may be productive of very disagreeable consequences; for he is bound to appear at the trial.” If the surgeon were to miss trial, he faced a heavy penalty in the form of a fine. Dease, however, did not see these pitfalls as acceptable reasons to avoid participating in legal trials.⁴³⁷

George Edward Male’s treatise, *An Epitome of Juridical or Forensic Medicine; for the use of Medical Men, Coroners, and Barristers* (1819), provided more practical instructions for what physicians should do at a the scene of a crime. He laid out procedures for documenting all the circumstances at the scene of the crime, and made a note for coroners to “first ascertain, whether the body is really dead, and, if any spark of life remains, endeavour to call it into action.”⁴³⁸ He also recommended determining whether the death was natural or accidental, and when, where, and how any violence might have been committed. On the question of testimony, Male wrote “A medical man should found his evidence solely on demonstrative proof; for his declaration, whether founded on experiment or not, is assumed by the jury as fact, merely on his

⁴³⁵ Dease, *Remarks*, 102.

⁴³⁶ Dease, *Remarks*, 105.

⁴³⁷ Dease, *Remarks*, 108.

⁴³⁸ George Edward Male, *Epitome of Juridical or Forensic Medicine*, in Cooper, *Tracts on Medical Jurisprudence*, cxvii.

authority as a professional man.”⁴³⁹ The question of how a consulting physician should present himself and the medical facts to a jury of citizens did much to help professionalize the sub-specialty of forensic medicine within the professionalization of medicine itself.

One of most cited works on the proper performance of medical duties in a juridical situation was that of John Haslam whose work *Medical Jurisprudence: As it Relates to Insanity, According to the Law of England* (1817) was highly respected as a fount of knowledge in the field of medical-legal insanity opinions during the early nineteenth century.⁴⁴⁰ Haslam’s suggestions for physician conduct in court would surface in the Prescott trial. “The physician,” Haslam explained, “should not come into court merely to give his opinion – he should be prepared to explain it.”⁴⁴¹ The witness’s evidence ought to impress the judge, and be convincing to the jury,” Haslam instructed. He also ought to “submit his comprehension and feeling of the ordinary persons who are to appreciate his deposition.” The critical element in devising a common body of medical jurisprudence was to compile a way to talk about insanity without confounding the jury with technical terms, especially as many had already “formed their opinions of that state of mind which is denominated madness.”⁴⁴² Haslam told his readers that the “medical person’s” primary duty was to address the insanity of the defendant, not contemplate “how much reason he possesses, but how far, and on what topic he is insane.”⁴⁴³ How a physician was to go about doing this was less clear: “respecting the quantum of reason

⁴³⁹ Male, *Epitome*, cxx.

⁴⁴⁰ The original work can be cited as John Haslam, *Medical Jurisprudence: as it relates to Insanity, According to the Law of England* (London: Printed for C. Hunter, 1817). The excerpts in this chapter are taken from its inclusion in Cooper, *Tracts on Medical Jurisprudence*.

⁴⁴¹ Haslam, *Medical Jurisprudence*, 289.

⁴⁴² Haslam, *Medical Jurisprudence*, 291.

⁴⁴³ Haslam, *Medical Jurisprudence*, 291.

which the lunatic possesses, the physician may safely conclude where he betrays no derangement, that on such topics, he is sound of mind.”⁴⁴⁴ This dictum seems to have been the rule of thumb for physicians in luring out lunacy in all cases. Haslam, by highlighting Benjamin Rush’s earlier lectures on medical jurisprudence, helped to anticipate the M’Naghten rule by several decades, suggesting a good test for determining whether the insane could be held criminally responsible. His source was Benjamin Rush’s *Lectures on the Mind*, which he quoted at length in his treatise. “There appears to be something latent, and perhaps mischievous, in the terms Good and Evil, Right and Wrong, as applied to cases of insanity. If an insane person be responsible for his conduct, I know of no law which sanctions his confinement,” Haslam quoted from the American doctor.⁴⁴⁵ This idea of Rush’s would be the main factor in determining culpability within the insanity defense. And the insanity defense would be the protean form against which the somnambulism defense would be compared in the Prescott case.

Abraham Prescott was eighteen years old when he killed the wife of his employer, Sally Cochran, in Pembroke, New Hampshire. Though he “was not possessed of superior mental endowments” and “below average” in intellect, the Cochrans were fond of him in spite of some bizarre and confidence-destroying behavior. Prior to his murder of Mrs. Cochran, one night in January 1833, Prescott had “got up in the night,” gone to the trouble of making a fire, and then hit the Cochrans “in the head with an ax” in their sleep. He immediately confessed his act to another member of the household, and “stated he was unconscious of the act” until he saw a blood soaked Mr. Cochran struggling to get out of his bed. Evidently this event was “attributed to somnambulism at the time, and a statement to that effect was published in the Concord

⁴⁴⁴ Haslam, *Medical Jurisprudence*, 295.

⁴⁴⁵ Haslam, *Medical Jurisprudence*, 299.

papers.”⁴⁴⁶ Several papers picked up the story throughout January 1833, and it is a wonder that this first incident of somnambulistic violence did not result in the Cochrans severing ties.

An acquaintance of the family, Samuel Sargent, submitted the gruesome tale to the Lowell Mercury on January 9, 1833, describing an incident that had occurred a week earlier. Sargent dutifully reported that Mr. Chauncey Cochran asked him “to give the facts relative to an unhappy & almost unheard of occurrence of somnambulism.” It was the family’s request that “the public may not be led to form erroneous opinions respecting the transaction.” This was an unusual request: the Cochrans had been the victims of attempted axe murder and wished for nothing more than to set the record straight about somnambulism in the paper. The question, which would not be satisfactorily answered, even during trial, was why. The report from Sargeant describes Prescott’s movements on the night of his somnambulism incident. He had gone to bed early and between 10 p.m. and 11 p.m., had got up, “took a candle, went into the clock room, came back into the room where Mr. and Mrs. Cochran slept, at the time the clock struck eleven.” Owning a clock was a significant status marker, and critical to establishing a timeline of events. After 11:00 p.m., Prescott retrieved a buffalo skin, and lay down in front of the fire. At some point between 11 p.m. and 12 a.m., Prescott went to the woodshed, obtained an axe, went into the Cochrans’ bedroom, “and gave each of them a severe blow or blows on the side of the head, which left them entirely senseless.” After this bludgeoning, Prescott went and woke Chauncey Cochran’s mother, and “informed her that he did not know but he had killed Chauncey and his wife.”⁴⁴⁷ The couple survived.

⁴⁴⁶ *Number One. Murder, Trials, and Executions in New Hampshire. Report of the Trial of Abraham Prescott for the Murder of Mrs. Sally Cochran, of Pembroke, June 23, 1833. Executed at Hopkinton, January 6, 1836* (Manchester, NH: Daily Mirror Office, 1869), 5.

⁴⁴⁷ Samuel Sargent. *Messrs. “Hill; Barton; Mr. Chauncey Cochran; Pembroke; Occurrence; Somnambulism; Chamber; Transaction.” Lowell Mercury* (Lowell, MA) January 18, 1833, 2.

The New York Evening Post seems to have ignored Sargent's pleas for an accurate reproduction and embellished the story. The sensationalization of the story indicates both a growing popular readership, but also an intense interest in somnambulism persisting into the 1830s. The story promised to recount "an extraordinary case of Somnambulism... attended with melancholy and probably fatal consequences." Unintentionally correct about the fatal consequences, the story was certainly melancholy beginning with identifying the family in question as "Coffin." The write explained that Prescott had gone to bed early because his job the next day – washing day – was to arise at 4 a.m. and make a fire. He accidentally awoke at 11:00 p.m., and made a fire, thinking it was 4 a.m. The timeline shifts to 1:00 a.m., the time where Prescott fetched the axe. "He leveled a blow upon the head of Mrs. C. which broke her cheek-bone, and then upon that of Mr. C. which broke his scull. He then ran for the door, which being shut, he rushed against it with such violence as to wake himself up." In this version, he shrieked, and his screams awoke Cochran's mother, who fainted. Prescott, suddenly returned to his compassionate state, "laid her on the bed," one supposes on top of the bloody bodies of her children, and "ran for the neighbors, and then for the Doctors." The article's author imagined that Prescott had told "the persons who had assembled, that he dreamed two men were attempting to kill him, and was trying defend himself." Naturally, after this confession, he became "deranged." In between intervals of "bitter weeping," he "relapsed into a state of mental aberration." The story noted Prescott was "much beloved by the family, and no one suspects he had any evil intent."⁴⁴⁸

⁴⁴⁸ This story was taken from the *Jewel of Connecticut* but it is difficult to trace how the embellishments occurred, and at what point. It is unknown if this story is simply another version told by a different witness, or a gloss to attract more readers. In any case, it was sensational. "Extraordinary Case of Somnambulism," *Evening Post*, (New York), Jan. 18, 1833, 2.

The murder of Sally Cochran was reported with some surprise, indicating that the Cochrans had established credibility in their community, and were to be trusted regarding the character of Abraham Prescott. Two of the reports of the murder report on the January axe bashing as if to say the Cochrans should have seen it coming. Somnambulist murder was exceptionally rare, however, and the public did not know what to make of it. In July 1833, The Lowell Journal's story was republished in the *Massachusetts Spy*. The author wrote, "our readers undoubtedly recollect that during last winter" the Cochrans were "assaulted in the night" and the incident was attributed to a case of somnambulism. Following the paper trail, the story from the Lowell Journal, was in turn grabbed from *The Spirit of Enquiry*, a Concord, New Hampshire paper. What was ultimately reported was that Prescott lured Sally Cochran on a strawberry picking expedition and then "took a stake and beat her until she died." Without any remorse, Prescott then went back to the house, picked up some light trial reading for pleasure, and eventually reported to Chauncey Cochran that his wife was dead. "She was found dead with her head horribly bruised."⁴⁴⁹ *The Boston Commercial Gazette* also picked up the story from *The Spirit of Enquiry*, adding a detail. "A young lady" saw Prescott after the murder and "observed that he appeared very strange, and was afraid to approach him." This mysterious young lady was credited with tattling on Prescott to Chauncey Cochran, who "found his wife just expiring."⁴⁵⁰

The trial report sketched another version of the crime scene. The lure of picking strawberries was still a key element to the story. In this version, the one revealed in court, Chauncey Cochran was reading in his home when he heard strange noises coming from the barn. He found Prescott "acting very strangely." When he questioned him, Prescott admitted he had

⁴⁴⁹ "Murder." *Massachusetts Spy* (Worcester, MA), July 3, 1833, 2.

⁴⁵⁰ "Murder." *Boston Commercial Gazette*, (Boston, MA), June 27, 1833, 2.

“struck” and thought he had “killed” Sally Cochran. Prescott then took the new widower to the spot where Sally Cochran “was found, dragged into a clump of bushes, and just yielding her last breath.”⁴⁵¹ Prescott was immediately arrested and confined to jail until the September term of the Court of Common Pleas at Merrimack. Given the extensive coverage of Prescott preceding the murder, “fifty-three names were called before a jury could be empanelled to try the respondent.” Ichabod Bartlett, of Portsmouth NH, and Charles H. Peaslee, Esq. of Concord, NH were appointed counsel for Prescott. Prescott pled not guilty and his counsel won a stay until September 1834. Attorney-General George Sullivan, Esq. and county solicitor John Whipple, Esq. were appointed as prosecution, compelled to make their case before Chief Justice William M. Richardson, Associate Justice Joel Parker, and the Common Pleas Justices Benjamin Wadleigh and Aaron Whittemore.⁴⁵²

The opening speech for the state presented by John Whipple, who had held a number of administrative positions during his years as a lawyer in Massachusetts and New Hampshire, instructed the jury that Prescott had “feloniously wilfully and with malice aforethought taken the life of the late Sally Cochran – a crime, gentlemen, revolting to the feelings of every humane and enlightened mind.”⁴⁵³ It was clear that the state had no interest in encouraging a somnambulism defense and was proceeding on the supposition that Prescott had full use of his faculties at the time of the murder. Charles Hazen Peaslee, one of Prescott’s two attorneys, painted a very different picture of the defense. Prescott was laid out as a “helpless youth” who had little assistance from the government in “preparing his defense from his confinement to a dungeon,”

⁴⁵¹ *Murder, Trials, and Executions*, 5.

⁴⁵² *Murder, Trials, and Executions*, 5.

⁴⁵³ John D. Lawson, ed. *American State Trials: A Collection of the Important and Interesting Criminal Trials which have taken place in the United States, from the Beginning of our Government to the Present Day*. Volume V. (St. Louis: F.H. Thomas Law Book Co., 1916), 743.

and was put at even greater a disadvantage “from the nature of his disease.”⁴⁵⁴ Peaslee was determined in his charges of prosecutorial misconduct, denouncing the “witnesses, if there are such to be brought forward, who, whether from a feverish ambition to make themselves conspicuous, or from a more culpable motive, have lurked about the prisoner’s cell to get the sayings of an insane man.”⁴⁵⁵

Peaslee made a grand argument for insanity on behalf of Prescott. “We shall prove to you,” he said, “that real lunatics are desirous, that it is frequently characteristic of them to be desirous, of being deemed free from that malady, and that they often assiduously endeavor to conceal from observation the lapses of thought, memory and expression which tend to betray them, while the feigned, of course, never desire to conceal it.” According to Peaslee, “real lunatics” were willing to blame their acts on any cause except “the true one, their madness.” Prescott’s own testimony, on this definition of insanity, “instead of showing guilt, give additional proof of his derangement and innocence.”⁴⁵⁶ Peaslee pled with the jury to try the case as though they had never heard it before, nor seen the evidence admitted. “If from the darkness in which is enveloped the subject of insanity, particularly in this State, inasmuch as we have not like some of our sister States, an insane hospital furnishing a school for the knowledge of lunacy,” a lack of diverse experience amongst physicians, and “over-zealous anxiety” Peaslee intoned, “someone should be sacrificed for the loss of a valuable citizen.”⁴⁵⁷ Prescott’s insanity was so beyond

⁴⁵⁴ Lawson, *American State Trials*, 753.

⁴⁵⁵ Lawson, *American State Trials*, 753-54.

⁴⁵⁶ Lawson, *American State Trials*, 754.

⁴⁵⁷ Lawson, *American State Trials*, 756.

doubt, he continued, that if he were found guilty “then indeed will this trial be a bare mockery, and the temple of justice will be perverted to the most unhallowed of all purposes.”⁴⁵⁸

Fearing indifference or weariness with the usual grandstanding on the topic of the jury’s objectivity, Peaslee cited legal authorities on the definition of murder and madness. From Black he recited: “it [murder] must be committed by a person of sound memory and discretion; for lunatics or infants, as was formerly observed, are incapable of committing a crime.” From Chitty’s *Criminal Law*: “Madness is another cause which may render a man incapable of crime.” Black’s rule on deficiency of the will was expressed: “a deficiency in will... arises also from a defective or vitiated understanding, viz., in an idiot or a lunatic. For the rule of law as to the latter, which may easily be adapted also to the former, is that a madman is punished by his madness alone.” Peaslee drove his point home clearly stating that according to the law “in cases of injuries committed by persons in a state of lunacy, somnambulism, or idiocy, no offense has been committed.”⁴⁵⁹ “Persons not in full possession of their reason, such as somnambulists, are excused,” regardless of the acts they commit.⁴⁶⁰ Peaslee’s critical argument rested on the principle of malice aforethought. The accused must be in possession of memory and discretion to qualify for this charge, the jurors were told.⁴⁶¹ Insanity was so varied and “degrees of derangement and the conduct of individuals when seized are so diversified and infinite that in the largest receptacle of lunatics no two individuals can be found in whom all the particulars are

⁴⁵⁸ Lawson, *American State Trials*, 757.

⁴⁵⁹ Lawson, *American State Trials*, 758.

⁴⁶⁰ Lawson, *American State Trials*, 759. Peaslee’s oration goes on for several transcribed pages, and is a rather impressive feat of legal argument as well as evidence of not only a desire, but the presence of a pre-M’Naghten Rule insanity defense in American courts.

⁴⁶¹ Lawson, *American State Trials*, 760.

precisely similar.”⁴⁶² Everyone was equally vulnerable to falling into the “gulch of madness.” In somnambulism, the “mind may be indeed considered as a city without walls.”⁴⁶³

To distinguish somnambulism from insanity, Peaslee attempted to educate his audience on the “somnambulism, which is allied to insanity” by reading the relevant passages from Abercrombie, Hale, Prichard and Lord Erskine. Among the examples cited were the canonical evidences from the trail of literature preceding Peaslee’s enormous defense. Jane C. Rider, the subject of the following chapter, was even enlisted in defense of Prescott! Peaslee told the members of the court about “the astonishing case of Jane C. Rider, at Springfield, of which you have all heard.” Ironically, the Prescott case would ensure Rider’s imprisonment in an asylum.⁴⁶⁴ Gentlemen, Peaslee instructed, after citing countless examples of somnambulists acting without volition, “a thousand strange phantoms come and go, without the will, or any consciousness, and these take firm possession of the mind, leading the unfortunate victim of somnambulism, or insanity to the commission of acts the most shocking, revolting and unaccountable to him in his waking moments.” There was, available for perception, evidence of “an endless variety of wild and inconsistent conduct in insane and somnambulating individuals, and that these diseases are confined to no rules or limits, either in the duration or mode of attack.”⁴⁶⁵

The argument for somnambulistic insanity relied on “four distinct proofs.” First, the insanity of Prescott’s grandparents would be ascertained through familial and character witnesses. Secondly the insanity of his “collaterals” would be shown. Thirdly, the “singular” formation of his head would be demonstrated, revealing once again the pervasiveness of

⁴⁶² Lawson, *American State Trials* 770.

⁴⁶³ Lawson, *American State Trials*, 771.

⁴⁶⁴ Lawson, *American State Trials*, 779-780.

⁴⁶⁵ Lawson, *American State Trials*, 781.

phrenology during the 1830s. While Prescott may have been a hydrocephalic, the size of the head was sometimes conflated with faculty impairment by American phrenologists. Finally evidence of “actual early somnambulism” would be submitted for consideration. Prescott’s savage murder of Sally Cochran was caused by “a peculiar organization of the prisoner’s nerves, brain and blood vessels, on which a predisposition to insanity or somnambulism depends.”⁴⁶⁶ Peaslee and Bartlett intended to “prove by books and medical men, every circumstance in the case, to bear the impress of somnambulism or insanity, and no more could be done in any instance.”⁴⁶⁷ The somnambulism defense had just been born.

Chauncey Cochran was called to testify first. He described the facts of the case as he recollected them. He told the court he had declined the invitation to go strawberry picking because he was immersed in “reading Avery’s trial, which I had borrowed.” It was his mother who asked him about a noise she heard in the barn. Finding Prescott, Cochran asked him “what he was about.” Prescott told him “he had struck Sally (Mrs. C) with a stake, and had killed her.” Prescott led Cochran through a pasture to a desolate clump of bushes. Along the way, Prescott told Cochran that “he had the tooth-ache, sat down by a stump, fell asleep, and that was the last he knew until he found he had killed Sally.” Cochran was alarmed and told Prescott he believed “the devil had got full possession of him.” Piece by piece, he picked up clues to his wife’s demise, beginning with her bonnet. He found her succumbing to death in the bushes. Cochran told the court that, “the prisoner must have been perfectly aware of the situation of this place” and upon cross-examination explained that strawberries did not grow in that area and Sally had

⁴⁶⁶ Lawson, *American State Trials*, 783.

⁴⁶⁷ Lawson, *American State Trials*, 786.

never shown a desire to pick them.⁴⁶⁸ The previous axe attack was introduced as evidence, and one of the justices asked: “had the prisoner been in the habit of getting up in his sleep?” Cochran replied that this was the only instance he knew of. It came out in the defense’s cross examination, that the day after the axe attack, was in fact wash day, and that the Cochrans were indeed overly fond of Abraham Prescott, despite his habitual beating of the family’s cattle.

The coroner, John L. Fowler, testified that when he first asked Prescott why he killed Sally Cochran, he said, “he didn’t know why he killed her.” At the time of Prescott’s arraignment some four months later, Fowler visited Prescott in his cell. After removing the warden and his cellmate, an informer by the name of M’Daniel, from the premises, Prescott allegedly confessed the “whole truth” to Fowler, which was that he had solicited sex from Sally, who called him “a nasty, dirty, rascal,” threatened to tell her husband, and told him he should be punished. Fowler reported that Prescott contemplated going to jail for the solicitation and would rather die than go there, so he picked up a stake and killed Mrs. Cochran who he said was picking strawberries. Given Cochran’s testimony it seems unlikely that Fowler was telling the truth about the confession. Without witnesses to the confession, and the evidence submitted that there were no strawberries, Prescott was still a candidate for the sleepwalking defense, at least in the eyes of the court. On cross-examination from the defense, Fowler caved and admitted that Prescott first told him “he was asleep when he killed the deceased.” Fowler told Prescott “that story would not do; I thought he had a motive, and that other people thought so.” He told him his confession would make no difference.⁴⁶⁹ Criminal investigation compared with eyewitness

⁴⁶⁸ *Murder, Trials, and Executions*, 6-7.

⁴⁶⁹ *Murder, Trials, and Executions*, 9-10.

accounts resulted in no clarification. A further specificity of knowledge was required of the witnesses; that knowledge needed to be medical.

Two types of medical testimony were heard during the Prescott trial. The first involved testimony from friends and neighbors on the mental state of Abraham Prescott, as they knew him. The second type was explicitly medical testimony by recognized experts in the field. From data extracted from Old Bailey records, Eigen distinguishes between lay witnesses, who could testify on observed behavior and common experience with madness on the character of the defendant and medical witnesses. Medical witnesses were alleged experts who could provide a more solid opinion – in theory. Eigen writes: “although medico-legal writings sought to isolate and classify the clinical varieties of insanity and medical witnesses claimed a privileged voice in detecting its hidden properties, the boundary separating opinion from fact was never more in question than when expert testimony turned to the prisoner’s alleged madness.”⁴⁷⁰ The medical witnesses introduced during the Prescott trial present a sense of the types of medical jurisprudence that were considered valid in the court of law. Dr. Samuel Sargent, who had initially made the first newspaper reports, did his best to describe the wounds Sally Cochran suffered. He went into specific medical detail, painting a dry, clinical picture of the bashed-in head of a woman taken by surprise. Sargent demonstrated his expertise by describing precise measurements he had taken and to which anatomical areas of the head the blows had fallen. On cross-examination he was asked about the axe-whacking incident and stated “I thought it probable he got up in his sleep; knew of no difficulty in the family.”⁴⁷¹ Dr. John Pillsbury

⁴⁷⁰ Eigen, *Witnessing Insanity*, 115.

⁴⁷¹ *Murder, Trials, and Executions*, 11.

supported Sargent's assessment of the violence of the attack and following murder saying of the axe blows "they must have been fatal."⁴⁷²

The most famous, and perhaps most pivotal witness who came forth to argue that somnambulism was not the same beast as insanity, was someone who had a great deal of expertise on insanity and revealed the common medical opinions on the divisive topic in his testimony. Dr. Rufus Wyman, then the superintendent of McLean Asylum in Charlestown, Massachusetts, from 1825 to 1836 when he was succeeded by Dr. Luther V. Bell, had much to tell the court about both somnambulism and insanity.⁴⁷³ Born in Woburn, Massachusetts in 1778, Rufus Wyman spent his entire life in the eastern part of Massachusetts. He attended Harvard University and graduated in 1799, before beginning his medical apprenticeship under Dr. Samuel Brown, a Boston physician. Wyman was put in charge of attending the Leverett Street Almshouse, giving him a great deal of insight into how to run a home for the indigent and ill. Wyman began his career as a physician to the insane when he was appointed as superintendent to the Asylum for the Insane in Charlestown in 1818. As a branch of Massachusetts General Hospital, the Asylum that would become McLean was one of the earliest in New England. In the early days, Wyman did not have more than fifteen patients in his charge. Between 1818 and 1821, the total number of patients would rise to 149.⁴⁷⁴ Wyman was a proponent of Tuke's system of moral management, writing in his March 1825 report in favor of expanding the asylum "in constructing buildings for lunatics, their comfort, happiness, and cure should be regarded as

⁴⁷² *Murder, Trials, and Executions*, 11.

⁴⁷³ Morrill Wyman, *The Early History of the McLean Asylum for the Insane. A Criticism of the Report of the Massachusetts State Board of Health for 1877* (Cambridge, MA: Printed at the Riverside Press, 1877), 4.

⁴⁷⁴ Morrill Wyman Jr., *A Brief Record of the Lives and Writings of Dr. Rufus Wyman [1778-1842] and his Son DR. Morrill Wyman [1812-1903]*. (Cambridge: Privately Printed, 1913), 1-11.

the ultimate and all-important objects.”⁴⁷⁵ He was certainly in favor of treating his patients to the better things in life, taking them, for example in the summer on “excursions [that] in the harbor in large boats gave a pleasant sail, a run upon the islands, a chowder on board, and all the enjoyment of a day from home.”⁴⁷⁶ According to his grandson, Dr. Morrill Wyman, the elder Wyman was “absent from the Asylum only five nights” during his fourteen year tenure, and this due only to the “Asiatic cholera” he contracted in Vermont en route to Montreal.⁴⁷⁷ He never recovered his health completely. It was during these last years in his capacity as superintendent that he took the stand.

Wyman began his testimony by stating that “I was present and heard the cases of insanity and somnambulism read by Mr. Peaslee, and consider them as received medical facts, well authenticated.” He confirmed that “insanity is a hereditary disease, i.e. a predisposition to it may be transmitted from one generation to another, is now a medical fact everywhere admitted.” Halttunen writes of another case in which hereditary moral insanity was introduced as medical evidence: “One authority claimed that the hereditary predisposition to insanity could be so strong that ‘no prominent moral cause is necessary for the production of the disease, a position which clearly exculpated the mad person from any moral guilt for his or her mental state.” In discussing Prescott, she described the meaning of the word ‘moral’ as it pertained to his legal context: “moral causes of insanity were sometimes cited, though less frequently than physical, presumably because they might suggest the defendant’s moral culpability for his or her

⁴⁷⁵ Wyman, *A Brief Record*, 15.

⁴⁷⁶ Wyman, *A Brief Record*, 25.

⁴⁷⁷ Wyman, *A Brief Record*, 35-36.

disease.⁴⁷⁸ Wyman had to address the point brought up by Peaslee as one of the prongs of his four-point defense: that of collaterals. “Insanity in ancestors or collaterals is no evidence of its existence in a succeeding generation,” Wyman explained. Rather, the ancestral presence of insanity could produce a “predisposition in the family or race.” It was certainly not something that could be easily predicted, Wyman continued. “Hereditary insanity frequently exhibits itself without any known or apparent cause, as do certain other hereditary diseases, such as scrofula, epilepsy, consumption, gout, etc.”⁴⁷⁹

Wyman was appending his medical opinion, based on his years of experience in the asylum, to the testimony that had immediately preceded his. A co-worker of Prescott’s aunt and collateral, Mrs. Blake, testified that Mrs. Blake “appeared dull and melancholy... and wished she might die.” A household member of the Blake family confirmed that she “appeared very dull.” She also knew Abraham Prescott’s grandfather, also called Abraham Prescott. She testified that “he appeared very odd at times” and “people called him crazy.” Chase Prescott, Abraham Jr.’s father, testified that his own father “was occasionally deranged” and that he had “often known my son, the prisoner, to get up in his sleep.” Abraham Sr.’s brother Marston Prescott “appeared crazy,” and was in the habit of going from house to house, begging for cider. His son Moses “talked and acted like a crazy man.” Both Chase and Mary Prescott, Abraham’s parents, though not insane, told the court that Abraham was a hydrocephalic infant who carried the medical

⁴⁷⁸ *Murder, Trials, and Executions*, 17. The story of how insanity came to be understood in comparison with heredity is beyond the purview of this work. Several works, however, are well regarded, and established sources on the topic. See Charles E. Rosenberg, “The Bitter Fruit: Heredity, Disease, and Social Thought in Nineteenth-Century America,” *Perspectives in American History* 8, (1974): 189-235. See also Charles E. Rosenberg, *No Other Gods: On Science and American Social Thought* (Baltimore: Johns Hopkins University Press, c1976); Ian Dowbiggen, “Degeneration and hereditarianism in French mental medicine 1840-90: Psychiatric Theory as Ideological Adaptation,” in eds., William Bynum, Roy Porter, and Michael Shepherd, *The Anatomy of Madness: Essays in the History of Psychiatry. Volume I: People and Ideas* (Routledge, 2004), 188-233. For a broader history of heredity, see Staffan Müller-Wille and Hans Jorge Rheinberger, *A Cultural History of Heredity* (Chicago: University of Chicago Press, 2012). Halttunen, *Murder Most Foul*, 219, 221.

⁴⁷⁹ *Murder, Trials, and Executions*, 17.

diagnosis of “might be crazy in after life.” She also noted he would sleepwalk as he grew older. In great emotional distress, Mary noted, “I don’t think he ever had his senses as other children.” Chase was terser in his recollection of Abraham’s childhood, saying, “his head was diseased, and he appeared crazy when quite small. He had terrible fits of screaming. At three years old his head was nearly as large as mine.” Another family member Benjamin Prescott was “crazy or hypochondriacal; distressed about his breathing; had to be shut up, and was part of the time chained; fit for nothing for a number of years.”⁴⁸⁰ This avalanche of family testimony on the topic of hereditary insanity was intended to establish that Prescott was not only vulnerable to becoming insane, but was almost guaranteed it. Wyman’s comment that insanity could skip generations seems to have been made to explain medically why Chase and Mary Prescott were normal folks who wept over their murderous son’s swollen head.

Upon cross-examination by Mr. Sullivan, Wyman indicated how unstable and unpredictable the specter of insanity was in American society. “Insanity may come on suddenly, when hereditary or not hereditary,” he dutifully answered. “It frequently goes off as suddenly as it comes on. New exhibitions of the disease are constantly arising, and new cases are perpetually occurring.”⁴⁸¹ By the account of an expert witness, Americans were liable to go violently insane for no reason at any time. The stakes in working out what counted as insanity and what counted as somnambulism were insurmountably high.

During his testimony, Wyman introduced monomania, taken from the French school of asylum psychiatry, in which the theory was put forth that insanity was possible without full-blown delusion of the mind. The idea of partial insanity was developed by Philippe Pinel’s

⁴⁸⁰ *Murder, Trials, and Executions*, 15-16.

⁴⁸¹ Lawson, *American State Trials*, 794.

student Jeanne Étienne Dominique Esquirol in 1817. It was taken further by his student Etienne-Jean Georget, who postulated a lesion of the will, providing the explanation for partial insanity, suggesting that the faculty of the will could physically be subject to lesion and thus result in monomaniacal behavior by a patient.⁴⁸² Wyman patiently explained that persons “thus affected” with monomania, “are not conscious of their delusion,” a medical fact which excluded Prescott from the category of monomaniacal homicide. What Wyman explained next was the precedent for the M’Naghten rule:

“If an insane person believes an act to be right which he knows others think to be wrong, he may act from his own belief and yet attempt to conceal the act that he may avoid the punishment which others would seek to impose on account of their belief that the act was wrong. The insane generally are impelled to the commission of the strange, enormous and unaccountable acts, by what they think a duty, and not unfrequently boast of such acts.”⁴⁸³

This being said, Wyman made the critical statement that “Somnambulism, or sleep-walking, is a different affection from that of insanity, though in some respects allied.” In his own experience he had treated only “two or three cases.” He went on to describe the facts of a patient who had been in his care during 1831. A young lady, about twenty-two years old, was committed to his facility. She had been a somnambulist since the age of thirteen. While in a paroxysm, she would dust furniture and cobwebs, correctly identify new acquaintances by name, play checkers, and so forth. Like Rachel Baker, but with less of an effect, her family attempted to help her by dousing her with cold water, and holding her to her bed: neither strategy worked. She had paroxysms one to four times a day for six weeks, recovered briefly, became totally deranged and then died. Wyman used this case as an example of how different somnambulism was from

⁴⁸² Eigen, *Witnessing Insanity*, 72-74.

⁴⁸³ *Murder, Trials, and Executions*, 18.

insanity as the layperson might recognize it.⁴⁸⁴ From a medical perspective Wyman testified, “the approach of insanity is usually gradual... an a disposition to violence is generally discoverable before acts of violence are committed.”⁴⁸⁵ Wyman was very careful to insist that sleepwalking was not insanity. While “there is some analogy between dreaming, sleep-walking and insanity... the patient who recovers from insanity speaks of having been waked from a dream.” This fact, Wyman asserted, was not to be used to say, “that sleep-walking was evidence of insanity.”⁴⁸⁶

An all-star line up of medical witnesses followed Wyman, each backing up his essential assertion that somnambulism was not insanity, and therefore, was a defense in its own right: it was a mishap of the mind, but it was not borne of melancholy, mania, or fury.⁴⁸⁷ The Prescott case was widely followed, largely due to the somnambulistic element of the murder, and Wyman’s belief in Prescott’s innocence. He worked especially hard to make a case for somnambulism as a viable defense, using his reputation to recruit witnesses that would be able to clarify the differences and similarities between insanity and sleepwalking. Dr. George Parkman was one of them. He claimed that sometimes the beginning of a sleepwalking paroxysm “is marked by an act of violence, especially, if, as in sleep-walking, the sufferer is unskillfully

⁴⁸⁴ *Murder, Trials, and Executions*, 18.

⁴⁸⁵ *Murder, Trials, and Executions*, 20.

⁴⁸⁶ *Murder, Trials, and Executions*, 20.

⁴⁸⁷ Halttunen, *Murder Most Foul*, 225. Halttunen’s explanation of the prosecution’s inability to engage with the sleep-walking defense is well summarized in this passage: “In response to the perceived circularity of the insanity defense, prosecutors often chose to not to argue the case on the medical turf marked out by the defense, but to return to the depravity narrative. ‘We have hitherto believed,’ explained Attorney General Sullivan in the Prescott case, ‘that to take the life of a human being, without just cause, afforded evidence of great and uncommon depravity of heart, but none of insanity.’ The alleged medical symptoms cited by alienists were merely marks of old fashioned depravity.” They were much attached to the idea of moral insanity, which was far removed from the monomania and heredity narratives introduced by the expert witnesses.

thwarted in his vagaries.”⁴⁸⁸ Another physician, Dr. T. Chadbourne testified that the evidence introduced in book-form by Peaslee came from “standard authors recommended by the Medical Society of this state as text-books for students.” Considered the finest printed authority on the topics “they treat,” Chadbourne agreed with the positions on insanity established by the absent, but forceful authors. He concurred with his fellow experts: “There is a great analogy between dreaming and somnambulism, but both differ essentially from insanity. I have known no instances of sleep-walking in which a disposition to injure others was particularly manifested.”⁴⁸⁹ Dr. William Perry and Dr. Nehemiah Cutter told what they knew about monomania and hereditary insanity, making no comment on sleepwalking, except through omission. The acts committed by Prescott did not align with their testimony. A bevy of lay witnesses was called to testify to the character of Prescott. It was again confirmed that insanity ran rampant in Prescotts, like a Nick Handyside romping down the darkling path in the Pennsylvania night, but that Abraham Prescott resembled an idiot more than anything else. Sound mind, sedate temperament, and dull eyes defined the man condemned to die.⁴⁹⁰

The trial ended with the medical experts agreeing that insanity was an established variant of mind, impossible to predict, but generally hereditary, and sometimes not. They all agreed that somnambulism was allied with insanity – in the sense that volition was lost, and the will was voided – but was definitively not insanity. The onslaught of character witnesses testifying to what they could observe about Prescott’s state of mind put the distinction between lay and

⁴⁸⁸ *Murder, Trials, and Executions*, 21. Parkman would meet his own bizarre and violent end in 1849, when John Webster, a lecturer at Harvard Medical School, killed, dismember and interred Parkman in a chest over the payment of a debt. For the full story of the demise of the good doctor, see Simon Schama, *Dead Certainties: (unwarranted speculations)*. (New York: Knopf, 1991).

⁴⁸⁹ *Murder, Trials, and Executions*, 21-22.

⁴⁹⁰ Lawson, *American State Trials*, 800-806.

medical witnesses into stark relief. In this particular case, the defense rallied character and medical witnesses who happened to compliment one another as they testified on contrasted topics. None of the medical witness spoke a word about the man, Abraham Prescott. None of the character witnesses claimed any medical history beyond that of their own family circles. This new form of medical jurisprudence was enough to confound the jury.

In his closing argument, Mr. Bartlett, Prescott's second attorney laid out the social stakes of this new defense succeeding. In doing so, he revealed a third, legal stake in the insanity defense that excluded somnambulism, though the defense won – at least the first time. “It is insanity. Insanity!” Bartlett yelled. “And what have we learned of insanity but the incoherent ravings of the mad-man or clanking of the chains of the maniac? Who will for a moment listen to the excuse of insanity for an act of such atrocity, from one whose whole life has been a regular and quiet and intelligent discharge of the duties of his humble station?”⁴⁹¹ This was the primary difficulty of using the insanity defense – it was quite literally insane. In saying nothing about somnambulism (the primary defense) Bartlett said everything in pointing out the weaknesses of the insanity defense as it currently stood in jurisprudence. The jurors were not kindly inclined towards the absurdity attached to an insanity defense or the deeply disturbing randomness of sudden acts of madness. The somnambulism defense, introduced early, and differentiated through medical witnessing, acted as a truly appealing alternative to an unappetizing alternative.

⁴⁹¹ Lawson, *American State Trials*, 810; Halttunen, *Murder Most Foul*, 224. Halttunen interprets this quote quite differently, overlooking the centrality of somnambulism as a state of consciousness separate from insanity. “With great forensic skill, Abraham Prescott’s defense attorney made use of his greatest apparent disadvantage – the absence of evidence of his client’s insanity before killing Sally Cochran – in order to transform it into an advantage: claiming that insanity was a difficult defense to make, he rhetorically asked: ‘Who will for a moment listen to the excuse of insanity for an act of such atrocity, from one whose whole life has been a regular and quiet and intelligent discharge of the duties of his humble station?’” This was not a simple an instance of the insanity defense – far from it. Rather than trying to re-introduce an unheard of defense again in closing, Bartlett instead chose to highlight the greatest fears the jury had about engaging the insanity defense. The somnambulism defense was an appealing alternative.

Bartlett and Peaslee were profoundly against capital punishment and discoursed on the sentiment at length in their opening and closing arguments. In asking the jury to truly contemplate what right they had to take a life, they may have managed to tip the scale towards indecision on the verdict. “An objection to this punishment, and an admonition to caution in inflicting it, is, that it takes away the possibility of correcting errors of human tribunals, produced by mistaken testimony, false appearances, or perjured witnesses. Let not this danger be lightly esteemed by those who have adverted to the records of human fallibility.”⁴⁹² Bartlett continued his dirge against capital punishment, hoping to spare Prescott’s life: “the history of criminal jurisprudence is black with cases of conviction of the innocent upon circumstances, which deceived – upon testimony that was untrue, and even upon false confessions of the accused.”⁴⁹³ In protecting his client, whom he genuinely believed was innocent, Bartlett articulated the gap in jurisprudence that this case would, in part, begin to fill. “That opinion undoubtedly is, that to excuse from crime, it must be the madness of Bedlam – that the entirely senseless maniac alone is irresponsible; but that to have the knowledge of right and wrong – of cause and effect – to have the capacity to devise and the art to execute schemes of violence and wrong, would at once take away all such excuse.” Bartlett may have paused before stating: “Such is not the law.”

Bartlett was not certain that a single standing somnambulism defense would work, and after recounting the testimony that predestined Prescott to a life of hapless, violent insanity, stated “if he did not attempt to take the life of Cochran and his wife on that night in a paroxysm of delirium, whether called somnambulism or insanity is immaterial – then with some motive he attempted to murder both. If it is admitted that he then was irresponsible for the act from any

⁴⁹² Lawson, *American State Trials*, 819-820.

⁴⁹³ Lawson, *American State Trials*, 820.

cause, it is preposterous – absurd to look for any new cause for the deed of the twenty third of June.”⁴⁹⁴ In saying this, Bartlett confirmed that the somnambulism defense, if sufficient before, must be sufficient in this second attack, which did result in death. No one challenged somnambulism as a cause when Prescott bludgeoned the Cochrans with the family’s axe. The prosecution lost their case when they confirmed the fact that “no mark – no symptom of derangement was discoverable in the prisoner, neither before or at the time, or after the perpetration of the murder.”⁴⁹⁵ This was the precise condition that the insane lacked and that the somnambulist required.

The state’s rebuttal against the insanity defense was weak and posited on a fundamental misunderstanding of the medical correlation of sleep to dreams, and dreams to insanity: “it is said that he has been in the habit of walking in his sleep, and that somnambulism is allied to insanity. But the physician, who states this, says that it is no more allied to insanity than dreaming is. If it had been proved, then, that the prisoner was in the habit of walking in his sleep, it could have had but very little weight in establishing the fact of his derangement. But it has not been proved.”⁴⁹⁶ Proving somnambulism was the point, but it was also beside the point, as the state had just agreed that sleepwalking was a viable, legal defense for murder. The judge instructed the jury to consider if Prescott had the use of his reason, and by association if somnambulists had the use of their reason.⁴⁹⁷

In the end, the jury ran away. By consorting together in public at the Eagle Hotel in Concord and mingling “with people who talked of the probability of a conviction,” the jury

⁴⁹⁴ Lawson, *American State Trials*, 840.

⁴⁹⁵ Lawson, *American State Trials*, 863.

⁴⁹⁶ Lawson, *American State Trials*, 873.

⁴⁹⁷ Lawson, *American State Trials*, 890.

miscarried themselves. By talking to outsiders, they had polluted their own judgment and denied Prescott a fair and impartial evaluation of evidence. The trial was overthrown. The entire affair was repeated again in September of 1835. The new trial “was but a repetition of that of the preceding year. The same witnesses were called and the same arguments produced.” Prescott was found guilty and sentenced to hang.⁴⁹⁸ Ichabod Bartlett fought for Prescott until he swayed from the gallows at North Church in Boston. He never wavered on his opinion that the verdict was unjust. He convinced the Justices of the Court to sign a reprieve on execution until the meeting of the Legislature in June 1836. The reprieve was granted, but public notice did not come soon enough to prevent a riot so boisterous that they “frightened a lady who was ill so much she died.” The editor remarked: “it was one of the most disgraceful scenes ever witnessed in the state.”⁴⁹⁹ The Legislature eventually agreed that they could not reprieve an execution without undermining the integrity of two proper trials adjudicated by impartial juries. Prescott was sentenced to hang until dead on January 6th, 1836. Until his execution, he changed his story as to why he killed Sally Cochran. He varied motives, switching between sleepwalking and rage induced by rejection of his sexual advances. It is said that upwards of 10, 000 people came to see his execution. Before he was taken to the gallows Sheriff Carroll of the Hopkinton jail where Prescott was housed “read the indictment of the Grand Jury, and a record of the proceedings thereon through the course of two trials, the reprieve of the Governor, and the warrant for the execution” through an opening in Prescott’s cell door.⁵⁰⁰ Prescott hung for half an hour before being removed to a coffin. Having professed an aversion to dissection in life, and his friends

⁴⁹⁸ Lawson, *American State Trials*, 897.

⁴⁹⁹ Lawson, *Murders, Trials, Executions*, 43.

⁵⁰⁰ Lawson, *Murders, Trials, Executions*, 44.

being too poor to pay for a funeral, some anonymous good Samaritans took pity on his soul and paid for a secure burial. According to the editor of the trial report, “Mr. Bartlett always spoke of it as a case of judicial murder.”⁵⁰¹

Whether or not Abraham Prescott was truly somnambulistic murderer went unconfirmed by the courts. His trial, being the first on record in the United States to use the sleepwalking defense, also invented it. Natural somnambulists after this trial were subject to diagnoses of insanity and the consequence of incarceration. Albert J. Tirrell used the defense again in 1845, and was acquitted of murdering his mistress, and prostitute, Maria Bickford.⁵⁰² By 1834, the association of male somnambulists with violence was entrenched. Up until this medico-legal crossroads, however, the violent male sleepwalker was a boogey-man in fictive American imaginations. Crime in the night season was a part of an ordinary person’s daily cycle. Fears over loss of self-government compounded within the figure of the somnambulist – more so if it was a man gone savage in the woods. The Abraham Prescott trial also revealed the extent of the fear of losing oneself within the government. The questions posed – what right have we to take a life? How does one tell right from wrong? What is the culpability of a deranged mind? How much intervention should the government have in a person’s life? All these questions were also put on trial. If a somnambulist was not insane, but could still be acquitted of crimes both legal and biblical, then the danger of sleepwalking was doubly confirmed. Who ought to have authority over governing the ungoverned however, had not been decided. Through continued failure to use professional authority to absorb somnambulism into medical doctrine, physicians would leave the phenomenon to legal custody.

⁵⁰¹ Lawson, *Murders, Trials, Executions*, preface.

⁵⁰² Cohen, *Pillars of Salt*, Chapter 9, “The Prostitute and the Somnambulist,” 195-247.

CHAPTER SIX: JANE C. RIDER, A CIVIL, WELL-BRED SOMNAMBULIST

The Insane Somnambulist

Almost twenty years after Rachel Baker had been laid out for devotional somnium in the genteel parlor of her friends, another young woman, Jane C. Rider, of Springfield, Massachusetts, found herself under similar scrutiny. The watchful wonder of curious onlookers began in the home of her employers, Mr. and Mrs. Festus Stebbins of Springfield. But Rider was to be transported from the parlor to the insane asylum, her story signifying a profound change in the fundamental expectations of the appropriate environments for women's oracular performances. Though her somnambulism was concurrent with the Prescott case captivating the criminal imagination of Americans in 1834, Rider would endure the ramifications of the medico-legal alignment of somnambulism with insanity, despite both professions' failure to acquire somnambulism as a professionally contained source of knowledge. As a reputed naturally clairvoyant somnambulist, Jane drew a great deal of attention and a broad audience of curious people who wanted to evaluate her somnambulism for themselves.

Like Rachel Baker, the boundaries of Rider's material self would be prodded, penetrated, and plucked, as medical men attempted to extract the very essence of somnambulism from her failing body. Being limited to merely engaging with the physical expression of somnambulism in their female charges, this was a weak recourse indeed. Just as Samuel Mitchill had come up lacking in his quest to maneuver Baker's mind into his heroic control, Doctors Lemuel Belden and Samuel Woodward would meet similar obstacles in wresting control of Rider's active and outspoken mind from her sleeping body. In attempting to experiment her wits out of her, Belden and Woodward risked Jane's mind itself, by institutionalizing her in the Worcester Hospital for the Insane.

After the 1834 Prescott trial, somnambulism had lost its status as a topic for philosophical inquiry and been reclassified as a species of mental derangement allied to insanity.

Somnambulists were no longer simply local attractions, but were recast as unstable medical objects. With a memory split between two states of being – paroxysm and normal self – somnambulists had no apparent volition and yielded evidence that two histories could co-exist in one person. Mary Reynolds had demonstrated as much from 1811 to the end of her life, which lasted well after Rider's period of notoriety in the early 1830s. As somnambulistic paroxysms were unpredictable in timing and in action, the new asylums for the insane offered an attractive venue for containment.

Even more pronounced than trances, stupor, swoons, or catalepsy, somnambulism was saturated with danger. While the body flaunted supernormal powers, the warp and woof of personhood unraveled: the somnambulist lacking memory, free will, and most frighteningly, morality, was politically stateless, individually severed from community ties, and vulnerable to abuse and to be abused. Somnambulism in the United States was good candidate for the poorly understood realm of mental diseases. While it had not yet been widely defined as a sub-category of insanity by 1833, there were those who claimed it could be nothing else.

The impulse to classify and to explain unusual conditions grew with the professionalization of medicine in the United States; somnambulism was a particularly vexing state and mesmerism a virtually unknown quantity. The prevailing theories on somnambulism and insanity that were circulating throughout the transatlantic medical community would provide the grounds needed to quantify that which seemed to defy categorization, especially once the danger posed by somnambulists was reified by the legal system. Rider's case would unify insanity with somnambulism and recommend that union to the burgeoning field mental

medicine.⁵⁰³ Prescott provided the medico-legal background for empirically testing the idea of somnambulistic insanity. This precedent allowed Rider to be turned into a natural-historical experiment within the walls of Worcester Asylum. A growing interest in insanity in collusion with the belief that somnambulism was a natural state of suspended animation with a phrenological foundation provided additional medical theory in which Jane Rider was eligible to be labeled and treated as a madwoman. Ironically, Rider's confinement was more a matter of convenience than conviction. Her brief captivity and alleged cure would lend credence to coming convictions that somnambulism was most certainly the product of a diseased mind. When the diseased mind belonged to a woman, and that woman acted out of social turn, it was also immoral.

Two social configurations that would come to shape Jane's identity as an insane somnambulist were undergoing drastic changes during the 1820s and 1830s, especially in New England. The confluence of these configurations created a situation in which the figure of the female somnambulist was primed to transition from an object of private, but medical perusal to an inmate housed in a newly conceptualized institution, fit for experimentation, but not social intercourse. Rachel Baker lived in a world where the domestic parlors of the emergent middle class family served as stages for encounters with extraordinary individuals. Karen Halttunen posited the parlor as a "third social sphere, lying between the public world of strangers where sincerity was dangerous, and the private family circle where the sincere ideal was virtually

⁵⁰³ Daniels, *American Science*. For sources on nineteenth-century medical professionalization see: Charles E. Rosenberg, *The Care of Strangers: The Rise of America's Hospital System*. (New York: Basic Books, 1987); William G. Rothstein, *American Physicians in the Nineteenth Century*. (Baltimore: Johns Hopkins University Press, 1972), 63-84. Rothstein, while mainly interested in the Thomsonian movement and homeopathy, provides a straightforward overview of the growth of medical societies, schools, and licensing requirements in the United States from the colonial period throughout the nineteenth century.

meaningless.”⁵⁰⁴ During the first three decades of the nineteenth century, the parlor served as a space where women could exercise their societally imposed moral influence over their friends and guests.⁵⁰⁵ While parlors persisted through Victorian American as middle-grounds for social conversation and as outlets for women to speak publicly in private, the frightening figure of the female somnambulist was to be hidden away in the secretive, but public domain of the nation’s newest institution for managing the disorderly, the asylum.

An Incarceration

At the end of January 1834 Jane Rider was in her second month of her confinement, having been admitted to the Worcester Lunatic Hospital in December 1833, the first year of its operation. Approximately eighteen years old, Rider spent her days in a strict regimen of waking, taking medicine, eating, laboring, praying, and socializing with the other patients. All the asylum superintendents advocated orderliness and strict daily regimens, though their approaches to treatment of the mad varied. The first asylums in the United States – the Pennsylvania Hospital, McLean in Boston, Utica in upstate New York, Bloomingdale in New York City, the Williamsburg Lunatic Asylum in Virginia, and the Hartford Retreat in Connecticut, all called upon the British-Quaker philosophy of moral treatment: humane treatment of the insane without corporal punishment or restraint would result in cure rates previously unimagined.⁵⁰⁶

⁵⁰⁴ Karen Halttunen, *Confidence Men and Painted Women: A Study of Middle-Class Culture in America, 1830-1870*. (New Haven: Yale University, 1982), 58-59. Halttunen derives her argument regarding the emergence of the parlor of a “third social sphere” on Barbara Welter’s thesis, “the cult of domesticity.” Halttunen argues that as American society changed from a preindustrial to modern industrial culture between 1780 and 1835, the typical middle class home became a separate, private sphere. Halttunen advances this argument by claiming that the parlor of the middle-class home during this period “protected transparent women from the confidence man’s game” and the “poisonous air of the world outside.” Halttunen analyzes the geographic location of the parlor as a space between the urban street and the private family space of the back of the house.

⁵⁰⁵ Halttunen, *Confidence Men*, 59.

⁵⁰⁶ Gerald N. Grob, *The State and the Mentally Ill: A History of Worcester State Hospital in Massachusetts* (Chapel Hill: UNC Press, 1963), explains the structure and functionality of Worcester State Hospital quite well, but Grob, alongside Foucault, Scull, Tomes, and Dwyer engaged in the mid-twentieth century, anti-psychiatry revisionist

But was Rider insane? It is my contention that there is no evidence that Rider was diagnosed as mad or was socially marginalized, but rather, her case, being the medical mystery it was, could not be properly tested in a private home where the majority of doctors earned their wage. As the Worcester State Hospital was a brand new institution, relative privacy and focus could be found there. It is important to remember, that initially, the new asylum model was truly seen as progressive, humane, and architecturally peaceful in design.⁵⁰⁷ Rider's doctors Lemuel Belden and Samuel B. Woodward, also the superintendent of the Worcester asylum, had no clear explanation of Rider's somnambulism – at least not at the beginning of her formal treatment. She was placed in an asylum, which Woodward acknowledged was against her wishes. It was unlikely that Rider was familiar with the medical reasoning behind asylum architecture and design. She was one of the very first patients in her small corner of the world, and middling types of people who were somewhere between servants and friends in their social circles were often not privy to the details of expensive new reformatories. As David Rothman points out in his work on the emergence of the asylum philosophy in Jacksonian America, asylums were deliberately designed to be radically different from penal institutions in an attempt to sort the

history movement of nineteenth century asylum treatment which was centered on theories that asylums were tools for social control of undesirable, marginalized people. The premise that social control theorists made about “moral treatment” – most significantly Foucault – was that it was a behaviorally based internalizing of the chains that formerly restrained the mad, enforced through punishment for speaking out about illness. Madness became a matter of accountability, demonstrated through silence. See also Andrew Scull, *Social Order/Mental Disorder: Anglo-American Psychiatry in Historical Perspective* (Berkeley: University of California Press, c1989).

⁵⁰⁷ For an extensive critique of asylums see: Michel Foucault, *Madness and Civilization: A History of Insanity in the Age of Reason* (New York: Vintage, 1979); David J. Rothman, *The Discovery of the Asylum: Social Order and Disorder in the New Republic* (New Brunswick, NJ: AldineTransaction, 2008); Nancy Tomes, *Madness in America: Cultural and Medical Perceptions of Mental Illness before 1914* (Ithaca: Cornell UP, 1995); *A Generous Confidence: Thomas Story Kirkbride and the Art of Asylum Keeping 1840-1883* (Cambridge: Cambridge UP, 1984); Ellen Dwyer, *Homes for the Mad: Life Inside Two Nineteenth-Century Asylums* (Rutgers University Press, 1987). For an early and foundational history of treatment of the insane in American history, see Albert Deutsch, *The Mentally Ill in America: A History of Their Care and Treatment from Colonial Times* (Garden City, NY: Doubleday, Doran & Company, c1937).

mad from the criminal riff-raff.⁵⁰⁸ Rothman observed that it was very much against superintendent's wishes to mimic a penal environment; in step with the promulgation of moral treatment, the superintendents' goal was to deter the public from viewing an asylum as a place for punishment.⁵⁰⁹ Under Woodward's plan of austere moral treatment, patients would find order through work, and a routine dominated by discipline. The patients did tasks such as cleaning, laundry, and farming. For a short time, before the overcrowding and regression to corporal punishment of the 1850s became endemic, Woodward's vision was briefly realized. The labor model of the Worcester hospital would be mimicked in later asylums, such as the one in Utica, though those asylum plans would ultimately fail as well.⁵¹⁰

Woodward reported, "she [Jane] complained she was locked up in the Hospital, and did not wish to stay, and that she would not have come here if she had expected to be locked up."⁵¹¹ Her complaints were silenced by the effects of a Nitro-Muriatic Acid foot bath which allegedly calmed her agitation at finding herself a prisoner and improved her disposition.⁵¹² Rider, whose indignation over her new situation was expressed during a somnambulistic paroxysm, seemed to indicate a failure on the part of Woodward to distinguish the asylum entirely from a prison. After spending two weeks in the Lunatic Hospital, Woodward noted that Rider "appeared very much like a person insane." She was under observation by Woodward and his family who lived in, and

⁵⁰⁸ Rothman, *Discovery*, 153.

⁵⁰⁹ Rothman, *Discovery*, 153.

⁵¹⁰ Rothman, *Discovery*, 146. Grob. *The State and the Mentally Ill*.

⁵¹¹ Lemuel Whittlesey Belden, *An Account of Jane C. Rider: The Springfield Somnambulist. The Substance of Which Was Delivered as a Lecture before the Springfield Lyceum, Jan. 22, 1834* (Springfield, MA: Published by G. and C. Merriam, 1834), 66.

⁵¹² Belden, *An Account*, 66.

managed the asylum.⁵¹³ The Woodward family reported that she was having vexing memory problems and the nature of her paroxysms had changed. They knowingly commented, “a stranger would say, you have got an odd or insane girl, but would suspected nothing more.”⁵¹⁴ By December 21st, Rider appeared to be suffering greatly. Woodward’s case notes report that “in the evening [Jane] had a paroxysm of complete insanity; talked, ran about the house, and refused to take her medicine. When forced to take it she shed tears, and fell into a sort of hysterical sobbing, which lasted some minutes.”⁵¹⁵ Before her admittance to the Worcester Asylum, neither her doctors nor her friends described Rider as insane.

During the “cure” portion of her career as a somnambulist with many things to say, Rider was a much-weakened version of the self she had become in the borderland parlor in Springfield. She spent her days not in well-regulated labor and wholesome pursuits, improving her interior morality, but fluctuating wildly between placidity and violent sobbing. She deteriorated. By the new year of 1834 Rider was a young woman with a shaved head who at times may have spent her day sitting in a rocking chair “moving her head from side to side with a kind of nervous uneasiness, the hand and fingers being at the same time affected with a sort of involuntary motion.”⁵¹⁶ She suffered from terrible pain in a region of her head, and often had blisters applied to the spot to relieve her near-constant suffering. Her paroxysms lost their predictability and their character became erratic. Prior to Rider’s physical transformation and slide into a form of acute

⁵¹³ Rothman, *Discovery*, 151, argues that the superintendents of the asylums “retained many eighteenth-century usages. Their favorite metaphor was a family one, and borrowed freely from family vocabulary to describe asylum procedures.” In this particular instance, Woodward seems to be referring to his actual family.

⁵¹⁴ Belden, *An Account*, 71.

⁵¹⁵ Belden, *An Account*, 71. Asylums were meant to resemble private residences rather than large reformatories or institutions. Woodward’s reference to the “house” was most likely in reference to the part of the building Jane was living in as a patient. Rothman, *Discovery*, 153.

⁵¹⁶ Belden, *An Account*, 48.

insanity, she was a marvel to her friends and a woman with knowledge beyond a typical woman's means. There is also evidence that she was plagued by many problems. There is strong evidence that she was suffering from chorea. She was diagnosed with it prior to the escalation of her somnambulistic episodes, and her case records are replete with incidences of disordered eating. She was far more than a power-grubbing charlatan "shamming and embellishing some of her strange sleep habits," nor was she a Jacksonian fame hunter who was shunted off to the asylum as her scams became egregious and bothersome to her employers.⁵¹⁷ She was rather a woman living through a transitional period in the history of women's identity whose physical female body yielded evidence of a marginalizing illness, a self-harming habit, and an unexpected inner life exposed by somnambulism.

Chorea

Rider's transformation from a middle-class young woman, to a clairvoyant somnambulist, to an insane person requiring intense treatment within a closed facility, exemplifies the many changes and burgeoning opportunities that were affecting Americans in this historically remembered era of broad optimism, technological growth, and domestic reconfiguration.⁵¹⁸ Grob explained that the care of the insane and the nexus of problems surrounding mental diseases slowly moved away from the eighteenth-century models of family or community care, private philanthropy, and public hospitals, and into the purview of the government.⁵¹⁹ Rider's physical move from the household of her friends to the asylum is

⁵¹⁷ Benjamin Reiss, "The Springfield Somnambulist: Or, the End of Enlightenment in America," *Common-Place* 4, no. 2 (January 2004), <http://www.common-place.org/vol-04/no-02/reiss/>.

⁵¹⁸ For a good overview of social and technological change in Jacksonian America see Daniel Walker Howe, *What Hath God Wrought: The Transformation of America, 1815-1848* (New York: Oxford University Press, 2007).

⁵¹⁹ Gerald N. Grob, *Mental Institutions in America: Social Policy to 1875* (New York: The Free Press, 1973). Also see Rothman, *Discovery*, 30-34, 133. Rothman differs from Grob as he compared insane asylums to other kinds of institutions built to incarcerate the deviant members of society.

analogous to the transfer of her care from her family and kin to physicians. In this way, her story is that of many of the nations' ill and insane.

Belden and Woodward captured and crafted Jane's public declarations and private actions into a landmark case study for psychiatrists studying consciousness and hysteria at the end of the nineteenth century. Rider's relationship with these two men who asserted medical authority over her can be gleaned from their writings about her. Though her voice is refracted through theirs, one can extract a picture of a version of Jane Rider that has elements of authenticity. How she behaved while under their care creates a double voice within the medical writings. By quoting her writing, Belden and Woodward not only created a ghostly print version of the woman they treated, but presented a picture of subverted narrator, who, in contrast to their mediation, stands out all the more.

When Belden published *An Account of Jane C. Rider, the Springfield Somnambulist* (1834), he did so in a "calculated" manner "to meet the wishes of the public." Separating the professional medical audience from the public at large, Belden admonished that the public "would have little relish for a purely medical Essay." In collusion with Woodward, he furnished the case history of the "'Somnambulist' in the Lunatic Hospital," using Woodward's communications.⁵²⁰ The collaboration of the two physicians showed that at the time of publication, Jane had been compressed into a medical object at the center of a complicated relationship between a mentor and his pupil, each claiming ownership over distinct parts of her private experience. Woodward was a materialist who followed somatic explanations of insanity, while Belden tended to privilege the doctrine of sympathy of organs that guided thinking within the field of phrenology. Though phrenology relied on a somatic model of the brain, sympathy

⁵²⁰ Belden, *An Account*, preface.

was an intangible force connecting expressions of the brain's faculty with other parts of the body, other people, and society. Belden's interest in sympathy was not contrary to phrenology, but challenged the British materialist interpretation of the faculties.⁵²¹

When Belden met Rider in Springfield in April 1833, he encountered a young woman whose "plump and rosy cheeks, by the unprofessional observer at least," provided an "index of perfect health."⁵²² As he was more than an "unprofessional observer," Belden had the knowledge to explain to the curious public that Rider had been suffering from chorea (understood to be a movement disorder characterized by severe head pain and spasmodic gestures) for several months. He carefully noted that "a small spot on the left side of the head, near the region which phrenologists assign to the organ of "marvellousness" has, since her earliest recollection, been tender, or painful on pressure, and the sensibility is much increased when she suffers from headach." Rider often complained during her paroxysms that she would like nothing better than to have her head sliced open on this sensitive spot to relieve the pain. According to Belden, this was a request that she continued to make, even after she officially entered Woodward's treatment.⁵²³

⁵²¹ Roger Cooter, *The Cultural Meaning of Popular Science: Phrenology and the Organization of Consent in Nineteenth-Century Britain* (Cambridge: Cambridge UP, 1984), 28, 85-86. Cooter's study on the emergence of phrenology in Great Britain during the nineteenth century is applicable to the United States. "For the early decades of the nineteenth century the strongest support for phrenology came from the medical profession. This is well reflected in the membership of the twenty-eight or so phrenological societies in Britain before 1840..." Cooter's work explains how a generation of phrenologists reflected the aspirations and "social significance" of supporters of the radically materialist mind science. "[The] new bourgeois-liberal style of thought that came to be elaborated through phrenology's revival in the 1820s was only gradually perceived and appreciated as mutual socioeconomic interest, aspirations, and perceptions coalesced – the new style and its recognition feeding one off the other." This argument explains how Belden and Woodward could approach a single patient as a phrenological subject with such schismatic views on the mind.

⁵²² Belden, *An Account*, 30.

⁵²³ Belden, *An Account*, 31.

Belden's reference to the organ of "marvellousness" offers a second, non-criminal interpretation of how physicians during this period came to reinterpret somnambulism as a species of insanity, and how they were able to postulate that American somnambulism was natural and quite explicable using phrenological theory. Unlike their decadent European counterparts across the Atlantic who reveled in sensibility without being the least bit sensible, American physicians saw artificial somnambulism as an artifact of the quackery of mesmerism, though artificial somnambulism was also explained using phrenological principles and the doctrine of the sympathy of organs. As Belden put it: "I do not believe it possible for any one to watch [Jane] during a paroxysm and witness the artlessness and consistency of her conduct, the unequivocal signs of extreme suffering which she occasionally manifests, and above all to observe the symptoms of returning consciousness, without the fullest assurance that there is in this nothing feigned."⁵²⁴ Physically speaking, Rider was a challenging patient. Belden had to parse the symptoms of her chorea from her digestive irritability in order to establish which phrenological organs were overly excited, thus contributing to the particular behavioral expressions that were demonstrated during her somnambulistic paroxysms. Initially, however, Rider became Belden's patient because of her chorea. Her first somnambulistic episode did not occur until June 24th 1833.

Lemuel Whittlesey Belden was born in Wethersfield, Connecticut, in 1801. Belden was the son of a highly respected physician, Dr. Joshua Belden, who died from spotted fever in 1808. Belden, at seven years old, was left as the eldest of four brothers and educated by his recently widowed mother. He attended Yale College, and graduated in 1821, becoming a teacher in New Canaan, Connecticut. Teaching did not satisfy Belden and in 1823 he became a medical

⁵²⁴ Belden, *An Account*, 32.

apprentice to Woodward, who would distinguish himself through his work at the Worcester asylum ten years later. Belden returned to Yale to take his degree in Medicine and graduated in 1826. Having earned his professional credentials, Belden returned to work with Woodward in his practice. During this time “a warm friendship was formed between preceptor and pupil, which continued until his death.”⁵²⁵ His biographer described him unflatteringly as “not destined to be the popular man.” Painted as “diffident and retiring” with “simple manners” and a dignified deportment, Belden found he could “obtain friends and business only on substantial merit.” He earned respect, then loyalty, from the families in Springfield where he had moved his practice in 1827. Contrary to claims that he was akin to a “carnival barker,” especially in his dealings with Rider, Belden was rather a steadfast and unremarkable village physician who “made no bustle in his business, and no display in the community in which he resided.”⁵²⁶ After he died in 1840 of typhoid fever he was remembered as an “intelligent and beloved physician” who was “the friend and confidant of the sick.”⁵²⁷ Belden did not publish widely, and only submitted the account of Jane Rider and a work on a similar topic, for the consideration of the public.⁵²⁸ By the scant accounts of his modest career, Belden lived an uneventful and ordinary life. He married in 1829,

⁵²⁵ Stephen West Williams, *American Medical Biography: Or, Memoirs of Eminent Physicians* (Greenfield, MA: L. Merriam and Co., 1845), 45.

⁵²⁶ Williams, *American Medical Biography*, 46. Reiss, in “The Springfield Somnambulist,” argues that Belden and Rider were engaged in a conspiracy of showmanship for profit. I disagree strongly with Reiss’s claims that Rider and Belden were entwined in a half-unwitting theatrical display for financial gains and notoriety. Based on the evidence available, this narrative does not seem plausible. There is no evidence whatsoever that Rider and Belden were involved in any scheme at all.

⁵²⁷ Williams, *American Medical Biography*, 42-43.

⁵²⁸ Williams, *American Medical Biography*, 47. I have been unable to find the other referenced work written by Belden. After the Rider case he became very interested in reforming the medical societies in Massachusetts and Williams refers to a work called *Index Rerum*, consisting of Belden’s notes on medical sources he had read. There may be no remaining copies, or catalogued originals available.

and lost his only son to an early death. His experience was typical for a physician working in the 1820s and 1830s – typical with the singular exception of Rider.

Belden first encountered Rider to treat her case of chorea. Rider, who had been born and raised in Vermont by her mechanic father after her mother died from a “disease of the brain,” was an “inmate of the family of Mr. Festus Stebbins” in Springfield when Belden was called to treat her symptoms.⁵²⁹ Diseases that were not obvious contagions such as smallpox tended to blur together with regards to diagnosis and treatment. Chorea, also known as St. Vitus’s dance or “chorea Sancti Viti” can be traced back to the medical records of Paracelsus, a sixteenth-century physician in Switzerland. The closest modern analog of chorea is Huntington’s disease. During the nineteenth century, physicians had two types of chorea at their diagnostic disposal: a childhood variation called Sydenham’s chorea, which often followed a bout of rheumatic fever, and later on, Huntington’s chorea – the hereditary, fatal type.⁵³⁰ The term chorea was broadly used to describe disordered movements, convulsions, tics, spasms, and uncontrolled movement. Throughout the history of the disease many types of causes were postulated, including witchcraft, nervous disorders, depression, worms, and epilepsy.⁵³¹ Aside from being debilitating to its sufferers, chorea was a disease that was highly visible, chronic, and frightening to see. Often, people suffering from chorea would be avoided in the towns they lived in due to the often-

⁵²⁹ Belden, *An Account*, 30.

⁵³⁰ Alice Wexler, *The Woman Who Walked Into the Sea: Huntington’s and the Making of a Genetic Disease* (New Haven: Yale University Press, 2008), 9. Wexler traces the inheritance of Huntington’s disease through several generations of the Hedges-Tillinghast family that lived in East Hampton New York at the end of the eighteenth century. She briefly describes the history of St. Vitus’s dance, but the majority of the work is an examination of George Huntington’s discovery of a hereditary illness and her own case study of the plausibility of discovering one through familial symptoms.

⁵³¹ Wexler, *The Woman*, 10.

grotesque nature of their physical gesticulations and the observed correlation to melancholy and suicidal tendencies.⁵³²

A case study of chorea Sancti Viti published in *The Medical Repository* in 1804 bears many resemblances to Rider's set of symptoms, suggesting that Belden was working within a well-understood diagnostic category. Chorea, according to John Redmond Coxe in his letter to another physician in Philadelphia, was not an "idiopathic disease." After treating a 40 year old tailor, John Magnus, in June 1801, with every heroic measure he could imagine including hourly emetics and constant blood-letting, Coxe lost the patient and was able to do a dissection on his body allowing him to formulate the hypothesis that chorea was a "symptomatic affection of a disease... Hydrocephalus Internalus."⁵³³ Coxe's hypothesis was that chorea was somehow related to an excess of water in the brain was closer to the actuality of the illness than other competing theories. He wrote that chorea had been "regarded as similar to the disease produced by the bite of a tarantula, and it has also been ascribed to witchcraft." In 1801 in Vienna, Franz Joseph Gall, the mind behind the science of the brain, phrenology, or as Gall preferred to call it "cerebral physiology" (phrenology was the name his disciple Johann Gaspar Spurzheim borrowed from Rush and assigned to his slightly revised system in 1813) was hypothesizing that the brain was the organ that governed the mind and that each of its faculties were innate.⁵³⁴ This prelude to a

⁵³² Wexler, "The Death of Phebe Hedges," Chapter 1, 3-22.

⁵³³ John Redman Coxe, "Observations on Chorea Sancti Viti, with a new Theory of Disease: Communicated by John Redman Coxe, M.D. of Philadelphia, in a Letter to Dr. Miller." Eds. Samuel Latham Mitchill and Edward Miller, *The Medical Repository and Review of American Publications on Medicine, Surgery, and the Auxiliary Branches of Science. Second Hexade, Vol. II* (New York: T. & J. Swords, 1805), 7.

⁵³⁴ Sherrie Lynne Lyons, *Species, Serpents, Spirits, and Skulls: Science at the Margins in the Victorian Age* (New York: SUNY Press, 2009), 53. As a complement to Cooter, *Cultural Meaning*, see Stephen Tomlinson. *Head Masters: Phrenology, Secular Education, and Nineteenth-Century Social Thought* (Tuscaloosa, AL: The University of Alabama Press, 2005), 57.

more complex system of correlated qualities and organs would influence American understanding of somnambulism profoundly many decades later.

At the time Coxe was investigating his thoroughly purged tailor, the notion that the brain was the organ of the mind was at the height of brain science. In dissecting his patient's brain Coxe discovered that "the various communications between the ventricles were here most beautifully exhibited, especially in the foramen ovale uniting the two lateral ventricles, which was here large enough to admit, with ease, the extremity of the little finger."⁵³⁵ The parts of the brain had anatomical names available and a certain aesthetic loveliness, but grey matter continued to confound and the mind itself was too radical a topic. In poking his little finger into a dead man's flooded brain, Coxe had reached the outer limits of acceptable materialism.

Two of his observations about chorea suggest an enduring connection between chorea and somnambulism. Curiously, Coxe noted, "the motions in cholera [sic] cease during sleep, with, perhaps, few exceptions. In the last case I saw, the eyelids continued partially open, and the eyes rolled considerably."⁵³⁶ If Rider did have chorea, her symptoms would have been much improved during her somnambulist paroxysms. According to Belden, she had "been in the habit of sleeping more soundly, and a greater number of hours, than is usual."⁵³⁷ Secondly, Coxe related a case that demonstrated that "hysteria is sometimes combined with chorea... as is also catelepsy." Coxe discussed a nine-year old mulatto girl who had a "frequent and tormenting head-ach of some years continuance," and expressed her chorea on the left side of her head. It may be little more than coincidence that Rider's pre-somnambulistic symptoms were described

⁵³⁵ Coxe, "Observations," 5.

⁵³⁶ Coxe, "An Observation," 11.

⁵³⁷ Belden, *An Account*, 81.

as chorea, and a long-term headache on the left side of her head, but it is a compelling one.⁵³⁸ A case reported in the Medical Repository in 1821 showed that emetics were still a popular treatment, and curability continued to confound physicians. Dr. John Neilson, who was treating a child for what may have been Sydenham's chorea even resorted to using a treatment known to help rabies. The boy recovered, at least temporarily, just as Rider did after her time in the asylum.⁵³⁹

James Prichard's *A Treatise Diseases of the Nervous System* (1822) was another widely circulated and referenced source in both Europe and North America. Belden and Woodward both referred to it as an authoritative work on all ills related to the connections between the body and mind. Prichard had noted situations in which there was a determinable connection between chorea, paralysis and epilepsy. He observed that one half of the body would be more affected by the palsy accompanying chorea than the other. Chorea was seen as a treatable condition. "Even when some degree of mental imbecility has appeared," Prichard wrote, "the case is not so hopeless as when the functions of the brain, which are subservient to the intellectual faculties, have been injured by epilepsy or paralysis."⁵⁴⁰ According to Prichard, Rider's expression of symptomatic chorea was preferable to epilepsy or lingering paralysis.

While Rider had been suffering from chorea, she began to have somnambulistic paroxysms that were closely allied with her curious relationship to food and eating. Belden reported that when he was called to the Stebbins' household on the night of June 24th, he was "under the impression that she was deranged." Her symptoms included pain in the left side of her

⁵³⁸ Coxe, "An Observation," 11-12.

⁵³⁹ "A Case of Chorea treated by *Scutellaria Lateriflora*, communicated by Dr. John Neilson of this city," eds. Samuel Latham Mitchell et. al. *The Medical Repository of Original Essays and Intelligence Relative to Physic, Surgery, Chemistry, and Natural History... New Series, Vol. 6* (New York: William A. Mercein, 1821), 34.

⁵⁴⁰ Prichard, *A Treatise on Diseases*, 63-64.

head, a high temperature, and quickened pulse. Belden gave her an emetic and “she rejected a large quantity of green currants, after which she became more quiet, and soon fell into a natural sleep.” Rider remembered nothing of her paroxysm, signaling the first medically recorded episode of her somnambulism. A month passed and she then had a second somnambulistic paroxysm in which she dressed herself, and “proceeded to make preparations for breakfast.” After setting the table, she prepared coffee, skimmed the milk to make cream, put out bread and “went through the whole operation of preparing breakfast with as much precision as she could in open day; and this with her eyes closed, and without any light except that of one lamp which was standing in the breakfast room to enable the family to observe her operations.”⁵⁴¹ Again, she remembered nothing of what she had done during her paroxysm.

Rider’s paroxysms increased in frequency, occurring at least once a week. She would move things while in a somnambulistic paroxysm and have difficulty finding them when awake. Then she began to speak. She would remain in her bed where she sang, “talked, and repeated passages of poetry.” She had episodes where she was adamant that she was home in Brattleborough, Vermont and had no recollection of ever going to Springfield.⁵⁴² Though she had begun to speak, her audience was limited to her physician and the people residing within the family home. She had not yet garnered public attention. Her activities during this period continued to involve food. One paroxysm of note had Rider sewing a bag, which she said she needed to “boil some squash.”⁵⁴³ On another occasion she set the table for a meal and “actually prepared a dinner in the night, with her eyes closed.” In the dark she went to the root cellar,

⁵⁴¹ Belden, *An Account*, 34-35.

⁵⁴² Belden, *An Account*, 36-37.

⁵⁴³ Belden, *An Account*, 38.

“procured the vegetables,” made a fire, boiled them, and then “proceeded to try the vegetables to ascertain whether they were sufficiently cooked.” Likewise, she “procured” a cup of milk for herself and “ate it.”⁵⁴⁴ At this point in Rider’s illness – and Belden did see her somnambulism as a disease – her paroxysms started to occur both during the day and at night.

Belden was able to observe the disease characteristics of somnambulism in his increasingly complex patient. He recorded that “the state of somnambulism was usually preceded by a full, heavy, unpleasant feeling in the head - sometimes by headach, ringing in the ears, cold extremities, and an irresistable [sic] propensity to drowsiness.” Rider also “experienced what she described as a sense of rushing to the head, attended with a loss of the power of speech and motion.”⁵⁴⁵ Rider’s symptoms, some of which correlated with chorea, seemed to get worse while she was in a state of somnambulism, except for the loss of speech. To Belden and her friends, “her manner differed exceedingly in different paroxysms.” She moved much faster than she did in her waking life, and showed ignorance of surrounding objects. Sometimes she was “cheerful” and spoke, but more often she was irritable and suffering from pain in the left side of her head.⁵⁴⁶ Her eyes were extremely sensitive, and during the day she performed her routine with a bandage around them. Belden, especially interested in her power of vision – which would become clairvoyant as the somnambulism progressed – ran some tests on her eyes using a the reflection of light through a mirror to gauge the sensitivity of her ocular nerves to light.⁵⁴⁷

The Somnambulist’s Stomach

⁵⁴⁴ Belden, *An Account*, 39-40.

⁵⁴⁵ Belden, *An Account*, 42.

⁵⁴⁶ Belden, *An Account*, 44.

⁵⁴⁷ Belden, *An Account*, 47-48.

As the number of observable paroxysms increased, Belden made the observation that “these paroxysms were very obviously connected with the state of the stomach and digestive organs.” Though Rider’s appetite was good “she not unfrequently raised a considerable portion of what she ate.” Belden thought she might be dyspeptic, but countered his tentative diagnosis with the information that Rider had been purging her food for some time but was now suffering most severely from it. Belden went so far as to claim that her eating habits were causing her somnambulist paroxysms recalling that the “very first paroxysm occurred a few hours after she had eaten a large quantity of green currants.” During her episodes, “she very often called for food, particularly for apples; but she seldom awoke as soon as usual, after having gratified her appetite.”⁵⁴⁸ As a way to curb the paroxysms Belden restricted Rider’s diet, allowing her to eat only small quantities of simple foods and giving her emetics. After this course of dietary change, he did notice an improvement in the frequency of her paroxysms.⁵⁴⁹

Rider’s somnambulism pre-dated the Victorian female fad for invalidism. Beginning in the 1870s and continuing through the beginning of the 20th century, wasting illnesses were en vogue for young women from families with means. Chlorosis, tuberculosis, and the newly coined anorexia nervosa were being linked with hysterical temperaments and social cachet. The fragile, privileged woman became a Victorian ideal and provided plenty of material for the burgeoning field of psychiatry and nerve doctors. The appetite was seen as the best measure of a woman’s moral state. Being unable to control one’s appetite would set up a woman of means for ridicule and gossip.⁵⁵⁰ In the Jacksonian era, Rider was not considered to be a “fasting girl” and the

⁵⁴⁸ Belden, *An Account*, 51.

⁵⁴⁹ Belden, *An Account*, 51.

⁵⁵⁰ Joan Jacobs Brumberg, *Fasting Girls: The History of Anorexia Nervosa*. (New York: Vintage Books, 2000), 168, 179, for a history of “fasting girls” and the emergence of anorexia nervosa as a disease. See also Walter

discussion of her purgative eating habits was limited to medical fact. She was living on the fringe of a period, however, that Ann Douglas Wood identifies as an era in American history where there were frequent claims in literature and newspapers that many middle-class women were ill. Catharine Beecher, a reformer in women's education and health was one of the first women to note that other women were participating in the genteel fashion of being sick. She argued that women were seen as ill only because they were women. Wood argues that the uterus became a "catch-all" for female diseases, especially towards the end of the century. In the 1830s this was not the case. In fact for both Rachel Baker and Jane Rider, the uterus was, at least in the surviving records, never mentioned directly.⁵⁵¹

Though Belden did not define Jane's disordered eating as an eating illness, the first nebulous symptom corresponding to eating disorders would appear in the American asylums by the mid-nineteenth century. Asylum superintendents described external behaviors associated with restrictive or uncontrolled eating, attributing their patients to two named classes of disordered eating: "morbid appetite," – the belief that food was poisoned, and "religious monomania," which led people to stop eating due to religious convictions. The medical belief that irritated digestive systems played a major role in insanity compelled asylum doctors to pay close attention to the diets of their patients.⁵⁵²

After Rider entered the Worcester Lunatic Asylum, Woodward monitored her diet. By December 13th, he was confident in asserting that the paroxysms "were occasioned by improper

Vandereycken and Ron Van Deth, *From Fasting Saints to Anorexic Girls: The History of Self-Starvation* (London: The Athalone Press, 1994).

⁵⁵¹ Ann Douglas Wood, "The Fashionable Diseases": Women's Complaints and Their Treatment in Nineteenth-Century America," in *The Journal of Interdisciplinary History*, 4 no. 1 (Summer 1973): 25-52.

⁵⁵² Brumberg, *Fasting Girls*, 102.

food, particularly by the free use of fruit.”⁵⁵³ As of January 11, Rider was evidently still finding ways to “eat freely.” Woodward’s notes reflect that after doing so, she was “usually dull and sleepy afterwards.”⁵⁵⁴ On January 19th, Rider had a paroxysm in which she recited “The Pilgrim Fathers” after being censured for “eating fried cakes and the like between meals.” From within her paroxysm, Rider insisted that she had kept a fast all day, but that pancakes “might be eaten with impunity on fast-days.” It is unclear from the records whether she simply believed that she was fasting for religious purposes, or if Lent was being observed, or if she was in, fact, fasting.⁵⁵⁵ (The poem that Jane was reciting during this time, “Landing of the Pilgrim Fathers,” was written by Felicia Dorothea Hemans (1793-1835), a British poet).

Woodward reported that with a strict diet Rider was improving but that “there is still some oppression after eating, especially if she deviates from the regulations which have been prescribed respecting her diet; and any gross violation is almost certain to be followed by a paroxysm.”⁵⁵⁶ Around January 11th, Rider wrote a letter to an unknown friend in which she bemusedly wrote that “I have seen in the Boston papers that I am entirely well, and have returned to my friends, and I hope I can say so myself in a few weeks.” She also complained that all she could do while remaining in the asylum was to “deny myself every thing that would be injurious to my health, and I find that it is very hard to resist every temptation: but when I think what has been done for me, I can.”⁵⁵⁷ This letter is perhaps evidence that Rider truly did not remember the actions she took during her paroxysms, as on that day she had been scolded for sneaking food.

⁵⁵³ Belden, *An Account*, 67.

⁵⁵⁴ Belden, *An Account*, 75.

⁵⁵⁵ Belden, *An Account*, 75.

⁵⁵⁶ Belden, *An Account*, 78.

⁵⁵⁷ Belden, *An Account*, 86.

The letter is an example of Rider's voice breaking through the medical text, which itself, is embedded in a popular narrative. Her letter remains ambiguous: was she awake when she wrote it? Was she putting on a face for her friends so that they would not suspect her secretive eating?

In late January 1834, she became ill and had a fever for two weeks. Due to her physical illness her diet was even more restricted and she ate "gruel, weak coffee, porridge, &c." Woodward reported that during her fever she had only "one long paroxysm, and two short ones of 15 or 20 minutes" but when she did have one, she was "inclined to eat in the paroxysm" which in his opinion protracted it.⁵⁵⁸ By February, Woodward was reporting a vast improvement in the frequency of Rider's paroxysms. He was applying leeches to her head as a physical treatment and she was busily engaged in doing the "duty of an assistant, in the absence of one of our attendants, and she has done more or less work in the halls every day." According to Woodward, Rider chose "a milk diet, which suits her."⁵⁵⁹ Though it seemed to be a fairly consistent problem, Rider's difficulty eating was dwarfed by her increasingly supernatural abilities, made manifest by her somnambulism.

A New Species of Insanity

The public perception of somnambulism had not changed drastically since Rachel Baker awed audiences in 1814. Through Jane's case and Abraham Prescott's murder trial, the vision of somnambulism as insanity was taking form. It was evolving into a species of insanity. Throughout 1833 and 1834 however, it remained a contentious condition and fodder for epistemological debate. Belden, who was relatively experienced with somnambulism, reasoned "there is a state of the intellectual powers analogous to that which is occasionally witnessed in

⁵⁵⁸ Belden, *An Account*, 90.

⁵⁵⁹ Belden, *An Account*, 92.

insanity.... with increased sensibility in one or more of the organs of sense.”⁵⁶⁰ Belden and Woodward had read widely on somnambulism, and Belden cited Abercrombie and Prichard as reassuring authorities on the topic.

John Abercrombie, a Scottish physician whose writing on somnambulism was a cornerstone of the hypotheses on the topic, published a lengthy explanation of the state in 1830. He divided somnambulism into a process of degrees with the first being sleep-talking, the second sleep-walking, which was “familiar to every one.” Abercrombie had likewise identified a condition that was perhaps not familiar to everyone. “A condition,” he wrote, “very analogous is met with coming on in the daytime in paroxysms during which the person is affected in the same manner as in the state of somnambulism, particularly with an insensibility to external impressions.”⁵⁶¹ The apparent insensibility of somnambulists puzzled the physicians who studied it; “the state of the organs of sense in somnambulism is singular, and almost incomprehensible. At the same time that it is difficult to produce any effect upon them by the usual stimuli,” wrote John Bostock.⁵⁶²

Edward Binns found somnambulism to be “more curious than hallucination, trance, or reverie” as it seemed to produce a case of “double consciousness.”⁵⁶³ This was the same condition thought to explain Mary Reynolds’ two-fold personality. The criteria of natural somnambulism were explicit enough: the somnambulist would be either walking or talking in their sleep, they would lose their memory, have a distinctive lack of volition during their

⁵⁶⁰ Belden, *An Account*, 18.

⁵⁶¹ John Abercrombie, *Inquiries Concerning the Intellectual Powers, and the Investigation of Truth* (Edinburgh: Waugh & Innes, 1830), 218-219. Abercrombie devoted a section of his essay on reason to somnambulism.

⁵⁶² John Bostock, *An Elementary System of Physiology: Complete in One Volume*. 3rd ed. (London: Baldwin and Cradock, 1836), 814.

⁵⁶³ Edward Binns, *The Anatomy of Sleep; Or, The Art of Procuring Sound and Refreshing Slumber at Will* (London: John Churchill, 1842), 125.

paroxysm (leading to Binns to expand upon the nascent theory of double consciousness), and they would not be subjects of animal magnetism moderated by a third party. There would be a marked insensibility to external stimuli suggesting that somnambulism was an affectation of the internal senses (the mind), and that the body was motivated by unconscious muscle mechanics, and, furthermore, it was physically dangerous to the body of the somnambulist. The activities of the internal senses during somnambulism were explained by phrenological theory. Jane's doctors subscribed to it enthusiastically, and both the proponents of artificial somnambulism and natural somnambulism called upon phrenology to account for the sympathetic nature of the clairvoyant connections between mesmerizer and mesmerized, doctor and patient.

Prichard's views on somnambulism allowed Belden and Woodward to shape their theories about it as a type of insanity. Somnambulism was sensational. It had "excited more attention, as a matter of curiosity, on account of its singular phenomena, than as a subject of pathological inquiry and medical treatment." This was certainly characteristic of artificial somnambulism induced by the healing mesmerizers in Europe. It was less true in America, where it had been regarded with curiosity and suspicion prior to its medicalization beginning with Jane Rider and Abraham Prescott.⁵⁶⁴ Somnambulism, in 1822, when Prichard published his *Treatise*, was primarily seen as a state with strong connections to sleeping and dreaming "constituting no considerable deviation from the healthy state."⁵⁶⁵ Prichard found hysteria to be far more severe of a disease – one which "puts on the form of almost every individual distemper of this class" including apoplexy, convulsions, palpitation, and locked jaw.⁵⁶⁶ Unlike

⁵⁶⁴ Prichard, *Treatise on Nervous Disease*, 64.

⁵⁶⁵ Prichard, *Treatise on Nervous Disease*, 64.

⁵⁶⁶ Prichard, *Treatise on Nervous Disease*, 65.

somnambulism, hysteria would become the defining nervous disorder of the late-nineteenth century.

The theory which most comprehensively explained somnambulism in Rider's case, and which was widely accepted as the cause of somnambulism in the 1830s was phrenology. Phrenology, first called "cerebral physiology," was devised by Franz Joseph Gall in early nineteenth century Vienna. Rejecting the "sensationalist psychology" of his predecessors Charles Bonnet and Étienne Bonnot, Abbé de Condillac, Gall sought out a functionalist, rather than environmentalist explanation for the structure of the brain and human behavior.⁵⁶⁷ In 1800, Gall met Johan Caspar Spurzheim who would be his collaborator and fellow skull collector until 1813 when intellectual differences separated the two. During their decade of theorization, Gall and Spurzheim would work from Gall's hypothesis that the brain was the organ that determined mind, and that the size of the particular organ that was active was the measure of the trait's strength.⁵⁶⁸ Together Gall and Spurzheim elucidated their two foundational doctrines: crainioscopy and organology. Crainioscopy referred to the reading of personality features via the shape of the skull and would later be merged with physiognomy in the popular consciousness lending phrenology its quackish patina.⁵⁶⁹ Organology would ultimately provide the most salient theory for physicians to draw upon to explain the peculiarities of somnambulism. Gall and Spurzheim had generated a list of twenty-seven organs or faculties within the brain. Even though their dissections of grey matter revealed ambiguous cortical folds, they maintained that the

⁵⁶⁷ See Cooter, *The Cultural Meaning of Popular Science*, for an authoritative history of the pro-phrenology and anti-phrenology social formations of physicians and philosophers who shaped the practice in Britain and Europe. Tomlinson, *Head Masters*, 50-54.

⁵⁶⁸ Tomlinson, *Head Masters*, 59.

⁵⁶⁹ Tomlinson, *Head Masters*, 59.

organs were materially real and excitable, thus contributing to imbalances in personalities and behaviors.⁵⁷⁰

Phrenology developed into its mid-century form with the split between Spurzheim and Gall. Spurzheim started calling the practice of studying the organs of the brain “phrenology” and adjusted the categories refining and reconfiguring organs to suit newly discovered behaviors or practices. Spurzheim traveled to Scotland where a young George Combe was enraptured by one of his lectures.⁵⁷¹ Combe would be the man responsible for popularizing phrenology on a transatlantic scale. He founded the Edinburgh Phrenological Society in 1826, while Dr. John Elliotson worked on creating the London Phrenological Society in 1823.⁵⁷² As Spurzheim focused his efforts on writing *Observations on the Deranged Manifestations of Mind, or Insanity*, (English translation, 1817), Combe was applying his efforts to making phrenology a moral and social tool. Combe was unusually devoted to phrenology. It was his total explanation for the functioning of human beings and society. In his *Constitution of Man* (1828), Combe adopted a moral reformist platform: he wanted to improve the physiological chances of humankind.⁵⁷³ He strongly advocated that education could change a person’s phrenological

⁵⁷⁰ The outline of the twenty-seven organs is discussed in Cooter, and outlined in Tomlinson and Lyons.

⁵⁷¹ Spurzheim took Gall’s system of faculties and arranged them into a hierarchical order, introducing genera and a scheme of ascension from animals to man. He included a delineation of faculties that were common to both. Among his new categories were “the moral sentiments” such as Veneration and Destructiveness. The number of categories went from 27 to 33. See John Van Wyhe, *Phrenology and the Origins of Victorian Scientific Naturalism* (Burlington: Ashgate, 2004), 34. Van Whye argues that Spurzheim split from Gall, not out of outrage over Gall taking credit for Spurzheim’s work, but because Spurzheim had a strong desire to learn English and collaborate with English scientists. Van Whye also claims that Combe’s chance encounter with Spurzheim was especially fortuitous because Spurzheim was giving the defense of his career against John Gordon’s critique of the phrenological system (p. 44-45, 51). The term “phrenology” was coined by Benjamin Rush, but Spurzheim is credited with popularizing and transmitting the term. See Tomlinson, *Head Masters*, 80.

⁵⁷² Van Whye, *Phrenology and the Origins*, 56-57.

⁵⁷³ Tomlinson, *Head Masters*, 98-99.

destiny. This also contributed to his thoughts on the curability of insanity.⁵⁷⁴ Samuel Woodward was a devoted advocate of the phrenological system. Amariah Brigham, who ran the Utica asylum also strongly believed in the curative powers that could be accessed through phrenology.⁵⁷⁵

Combe, alongside Spurzheim would be the first phrenological authors published in the United States beginning in 1822. The first Phrenological Society in America was formed in the 1820s in Philadelphia. According to Dr. John Bell, “the first phrenological society in the United States was founded in this city in the month of February, 1822, of which Dr. Physick was made president, Dr. John Bell, corresponding secretary, and Dr. B.H. Coates, recording secretary.”⁵⁷⁶ Boston established its own society in 1832. The Boston Phrenological Society would have 130 members by 1833 including twenty-five physicians, ten to twelve lawyers, and nine clergymen.⁵⁷⁷ Woodward was an ardent follower of phrenology and would apply its tenets to his care of the insane.⁵⁷⁸ In 1832 Spurzheim embarked on what was to be a two-year tour of the United States. His reception in Boston did much to foster the creation of the Boston Phrenological Society. While in Boston, Spurzheim contracted a fever, refused treatment, and died in 1832. He was buried in Mount Auburn cemetery in Cambridge, Massachusetts. Phrenology became a component in the moral psyche of American reformers, but was not

⁵⁷⁴ Tomlinson, *Head Masters*, 108.

⁵⁷⁵ Tomlinson, *Head Masters*, 215-216. Van Whye, *Phrenology and the Origins*, 57, makes an interesting argument that “the unrecorded knowledge which existed in the heads of phrenologists is extinct and can never be regained... Too much tacit knowledge is missing.” Van Whye is quite likely correct in this assertion. The references to phrenological organs that surface in Jane’s case, for example, seem almost casual. To those who possessed the tacit knowledge, the codex of organs would have been sufficient to communicate more.

⁵⁷⁶ *The Phrenological Journal and Science of Health: Incorporated with the Phrenological Magazine*, Vol. 2 (Philadelphia: Fowler and Wells, 1839), 476.

⁵⁷⁷ Tomlinson, *Head Masters*, 222, 226.

⁵⁷⁸ Tomlinson, *Head Masters*, 215.

regarded without skepticism by some. By the time Combe visited in 1840, phrenology had been an active force in the medical and legal profession for almost a decade.⁵⁷⁹

Phrenologists also held the view that men and women possessed a natural difference in their brain organs. Women's reasoning was limited to the visible world, Spurzheim theorized. Women were governed by their emotions. Their organs that corresponded to emotions were likely to be more excitable or active. Due to the reformist character of phrenology, cases were made that women's faculties could be trained and improved so that they might participate in the rational world of men.⁵⁸⁰ This axiomatic view of the phrenological differences between men and women almost certainly framed Belden and Woodward's thinking about Rider's case.

The most captivating of Rider's somnambulistic powers were tied to her clairvoyance, and her apparent ability to see through opaque objects while in a paroxysm. Her abilities were so astonishing that Belden felt it necessary to reconcile his phrenological interpretation with the medical impetus to classify somnambulism as insanity. Belden chose his words carefully: "in addition to the mental hallucination and the peculiar state of the bodily organs which constitute somnambulism," he wrote, there was a separate but concurrent "unnatural or excited state of some of their intellectual powers connected with physical disease." The bodily organs he was referring to were those contained within the brain. His blurring of "bodily powers" with "intellectual powers" supports Van Whye's assertion that phrenology was based in tacit knowledge of the physicians who engaged it in their medical diagnoses. The bank of knowledge pertaining to phrenology was larger than what was noted in guides and papers. To Belden, the phrenological organs of the brain were naturally included amongst the broader category of

⁵⁷⁹ Tomlinson, *Head Masters*, 224-225.

⁵⁸⁰ Russet, *Sexual Science*, 16-21.

organs contained within the body. The excitability of the organs that caused a somnambulistic paroxysm was something that was “analogous to that which exists in some cases of insanity, or in persons whose brain is affected by disease...”⁵⁸¹ Somnambulism, true to its medical history in the United States, was cast as simply one kind of disease of the mind that bore a parallel symptomatic pattern to insanity.

Woodward may not have maintained Belden’s views as strongly. Rider’s incarceration in the Worcester Lunatic Asylum poses questions as to what his interpretation of somnambulism as a type of insanity entailed. Established by the state of Massachusetts in 1830, the Worcester State Hospital was intended from its inception as an institution for the indigent insane: those who no longer had the option of community or family care.⁵⁸² Woodward took a more direct route to medical studies than Belden. Born in Torrington, Connecticut, in 1787, he started learning medicine under the guidance of his physician father. In 1809, Woodward was certified by the Connecticut State Medical Society and in 1810 opened his first practice. His interest in asylum design and management was fostered when he consulted in the establishment of the Hartford Retreat. The humanitarian fervor of the Second Great Awakening had inspired Woodward with the spirit of reform and moralistic optimism. The Worcester Asylum, though an alternative to the poor house, was also meant to cure.⁵⁸³ Like many of his contemporaries, Woodward had cast off his demons, and instead interpreted insanity as a somatic illness, caused by diseases of the brain. Grob summarizes the broad agenda of nineteenth century medicine as a somatic endeavor in writing: “the general direction of medical thought in the nineteenth century, leading to a

⁵⁸¹ Belden, *An Account*, 94.

⁵⁸² Grob, *State and the Mentally Ill*, xii, 34.

⁵⁸³ Grob, *State and the Mentally Ill*, 43-44. See also: George Chandler, “Life of Dr. Woodward,” in *American Journal of Insanity* 8 (1851): 119-135.

localized pathology that identified specific disease entities by correlating lesions with symptoms, also influenced psychiatry by tending to discourage a psychological approach in favor of a somatic one.”⁵⁸⁴ Ever the rationalist, Woodward held firm in his belief that natural laws directed the right way of living. By following such laws, a person could achieve a healthy life and mind. The logic of this worldview allowed Woodward and others who followed this strain of rationalism to assert that insanity could be self-inflicted by disobeying nature’s prescriptions. Woodward was likewise not a devout materialist. He acknowledged that social factors influenced an individual’s adherence to natural laws, and thus, their sanity. Social factors could have material consequences on the body, but themselves were not objects that one could examine.⁵⁸⁵

Woodward was also a proponent of the doctrine of sympathy. He believed that the brain would sympathetically express illness in accordance with other diseased parts of the body. Sympathy was the central explanation for clairvoyant somnambulism, especially in instances of artificial somnambulism. In his study of the roots of Spiritualism in the United States, Robert S. Cox, turned to the somnambulists as spiritualist pioneers, who, as he argues, “stalked the land,” during the long hibernation of mesmerism in the United States (roughly 1784-1837). Sleepwalkers were contradictions, able to display “purposeful behavior in the absence of consciousness and will,” giving rise to questions about the relationship between “body and society” and providing fodder for medical and philosophical investigations into the nature of consciousness.⁵⁸⁶ Cox argues that the inheritance of Scottish Enlightenment ideas about

⁵⁸⁴ Grob, *State and the Mentally Ill*, 52. Woodward, like his contemporaries tended toward a somatic interpretation. As Woodward wrote in 1839, ““The diseased brain in insanity, the worn out brain of the aged, and the imperfect brain of the idiot, are the only reason why the mind is not as active and intelligent in these individuals as in the rest of mankind.””

⁵⁸⁵ Grob, *State and the Mentally Ill*, 53-54.

⁵⁸⁶ Robert S. Cox, *Body and Soul: A Sympathetic History of American Spiritualism* (Charlottesville, VA: University of Virginia Press, 2003), 22-23.

sympathy between people, body parts, and the mind, provided a set of rudimentary guidelines that physicians would use to attribute moral sensibility to somnambulists. Cox identified this period of somnambulism as a time when a mode of sympathy emerged and matured, eventually giving spiritualists a model to create a society in which the sympathies of the body to itself and its departed soul, would be mirrored in the séances performed by mediums.⁵⁸⁷ According to Cox, somnambulism was a state in which sympathy was limitless and the body was a metaphor for a community, plagued by malfunctioning sympathy without bounds or rules, and thus subject to social disorder and anarchy.⁵⁸⁸

Cox does not examine the prevalence of phrenology in modifying medical doctrines of sympathy. Some practicing phrenologists, like Woodward, took a somatic, materialistic perspective, but also acknowledged the influence of the environment on pre-existing structures.⁵⁸⁹ Woodward thought that with proper moral management, the more excitable organs of the brain could be neutralized, if not tamed, by a calm and regular living environment. The environment of the asylum was supposed to have also strengthened the weaker organs of the mind.⁵⁹⁰ While Woodward does seem to describe Rider as a madwoman in his records of her stay at the asylum, he may have been thinking in phrenological terms about treating her somnambulist paroxysms. Rider's faculties were weakened but could be strengthened by a moral regimen. It is unlikely that Woodward actually saw Rider as an indigent, furiously mad

⁵⁸⁷ Cox, *Body and Soul*, 3-5.

⁵⁸⁸ Cox, *Body and Soul*, 35.

⁵⁸⁹ Grob, *State and the Mentally Ill*, 64. See also: Eric T. Carlson, "The Influence of Phrenology on Early American Psychiatric Thought," *American Journal of Psychiatry* 115 (Dec. 1958), 535-38.

⁵⁹⁰ Grob, *State and the Mentally Ill*, 64.

person. Rather, he may have inadvertently been the diarist of her decline into artificial madness after her medical keepers led her to the asylum.

As of 1832 Massachusetts legislation mandated that all communities and towns would send their insane members deemed most dangerous to society to Worcester and then pay for their up-keep. If room was available after the criminally insane had been situated, private families could pay to house their problematic members.⁵⁹¹ Rider was in this latter category. This however, did not mean that she belonged with the most deranged and vicious members of the insane underclass that had been disturbing Massachusetts' humanitarian organizations prior to the establishment of a state hospital. The hospital was forced to take all cases referred by the court. Because of the legislation, many of the state's oldest and most incurable cases of insanity were transferred from the prison to the asylum. The hospital was built to accommodate 120 patients, but this law would ensure an escalation of the asylum population at a rate far faster than any alleged cure.⁵⁹² By 1834, overcrowding had become a reality.⁵⁹³

In his ambitious 1832 proposal which laid out the architecture of the ideal asylum and the reasons for particular kinds of ventilation, the wing system, the superintendent's quarters, and wood-working among a myriad of other engineering details, Woodward identified three classes of inmates: the legally compelled, the "town pauper lunatics," and the financially independent insane. Woodward justified the co-mingling of the savage and the delicately delirious with the "well authenticated fact" that "those, upon whom the first attack of insanity is most violent, and who are therefore more liable, from the vehemence of its assaults to commit outrages upon the

⁵⁹¹ Grob, *State and the Mentally Ill*, 84.

⁵⁹² Grob, *State and the Mentally Ill*, 85.

⁵⁹³ Grob, *State and the Mentally Ill*, 96.

persons or property of others, are also most easily cured.”⁵⁹⁴ Woodward felt passionately for the mentally unsound. He pled on behalf of the insane: “they have been condemned as no criminal ever was condemned, and have suffered as no criminal ever has suffered.” Comparing the insane to the figure of the criminal, Woodward justified the moral treatment for his state wards in writing that “though the insane have been made fellow-prisoners with the criminal, they have suffered the absolute privation of every comfort for the body, and every solace for the mind.”⁵⁹⁵

In 1829, the Office of the Secretary of the Commonwealth of Massachusetts, headed by Woodward, had made a survey of approximately half the towns in the state. From this sample, Woodward determined that there were 160 “lunatics in actual confinement, and of this number the duration of the confinement of one hundred and fifty, exceed in the aggregate, a thousand years.”⁵⁹⁶ This was an appalling way to treat citizens. A study of the living conditions of these cast off mad revealed the “long protracted and mysterious horrors of madness” if left unchecked.⁵⁹⁷ In one prison, Woodward discovered a poor man who was swathed in rags, who had become animalistic in his confinement. He had contrived a “heap of filthy straw, like the nest of swine” and had “built a bird’s nest of mud in the iron grate of his den.” The anteroom of this bestial bowery was a “dark dungeon, having no orifice for the admission of light, heat, or air, except the iron door, about 2 1/2 feet square, opening into it from the prison.”⁵⁹⁸ If this inmate were to be released (or attempt escape), he would have had to crawl through his hole, like the

⁵⁹⁴ Samuel B. Woodward, *Report of the Commissioners Appointed Under a Resolve of the Legislature of Massachusetts to Superintend the Erection of a Lunatic Hospital at Worcester... Made January 4th, 1832* (Boston: Dutton and Wentworth, Printers to the State, 1832), 12.

⁵⁹⁵ Woodward, *Commission*, 1832, 14.

⁵⁹⁶ Woodward, *Commission 1832*, 16.

⁵⁹⁷ Woodward, *Commission 1832*, 22.

⁵⁹⁸ Woodward, *Commission 1832*, 16.

animal the moral reformers of the asylums found he had become. The smell of the prison dungeons induced nausea and vomiting; the filthy clothes of the insane “made their insanity more hopeless,” and they were denied medical care. Women were sexually abused by the male inmates. Both men and women alike were discovered exposed to the elements. Woodward shared tales of utter desolation, narrating a case where a lunatic inmate had been in total confinement for eight years, never setting foot outside his cell except for two instances. Inmates were grateful for lack of fire because they had “never froze.” They had become inhuman. Woodward looked through the orifice of a door and asked himself the question “is that a human being?” The man’s “hair was gone from one side of his head, and his eyes were like balls of fire.”⁵⁹⁹ This was the lot of the incurable, and Woodward wanted nothing more than to close “some of the most painful records in the history of human suffering immediately and forever.”⁶⁰⁰

These people became genteel Jane Rider’s neighbors and social companions once she was removed to Worcester. Despite Woodward’s architectural grandiosity and claims of unheard of curability, he was aware that his population consisted of the marginalized and the damned, feral as the worst nightmares from darker times. “Essential injury might accrue from the occasional absence of the Physician,” he warned, and moral treatment was more a prayer than a promise.⁶⁰¹ Woodward and Belden brought Rider, a physically sick but docile woman, into this environment. She was one of Worcester’s first patients. Woodward published his first Report Relating to the Lunatic Hospital in 1833. In the preamble he remarked, sadly, that unlike the suffering body, which is relieved by death, the suffering mind had a perpetual existence,

⁵⁹⁹ Woodward, *Commission 1832*, 16-18.

⁶⁰⁰ Woodward, *Commission of 1832*, 19.

⁶⁰¹ Woodward, *Commission of 1832*, 29.

especially without intervention. “The mind will survive,” he wrote, “even a dissevered consciousness, and, as it still lives on will bring into alternate action its various capacities of pain.”⁶⁰² Already in the first year of operation, 164 patients were admitted, with the average duration of treatment lasting six months. Expressing a humanitarian pride over his patients, Woodward wrote “the inmates at Worcester, have been a more select class than were ever before assembled together; but unfortunately for success in regard to cures, it has been a selection of the most deplorable cases in the whole community.”⁶⁰³

While Woodward tried to both admit and brush away the tribulations of opening an asylum for primarily indigent, insane, criminals, the environment Rider was placed into was truly dangerous. There were accidents. The attendants and nurses were not yet trained and overwhelmed by their charges. Violence was initially commonplace. Of the forty patients who refused to wear clothing, by 1834, only eight stubbornly remained naked. Housed in Worcester alongside Jane were thirty-three foreigners, twelve “idiots,” and a variety of other paupers and prisoners.⁶⁰⁴ In his meticulous demographic records of the inmates, Woodward noted the presumed cause of the insanity, the duration of the disease, the age, sex, marital status of the patients, and whether their disease was hereditary. Only two inmates were under the age of twenty. Jane was one of them. She was admitted on December 5th 1833, and Woodward listed her age as 19 and the cause of her insanity as amenorrhea, or cessation of menstruation. If Rider’s eating had affected her weight, and in turn prevented her menarche cycle, this would have been a less controversial diagnosis than somnambulism

⁶⁰² Samuel Woodward, *Report Relating to the Lunatic Hospital*, 1833, 4. See also Samuel Woodward. *Second Annual Report of the Trustees of the State Lunatic Hospital at Worcester. December 1834* (Boston: Dutton and Wentworth, 1835).

⁶⁰³ Woodard, *Report* 1833, 5.

⁶⁰⁴ Woodward, *Report* 1833, 6-9.

Male insanity was thought to have been caused by fanaticism, religious excitement, and intemperance, and wounds to the head. There was the occasional cause of “masturbation,” and “repelled eruption.” Other causal diagnoses for men included “abuse of parent,” “study,” “fear of poverty,” “loss of property,” “excessive use of tobacco,” “future dread of punishment,” “pecuniary embarrassment,” and a “prosecution.” The causes of female insanity were attributed to women’s roles in life, just as men’s were. The women were categorized as “unknown,” or else stricken by such emotional plagues as “family trouble,” “disappointment in marriage,” “puerperal fever,” “ill health,” “amenorrhoea,” “solicitude for a sick child,” “abuse of husband,” “loss of husband,” “jealous of her husband,” “nervous excitement,” and a great deal of intemperance.⁶⁰⁵ Rider would have been categorized as having periodical insanity, rather than hereditary insanity due to the nature of her paroxysms. What was it about somnambulism that required secrecy in Woodward’s record keeping? Belden and Woodward were doing experiments on Rider’s clairvoyance, but they did not wish the state to know that any inmate could potentially be fraudulent or discredited. Woodward’s omission of Rider’s somnambulism rather seems to suggest that he, alongside Belden, believed it was genuine. While the records do not specifically accuse Rider of being dangerous, somnambulism was still perceived as a frightening condition.

A Dangerous Occupation

In his work of 1842, Edward Binns wrote that “dreams and somnambulism, so far from being perfect states, or conditions of freedom of The Soul from the bonds of matter, are but very imperfect developments indeed of the reasoning powers, which would not be the case, if the

⁶⁰⁵ Woodward, *Report 1833*, 16-18.

reasoning powers were totally independent of the material organs.”⁶⁰⁶ This analysis shows that the material organs that composed the basis of phrenology were still very much intact as an explanation for somnambulism, somnambulism being an imperfect way of reasoning. During the period from Rachel Baker’s preaching somnium to Rider’s transition from a woman with a forceful public voice to a disintegrating inmate, concerns over what the somnambulistic state was remained fairly continuous. What concerned physicians most about the somnambulistic state was the possibility that the soul could disconnect from bodily matter, leaving the body as an empty vessel and purely sensory-responsive machine. Consciousness itself was at stake in unraveling the nervous fibers of the stories people told about sleepwalkers. This dis-ease over consciousness was shared both by the medical community and the community at large. Somnambulists were still marginal figures, fraught with peril as they revealed the second, somnolent world of the mind.

For example, English physiologist William Carpenter argued that somnambulating allowed people to engage in activities that would have normally been too dangerous to manage while awake. During somnambulism “the individual is unconscious of external objects” but the

⁶⁰⁶ Edward Binns, *The Anatomy of Sleep*, 137. Little has been written about Edward Binns, but the Binns Family Genealogical Project has published a biography of his extraordinary life. Born and raised in Jamaica as a British creole (1804-1851), Binns trained in Edinburgh as a physician and graduated in 1828. He returned to Jamaica and spent the 1830s pursuing abolition with the aid of Quaker missionaries, such as Thomas Clarkson. See *The Binns Family Newsletter*, 15 (Spring 2008): 2-4.

<http://www.thebinnsfamily.org.uk/forum/uploads/Binns%20Newsletter%2015%20a.pdf> (Accessed May 12, 2014).

In a rare 1845 edition of *The Anatomy of Sleep*, Binns used his expertise in sleep phenomena to record abolitionist stories such as the following: "A young and beautiful quadroon girl, named Duncan, was found murdered in a retired spot, a few paces from the main road. From the evidence given on the coroner's inquest, it was satisfactorily established that she had been violated previous to the murder. A large reward was offered for any information that might lead to the apprehension of the murderer; out nearly a year elapsed without any clue whatever being obtained. It happened that, about this period from the discovery of the murder, two black men, named Pendril and Chitty, were confined for separate petty offences; one in the Kingston Penitentiary, on the south, the other in Falmouth Gaol, on the north, side of the island. Their imprisonment was unknown to each other, and the distance between their places of incarceration was eighty miles. Each of these men became restless and talkative in his sleep, especially expostulating as if in the presence of the murdered girl, and entreating her to leave him. This happened so frequently that it led to inquiries, which terminated in the conviction of the two men."* This case may be regarded either as an example of accidentally synchronous dreams, or else of an apparition presenting itself simultaneously, or nearly so, to the sleeping senses of two men at a distance from each other." Excerpt transcribed from Robert Dale Owen, *Footfalls on the Boundary of Another World* (London: Trubner & Co. 1860), 317.

“Cerebellum is also awake, so that the movements which the individual performs, are perfectly adapted to their object; indeed it has frequently occurred that the power of balancing the body has been so remarkably exercised in this condition, that sleep-walkers have traversed narrow and difficult paths.” They could not have done during the daytime when they were “conscious of their danger.”⁶⁰⁷ Robert MacNish made a slightly different observation about peril for the night perambulators. He hypothesized that “somnambulists often get into the most dangerous situations without experiencing terror” because they could not “apprehend danger” and were therefore unable to even “point out the existence of danger” and “unable to produce corresponding emotions in the mind.” If a sleep-walker did happen to perceive danger, her “want of terror is to be imputed to a quiescent state of the organ of Cautiousness.” In fact, Spurzheim thought that somnambulism itself was proof that the phrenological model of the mind was correct. He wrote “somnambulism also proves the plurality of organs. This is a state of incomplete sleep, wherein several organs are watching... Unaware of the danger they encounter, somnambulists do acts, which, though possible, they would not attempt if they were awake, and conscious of the danger to which they are exposed.”⁶⁰⁸ Want of terror notwithstanding, the average sleepwalker did get into some precarious situations in their career as a night-rambler.

⁶⁰⁷ William Benjamin Carpenter, *Principles of Human Physiology; With Their Chief Applications to Pathology* 1st American Edition. (Philadelphia, 1843), 217.

⁶⁰⁸ MacNish, *Philosophy of Sleep*, 165. The organ of *cautiousness* is a reference to the interest in somnambulists and their ability to perceive danger, as expressed by phrenologists. See: Johann Gaspar Spurzheim, *Phrenology, or The Doctrine of the Mental Phenomena* Vol. 1 (Boston: Marsh, Capen & Lyon, 1832), 75. The elided quotation is here: “Now it is known that the brain takes cognizance of the external world by means of the five external senses. If, during sleep, particular organs act, dreams arise; and if the muscles be excited, motion follows, or the sleeper walks.... when we would reflect deeply upon any subject, we escape from the noise of the world and external impressions, by covering our eyes with the hands; and putting a great number of organs to rest, we endeavor to concentrate all vital power in one or in several. In dreaming and in somnambulism this naturally happens, the functions of the active organs are then often more perfect and more energetic, the sensations more lively, and the reflections deeper than in the state of watching.”

The American public was regaled with sensational tales of sleepwalkers treading dangerously, sometimes meeting terrible ends. In Manchester, Vermont, in June of 1824, a woman named Elvira Ayers met a “sudden and melancholy death.” While living with Milo L. Bennet, Esq., she disappeared. Bennet searched his barn and the well “where he found her and drew out a lifeless corpse.” He made “some fruitless attempts to restore life” and then contacted the appropriate authorities. Bennet was brought before a “jury of inquest” who reluctantly “brought in a verdict of accidental death.” It was not until Ayers family arrived for the funeral that suspicions surrounding the case were put to rest. Her mother disclosed that Ayers had been “known to get up in her sleep” and shortly before her death had several times awoken to find herself outside the house. She told no one else about these incidents, and her secrecy “put the cause of her death beyond a doubt.”⁶⁰⁹

In North Andover, Massachusetts, Mrs. Mary Cooper got up while in a “somnambulistic state” and went to do her washing. She took “a tub, a pail and washboard, and went to a pond in the rear of the house.” She was found drowned by her husband Edward the next morning.⁶¹⁰ In 1858 in Upper Ferry Landing, John Bray of Indiana, who was heading west along the Mississippi with his wife, father-in-law and four children stopped for the night in town. At some point between midnight and one in the morning, Bray, while sleepwalking, took his youngest child, “aged three years” and “walked from the room and into the water.” The child began to cry while Bray awoke and attempted to call for help. While onlookers attempted to devise a rescue, the

⁶⁰⁹ “Dangers of Sleepwalking.” *Connecticut Herald* (New Haven, CT), July 6, 1824, 3.

⁶¹⁰ “Sleep-Walking.” *Lowell Daily Citizen and News* (Lowell, MA) September 9, 1856.

“frantic grief of the family partook of the incoherence and wildness of the maniac.” The father and his child both drowned.⁶¹¹

Sleepwalkers did not always perish in dreadful ways, but sometimes wreaked havoc on those around them. A ship captain, who had stocked his provisions with brandy for a foreign voyage noticed that an “inch or two” from his personal bottle, locked in his cabin, was missing each morning. While the captain searched for the drunken thief, the crew, to preserve their “honor and character” staked out the captain’s door and discovered after hearing a noise, that “the captain was stalking through the cabin in his sleep, steering fair however, to the haunted bottle, when, just as he was swallowing a huge caulker, the men awakened him.” The captain claimed total ignorance of his night tipping, with some degree of embarrassment.⁶¹²

In Manchester Township, Ohio, in 1859, Sarah Milburn, a young girl around the age of 13, was staying with her aunt and uncle. While the family was asleep, she awoke her aunt by opening the door of the house. Sarah’s aunt watched as she began to run down the road. “Uneasy and alarmed at such an unusual and astonishing pedestrian feat” the aunt woke up Sarah’s cousins to retrieve the somnambulist fugitive. The girl returned of her own accord, stating that she had been “nowhere,” but reported in the morning that she had dreamed that “two men came to the house to kill her aunt and herself” which frightened her so that she ran to the nearby school house for help.⁶¹³ An article published in 1823 in Taunton, Massachusetts, warned of the “singular and dangerous habit of sleep-walking.” The author of the article recounted two events in which the sleepwalkers found themselves in peril. Calling the case extraordinary, the article

⁶¹¹ “Appalling Result of Somnambulism – A Father Walks Into The River with a Child,” *Albany Evening Journal*, (Albany, NY), November 5, 1858, 2.

⁶¹² “Curious Case of Somnambulism.” *New-Hampshire Patriot*, (Concord, NH), September 14, 1829, 4.

⁶¹³ “Somnambulism – a Young Lady Runs Half a Mile in Her Sleep.” *The Ohio State Journal*, (Columbus, OH), November 8, 1859, 1.

described a young man who dangled from a third story window in his sleep, supporting himself with his hands only. He was fortunate to survive his exploit uninjured. Another case from Warwick, Massachusetts, revealed the story of a farmhand, climbing a brick wall in his sleep and traversing the whole of it to rouse the cows in preparation for milking.⁶¹⁴ While these harmless night escapades posed a danger to disobedient bodies, there were, in some cases, real situations where a somnambulist was maimed or killed. It most certainly met the criteria for accidental death and unnecessary loss of life.

Seeing Things

How dangerous was Rider? People marveled at her abilities. They were amused by her superficially non-threatening parlor games. What was it about her that shook Belden and Woodward to such an extent that they felt it prudent to house her with some of the most dangerous and volatile residents of the state of Massachusetts? She began asserting agency outside of the realm of her assigned domestic chores through her somnambulism. She was able to elevate her status within the household from servant to guest. At first, she was peculiar. Then she could see things other people could not. The kind of authority that Rider was able to derive – whether conscious or not – from her clairvoyant abilities was enough to justify “curing” her by drastic measures. Rider’s powers were also allocated to her vision. Unlike Baker who spoke, and spoke forcefully, Rider epitomized the moment in the history of female somnambulism when women started to become passive. Rider was still a force to be reckoned with. Her ability to captivate an audience and be heard as a woman had been reduced from assertive to passive. While Baker and the entranced women before her had told people the content of her visions, Rider merely reported what was presented before her. When she did speak, she recited songs and poems that were not of her own creation.

⁶¹⁴ “Somnambulism.” *Rhode-Island American*, (Providence, RI), August 19, 1823, 3.

In his analysis of the case, Belden stressed the factor that distinguished this case from every case of somnambulism he was able to find was “the extraordinary power of vision.” Belden was vehement: “I say extraordinary power of vision; for I believe, darkness and bandages notwithstanding, that when Jane read, wrote &c. she actually saw; and that perception was not communicated in a mysterious way of which we can form no idea.”⁶¹⁵ Her powers were not caused by mesmeric influence. Belden found it distasteful and told his audience “I am satisfied that all the facts in the case under consideration admit of a solution on less questionable principles.”⁶¹⁶ The staid Dr. Belden was familiar with the claims being made by somnambulist clairvoyans: “in the records of animal magnetism,” he wrote, “it is true, we read of persons acquiring a knowledge of external things by means which have no connexion with the senses.”⁶¹⁷ Curious pundits who had familiarized themselves with the Springfield Somnambulist sought out Belden to “ascertain some facts relative to her vision” to “satisfy” themselves on their conviction that she was a mesmeric subject.⁶¹⁸ Belden and Woodward would not suffer the incredulous believers in animal magnetism.

When Rider was experiencing a somnambulist paroxysm, her eyes were typically closed. Occasionally they would be opened very wide, with dilated pupils. The mechanical state of the eye seemed to have no bearing on her “power of seeing.”⁶¹⁹ Rider was so sensitive to light that she wore bandages over her eyes during her daytime paroxysms. Belden ran tests on the sensibility of her eye by reflecting lamp light off of a small concave mirror onto her closed

⁶¹⁵ Belden, *An Account*, 97-98.

⁶¹⁶ Belden, *An Account*, 98.

⁶¹⁷ Belden, *An Account*, 98.

⁶¹⁸ Belden, *An Account*, 98.

⁶¹⁹ Belden, *An Account*, 44.

eyelid. It resulted in a shock like that “produced by an electric battery, followed by the exclamation, ‘why do you wish to shoot me in the eyes?’” Belden repeated this experiment several times with the same result. When Rider was awake, the refraction of light onto her eyelid caused no pain.⁶²⁰

Jane Rider could see in the dark and with her eyes closed. According to the Stebbins family, she “never betrayed any thing like hesitancy or indecision: there was no groping, no feeling after the object which she wished to lay hold of. Instead, her motions were “quick and direct” and she displayed an awareness of obstacles placed in the path of the objects she was reaching for. Belden did not quite approve of this eyewitness evidence. He required different kinds of tests.⁶²¹ Though Rider’s paroxysms had started much earlier, the first “direct trial” of her powers was made on November 10th, almost a month before her commitment to Worcester. Belden decided that it would be enlightening to see if Rider could read with her eyes closed. She was presented with cards, “some of which were written with a pencil, and so obscurely, that in a faint light, no trace could be discerned by common eyes.” Rider had uncommon eyes, however, and could read many things, much to the delight of her public, such as the dates on coins whose carvings were “nearly obliterated,” and a motto on the seal of a letter.⁶²²

Experiments on Rider’s vision went on for at least the next ten days. On November 11th “probably more than a hundred people” visited her. Her paroxysm had been going on for almost forty-eight hours.⁶²³ Her experimenters presented her with a variety of cards, asked her to write short sentences, and to tell the time from their watches. To reassure the credulous public of the

⁶²⁰ Belden, *An Account*, 45.

⁶²¹ Belden, *An Account*, 52-53.

⁶²² Belden, *An Account*, 54.

⁶²³ Belden, *An Account*, 55.

authenticity of Rider's power, and, for "greater security" a "second handkerchief was sometimes placed below the one which she wore constantly over her eyes, but apparently without causing any obstruction to the vision."⁶²⁴ For her audience, Rider read and sang. Of note were "Auld Lang Syne" and "Bruce's Address to his Army"⁶²⁵ On November 20th, Belden upped the stakes of his experiment, taking a "black silk handkerchief," stuffed it with cotton batting, and filled her eye cavities with the cotton batting. In front of another eager audience, Rider again performed the extraordinary feat of reading what they wrote on cards, sometimes seeing right through the card to the writing. An astonished Belden wrote, "I do not know that she ever read cards which she had never seen, when only the back was presented to her."⁶²⁶

With thickly bandaged eyes, Rider obliged every request to demonstrate her perceptive powers. She told the time on a watch with its case closed. She identified colors. She read "Thanatopsis" by William Cullens Bryant. She was asked to write passages from poems she was in the habit of reciting while in paroxysms, correcting her spelling errors along the way. Belden even tested race on his subject. Though the circumstances of her interest are unknown, "a colored girl came in and seated herself before her [Jane]." Rider was asked if "she knew that lady; she smile and returned no answer. An audience member said of the black girl, "she has a beautiful complexion, has she not?" Rider agreed, saying "I should think she was somewhat tanned."⁶²⁷ After some time in the hospital, Rider lost her "acuteness of vision" and was able to

⁶²⁴ Belden, *An Account*, 55.

⁶²⁵ Belden, *An Account*, 55. "Bruce's Address to his Army" is actually the poem, "Bannockburn," by Robert Burns, written in 1793.

⁶²⁶ Belden, *An Account*, 56.

⁶²⁷ Belden, *An Account*, 60-61.

go outside in the daylight without a bandage.⁶²⁸ She continued however to read and win at backgammon during her somnambulistic paroxysms, though she failed utterly at the game when awake. When she showed a marked improvement by February, Woodward's final diagnosis was that of the phrenological school: she had "a morbid manifestation of the faculty of time and tune, so that she could sing accurately and agreeably, although she can do neither in her ordinary state of health."⁶²⁹

Belden and Woodward were unsatisfied with allowing Rider to reserve her power of vision. They desired a medical explanation. To them, the eye was "simply an optical instrument" and image formation was "purely physical." Just as Rider's assertion of her individual identity before the members of her community was passive, so was her eye. Belden claimed the "eye is entirely passive" in the act of vision. He drew on the example of the night vision of quadrupeds and birds, also drawing a comparison of the young woman to animals. Her powers were not those of artistic achievement or political clout: she was no differently constructed than a common bat. Belden proposed that Rider's pupils were probably extraordinarily dilated, or she had an oversensitive retina, which allowed her to be clairvoyant in the various dark rooms of her somnambulism. He went so far as to compare her to the recently discovered feral boy, Caspar Hauser, who also demonstrated heightened vision after his capture.⁶³⁰ Belden argued that there was "abundant evidence that this increased sensibility of the retina existed in Jane, and that during the paroxysm it was augmented to a very great degree." If she was possessed of anything, it was extraordinarily passive eyes.⁶³¹

⁶²⁸ Belden, *An Account*, 82.

⁶²⁹ Belden, *An Account*, 88, 91.

⁶³⁰ Belden, *An Account*, 100-103.

⁶³¹ Belden, *An Account*, 104-105.

Passive orbs, however, could not explain Rider's ability to see through opaque substances. Belden contemplated the passage of small amounts of light through his fortress of blindfolds, but ultimately denied the plausibility. His conclusion was that there must have been a change in the brain itself. The only suitable explanation for her clairvoyance was the presence of "an excited state of the organ, in consequence of which perception, so far, at least, as relates to this order of impressions, is effected more readily than usual."⁶³² Phrenology provided Belden with answers to suit his desired outcome. He agreed with Woodward's assertions that Rider's organs of time and tune were discordant. He even suggested that her organ of color was maligned. The sum total of her powers could be reduced to two causes beyond her control: "the increased sensibility of her retina" and a "high degree of excitement in the brain" which allowed her to perceive "even a confused image" of the objects presented to her.⁶³³ Rider's somnambulism, likewise, was attributed to the sympathetic connection between the digestive organs and the brain. Her poor eating habits had been duly noted. Belden tittered "we all know that a full meal is not favorable to intense mental application, and the sick headach has undoubtedly furnished many of us with abundant and painful evidence of the sympathy between the head and stomach."⁶³⁴

In the afterlife of Jane C. Rider, not all medical authorities and curious parties were searching for dismissal of the inexplicable powers of a young woman. Thomas Cogswell Upham, professor of mental and moral philosophy at Bowdoin College in Maine, wrote "there are a few cases (the recent instance of Jane Rider in this country is one) where persons, in the condition of

⁶³² Belden, *An Account*, 107-108.

⁶³³ Belden, *An Account*, 109-110.

⁶³⁴ Belden, *An Account*, 113.

somnambulism, have not only possessed slight visual power, but perceptions of sight increased much above the common degree.”⁶³⁵ Upham, as late as 1840, lamented that “of extraordinary cases of this kind, it would seem that no satisfactory explanation (at least no explanation of which is unattended with difficulties has as yet been given).”⁶³⁶ The spiritualist pioneer, Phineas Parkhurst Quimby agreed with Upham’s assessment of Jane’s abilities, quoting both Upham and sharing his own thoughts. “Philosophers have confessed their inability to explain satisfactorily these strange phenomena,” Quimby wrote, “and then, by undertaking to show in what possible manner it might all happen, mystify what was before mysterious.” Philosophers were not the source of knowledge for the spiritualists who appropriated Rider’s case for their own cause. Quimby certainly did not rely on philosophy for knowledge: “we do not learn from them how it is possible for one to see at all under any circumstances, without the bodily organ of sight; and much less have they proved to us the power of seeing without eyes and in Egyptian darkness.” However oblique “Egyptian darkness” might have been, Rider found sympathizers in the 1840s and beyond, mostly in the spiritualist movement. If they were not conversing with the afterlife, her post-somnambulistic supporters were sincere animal magnetizers, who interestingly did not retroactively re-interpret Rider’s case as one of artificial somnambulism.⁶³⁷

Belden and Woodward took Jane Rider’s case as an opportunity to advance their shared idea that the mind and body “both repose together” – that their connection was intimate,

⁶³⁵ Thomas Cogswell Upham, *Outlines of Imperfect and Disordered Mental Action* (New York: Harper & Brothers, 1840), 189.

⁶³⁶ Upham, *Outlines*, 190.

⁶³⁷ Phineas Parkhurst Quimby, *The Complete Collected Works of Dr. Phineas Parkhurst Quimby*. (Seed of Life Publishing, 2009), 15-22. For animal magnetizers who took up Jane’s case as support for their own ideas, see William Alexander Hammond, *Spiritualism and Allied Causes* (New York: G.P. Putnam’s Sons, 1876), 18, 190-191, and William Douwes Zoethout, *First Lines of Physiology; Designed for the Use of Students of Medicine by Daniel Oliver, M.D. LL.D, A.A.S.* 2nd ed. (Philadelphia: Published by Herman Hooker, 1840), 495-501.

undeniable, and that one could not suffer the “phenomena of disease” without the other becoming its companion.⁶³⁸ Second sight and double consciousness were still bedfellows in both the natural and artificial practices of somnambulism. The phrenological explanation of sympathetic organs was particularly popular. Rider’s sick body was vector for her sick mind, made sicker still by the theft of her physical freedom and her own agency in demonstrating knowledge beyond her station in life as a woman and a middle class domestic. As Woodward satisfactorily noted at the end of his case notes on Jane Rider, medical intervention and internment in an asylum had made her “quite a civil, well bred somnambulist.”⁶³⁹

⁶³⁸ Belden, *An Account*, 115.

⁶³⁹ Belden, *An Account*, 90.

CONCLUSION: THE SLEEP-WAKER'S DEATH

In 1836, Miss Cynthia Gleason of Pawtucket, Rhode Island, “formed the resolution” of “joining” with Charles Poyen “for a certain length of time, only with the hope of recovering entirely her health, by magnetism, and with the view of assisting [him] in establishing an important truth.” Gleason’s motives were not only a “heartfelt gratitude towards” Poyen and “science” but also the payment of her room and board. Poyen furnished “her with the means of satisfying the strict necessities of life” in exchange for allowing a magnetic union.⁶⁴⁰ The doctor paid the patient for the pleasure of her cure. Gleason was using her power as a female patient to meet her needs as an unmarried woman. Unlike Baker, Rider, or Reynolds, Gleason traded the agency she had over her own mind for security. Poyen needed her cooperation to show crowds in Boston the wondrous effects of animal magnetism. He needed her sick stomach and clairvoyance to win popular approval for an art viewed with much disdain.

Gleason accompanied Poyen on his tour of New England, allowing him to put her into a state of somnambulism. From her trance, she would be given an object belonging to a sick patient and from that object, was able to diagnose their ailment. Poyen gleefully wrote: “the results of these experiments have been almost invariably successful, and sometimes perfectly astonishing.” Gleason was evidently particularly deft at diagnosing illness by touching cuttings of hair.⁶⁴¹ Just two years after Jane Rider quietly disappeared from her public life as a parlor room clairvoyant somnambulist, Charles Poyen had arrived in the United States and recruited a willing subject, prone to induced somnambulism, whom he could use as a diagnostic instrument to produce his own embodied knowledge. Both Poyen and Gleason got something out of their bargain. Poyen had a pliant woman somnambulist who could read hair and diagnose disease

⁶⁴⁰ Poyen, *Animal Magnetism*, 118.

⁶⁴¹ Poyen, *Animal Magnetism*, 152-153.

from a trance state: he also had total control over the trance state, and therefore authority over the legitimacy of the diagnosis. Gleason, in her complicity, was given the opportunity to exercise medical authority over countless people who approached Poyen for assistance. What she had to sacrifice was her autonomy. She followed Poyen's orders.

Using the example of another woman he successful magnetized, Poyen explained what constituted a successful somnambulist. The magnetized somnambulist should be able to "hear perfectly well," answer questions in "monosyllables, in a low voice," hear only the magnetizer, and experience insensibility of the external senses. One woman remained "insensible to the severest trial exercised upon her; such as pinching her feet and hands, puncturing her skin with a pin, blowing the smoke of tobacco into her nose, burning bits of candle-paper under her nose, speaking loud to her, clapping our hands before her ear, [and] shaking her arms and legs." Upon waking, the somnambulist had no memory of the tiny tortures done to her during her magnetic sleep.⁶⁴² Rider had exercised resistance when placed in medical custody at the Worcester Asylum. She used food as a weapon and managed her own somnambulism. Rachel Baker and Mary Reynolds were similarly free from this dark compliance that came with animal magnetism.

Thanks to the bargains that could be made with women for protection, room and board, and the chance to travel – or perhaps to practice a forbidden profession – animal magnetizers took away the uniqueness and liberty that natural somnambulism had offered women who wished to speak and act outside of their designated social rank and place. Any male magnetizer could offer payment in exchange for manipulating a subject into somnambulism. What was once a relatively rare and curious experience, and the subject of a decades long professional contest to produce knowledge from the somnambulist body, was now a mechanized process that could be learned from a lecture or a book. The meaning of somnambulism was shifting from inward

⁶⁴² Poyen, *Animal Magnetism*, 65-66.

revelations about the workings of the human will to an outward, superficial parlor trick. Poyen was not a professional. He may have been an expert in the art of animal magnetism, but he was not claiming to have any authority over imputing meaning to the design of the human mind. He was only claiming to have the authority to manipulate it.

From the 1740s to the 1830s states of suspended animation – trance and somnambulism in particular – had drawn the attention of the clergy, physicians, lawmakers, and the American public. Whoever could explain the absence of a person’s soul while their body continued to function without it, would be rewarded with authority over one of the most confounding mysteries of human existence. If a minister could interpret a liminal state convincingly, he could assure his congregation of the truth of his congress with God and ensure the longevity of his appointment. Likewise, if a doctor could solve the question of volition by providing material proof that the faculties of mind, did, in fact, exist, he would gain not only credibility in the medical world, but special attribution as the man who was able to use God’s finest creation, the human body, to reveal the innermost workings of His plan. Members of the legal profession stood to establish and manage the social order by using somnambulism as justification for rules of conduct pertaining to intent, willfulness, and obligations between people. For a short time, each burgeoning profession saw somnambulism as the empirical opportunity to produce the embodied knowledge that would allow them to build the framework for how people ought to govern each other and themselves.

Somnambulism proved to be unclassifiable as either a legitimate mental disease or a defect of the will. It was described extensively and in great detail, but the knowledge claims that were made on the topic were unconvincing and lacked reproducible evidence. No profession could explain what caused somnambulism and why it afflicted some people but not others. The

prodigal daughters who featured so prominently in the investigations into the strange condition were the decisive actors in preventing any one profession from asserting that its members had gained authority over the workings of nature through the embodied knowledge they were able to extract from somnambulistic subjects. For nearly a century female agency was the one consistent point of resistance that prevented male professionals in positions of power from staking a permanent hold on the knowledge they had gathered from the actions of their congregants, patients, and clients.

Female somnambulists violated social norms, crossed boundaries of appropriate conduct, and spoke their minds freely. As somnambulists and possessors of dual consciousness, they had no volition and no memory. They could not be held accountable for things they could not have imagined doing. While we cannot be certain as to the motives of Rachel Baker, Mary Reynolds, and Jane C. Rider, the impact of their resistance is undeniable. It is an irony of history that their individual agency was at its most forceful when they were perceived as having none. Their somnambulism invited inquiry but also blocked any external tampering with their actions or words. It was noted time and again that no external objects or sensations could be made to rouse the somnambulist from his or her determined course of action. This proved to be the variable that undid efforts to command the mind through somnambulism. The behavior of these sleeping walking women was provoking, abnormal, shocking and profoundly interesting to the public. As long as male authorities representing a respected profession were present to interpret the somnambulism for its audiences, the women could be physically contained. Their voices however could not be silenced without drawing unwanted criticism of medical, moral, or civil treatment of the apparently helpless. Assertions of selfhood – of identity – of what Baker or Reynolds or Jane thought and did were more powerful and more credible than scientific

theorization about the motives behind their actions. Physicians, in fact, were eager to emphasize their lack of agency to dampen the strength of their patients' demands to be seen and heard.

Multi-professional attempts to extract a lasting and somatically defined knowledge of somnambulism – and therefore, of the machinery of the mind – resulted in failure. On the reverse side of this contest to assert authoritative domain over the practice of both embodied knowledge and governance of the mind is the success of at least three women whose stories have been preserved. Their fight to retain agency over themselves, even if it meant forfeiting recognition of their biological mental agency, is nothing short of bare-knuckled. While two of the three women were forced into medical treatment, Mary Reynolds was able to evade her doctors and ministers, and even her lawyer brother, to live her life as she saw fit and live happily to tell her own story. The posthumous history of the publication of men's interpretations of her autobiography and the diagnostic conclusions they drew from her experience frame how we ought to look back at Belden's memoirs of Jane Rider or Mitchill's devotional text about Rachel Baker. When these women were no longer a physical affront to male professional authority, the patriarchs of knowledge production carried on their task through disseminating the written word, revising women's accounts where they felt it would strengthen their own claims.

Somnambulists did not disappear in 1834. The legal profession gained custody – but not authority – over the condition and its sufferers by default. Medicine retained a stake, simply because somnambulism is a non-normative condition with an explanation that we have yet to uncover. Animal magnetism, with its unsavory byproduct, artificial somnambulism, was easy to access and became popular quickly, a circumstance which soured professional aspirations to claim somnambulism as a legitimate, embodied explanatory device to demonstrate mind. In the United States, animal magnetism never achieved the scientific credibility it had attained in

Europe. It retained its reputation of inauthenticity and long outlasted the vogue for animal vitality, becoming a sideshow to the immeasurably more tantalizing experiment of anesthesia (and reproducible suspended animation). If the medical profession's interlude with somnambulism was a concentrated historical moment in the history of the medicalization of wonder, then it had passed by 1840.⁶⁴³

In 1845, the sleepwalking defense was used again in the trial of Alfred J. Tirrell. Tirrell was accused of murdering a prostitute, who was also his mistress, Maria Bickford, by cutting her throat with a straight razor in a boarding house, and then burning her body. He was acquitted.⁶⁴⁴ The Tirrell case was legally insignificant, but satisfied the antebellum lust for sensationalist stories about lurid deeds. By 1845, the urban world was growing exponentially and crime was growing alongside it. Works of fiction now depicted male somnambulists meeting bad ends with the assistance of animal magnetism, rather than creating morally ambiguous protagonists fighting for eminent domain of the frontier. Fictional stories that interpreted the cultural significance of artificial somnambulism provide insight into how society had embraced this new means of accessing the unconscious mind. One need look no further than Edgar Allen Poe whose short story, "The Facts in the Case of M. Valdemar," (1845) delights in horrifying the reader with the demise of an oracular corpse. Poe's perverse narrator holds a fond wish to be the first to mesmerize a person "in *articulo mortis*." The narrator's friend M. Valdemar, nearing death, offered to be mesmerized just before passing in order to cheat fate and perhaps prolong a journey to an afterlife that was much more ambiguous than it had been in the eighteenth century. Having

⁶⁴³ Analogous to this idea of somnambulism as a subject of medicalization of wonder is Brumberg's *Fasting Girls*. The notion that seemingly supernatural behaviors defying known human limitations could be explained with medical knowledge appears as a theme in other works and would make a very interesting broad historical study.

⁶⁴⁴ Cohen, *Pillars of Salt*, 195-247.

successfully mesmerized M. Valdemar, the narrator attempted to elicit a response from the dying somnambulist:

“While I spoke, there came a marked change over the countenance of the sleep-waker. The eyes rolled themselves slowly open, the pupils disappearing upwardly; the skin generally assumed a cadaverous hue, resembling not so much parchment as white paper; and the circular hectic spots, which, hitherto, had been strongly defined in the center of each cheek, *went out* at once.”⁶⁴⁵

With all signs of vitality vanquished, the narrator and his companions concluded that their experiment had failed and M. Valdemar was dead. At this point, M. Valdemar’s tongue began to vibrate and “there issued from the distended and motionless jaws, a voice.” With a great deal of compunction, the narrator asked M. Valdemar if he remembered sleeping. His query was answered: ““Yes; – no; – *I have been* sleeping – and now – now – *I am dead.*”” Animal magnetism had failed. M. Valdemar “had no longer sufficient volition” to participate in the necro-magnetism. In an attempt to save the literal oracular corpse, the narrator attempted to put everyone in the room in “mesmeric *rapport* with him.” Death by sympathy was a risk that only Poe might imagine so vividly. With the “sleep-waker’s” death having been halted by mesmerism, at least partially, M. Valdemar’s friends left him in stasis for approximately seven months before attempting to reviving him from the “mesmeric trance.” The unfortunate M. Valdemar responded with a sickening plea to either be put to sleep or woken up for he was still dead. The dead Valdemar’s will was stronger than that of the living one. As the narrator began to “rapidly make mesmeric passes,” the talking corpse shouted “dead! dead!” and then rotted away into a pile of putrescence.⁶⁴⁶

⁶⁴⁵ Edgar Allen Poe, “The Facts in the Case of M. Valdemar” *The Works of the Late Edgar Allan Poe* (New York: Bedford, 1857).

⁶⁴⁶ Poe, “The Facts in the Case,” 128-130.

Perhaps Poe wrote it best. By 1845, the mysterious and grotesque figure of the oracular corpse was “dead! dead!” to all but the readers of gory horror stories. Most of the time, animal magnetizers reported success in resuscitating their subjects from somnambulism. It was around this mid-century mark, however, that professionalism became truly entrenched in American labor and the conflicts over knowledge claims intensified. As I have recounted, the more famous somnambulists were repurposed within the new field of psychiatry to explain discrete mental conditions that psychiatrists hoped to prove were somatic, and therefore, timeless. The somnambulists from psychiatrists’ near pasts could be used to help them prove that certain states of mind had been materially and socially real all along.

As lines of expertise were demarcated with the clustering of professionals within once broader fields of practice, the law retained the most applicable level of authority over the act of somnambulism. As insanity defenses were successful and became rule of law, the alliance between the lack of intent in somnambulism and insanity was evident. While counsel and physician alike in *Prescott* had been unable to articulate why this was so, this did not preclude the similarity from persisting or from fitting into a legal framework. The legal profession after *M’Naughten* did not make any new claims about being able to explain the neurological or supernatural dysfunction which caused somnambulism, but it did have the higher ground in dispensing consequences to somnambulists and creating a system of rules to govern how individuals lacking intent ought to be classified, reprimanded, or medically treated. It was possible to regulate behavior with a code, but not possible to truly comprehend it, predict it, or prevent it from happening by rule alone. Legal custody of the condition was just that – a guardianship. Physicians were able to treat natural somnambulism as they always had – symptomatically. Germ theory did not contribute to any new understandings of where it came

from. Further sub-specializations of medical knowledge did not shed any light on the first causes of sleep disorder. That remains mostly true today.

After 1840 somnambulism becomes a different kind of story. Suspended animation and somnambulism were disconnected by the interventions of legal governance over intent-related conduct in society. The precise functioning of suspended animation continued to fascinate physiologists and biologists, eventually becoming a twentieth-century hope for prolonging life through cryogenic freezing and sustaining vitality on lifetime voyages through the twenty-first century afterlife: the universe. Somnambulism remained remarkably unchanged. Sleepwalkers continued to do things during their sleep that they could not remember. They were, and are, sometimes defendants in criminal cases that have again fought to bright line culpability, especially with the later twentieth century influx of questionable drugs with somnambulistic side effects, such as certain sleeping pills, into the consuming market.

In the latter half of the nineteenth century, somnambulism remained an ill defined, but paradoxically circumscribed type of conduct. The unconscious mind was still a target for professionals seeking to impose authority on instances of embodied knowledge. The contests over who had the right to explain the unconscious and its productions continued, much along the same professional lines as presented in this dissertation. The history of the psychiatric sciences, especially in France, which fixed their gaze on hysteria and its moderating tool, hypnosis, relied to an extent on an established history of using the body to gain entrance to the inaccessible mind. Some of that history is captured in narratives about somnambulists. Perhaps because medicine has not been able to quantify or produce the soul, religious authority has maintained its ancient and mysterious hold on human hopes by professing that the deity possess all knowledge of the meaning and origin of the soul – that this knowledge is attainable through experiments on

divinely designed nature. Darwin's Victorian revelation of evolution did not discount the possibility of an untraceable soul, especially one that was capable of wandering from the body. The Spiritualist movement has a history that includes animal magnetism and the much longer history of trance, but there is no substantive room in the body of literature pertaining to Spiritualism for somnambulistic interventions. To carry somnambulism as it was in 1811, 1817, and 1833, and as it is today to its historical conclusion, where a professional authority wins jurisdiction over the body as an instrument and site for producing knowledge of non-material forces, is to look to a legal history with a continued medical history subsumed in it. By studying the history of somnambulism we gain access to the lives of women who were negotiating with authorities in their own lives and we see what the rational actor lacking volition represented in early nineteenth century American society. Somnambulism is a historically embedded condition that reveals a wider history of the emergence of professions struggling with one another to gain authority over the right to interpret embodied knowledge. Somnambulists were the representatives of the phenomenon of suspended animation that eluded expert-based explanation and have, to a certain extent, remained that way.

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