

The Contradictions of Colonial Dependency: Jack London, Leprosy, and Hawaiian Annexation

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In Jack London's 1908-1909 writings on the impacts of Hansen's disease in Hawai'i, representations of dependency are central to his contradicting statements on the necessity of enforced quarantine in the colonial setting. Drawing upon Albert Memmi's theorization of dependency at the scales of the body and the nation, the essay identifies opposed vertical and horizontal forms of dependency within London's writing as central to a gendered and sexualized primitive/modern binary that structures his representations of race and empire in Asia and the Pacific.

Introduction

In her manifesto, "The Master's Tools Will Never Dismantle the Master's House," Audre Lorde argues for the development of interdependencies among women across lines of race, class, and sexuality: "Difference must not be merely tolerated, but seen as a fund of necessary polarities between which our creativity can spark like a dialectic. Only then does the necessity for interdependency become unthreatening" (2496). For Lorde, the failure of some white U.S. feminists of the 1970s to interrogate the structures of colonialism, racism, and heterosexism within their critiques of patriarchy presents an obstacle to the development of a feminist community that would radically challenge repressive gender roles and capitalist notions of value that buttress them. Her utopian invocation of interdependence—within a work focused largely on differences and power relations between women—presents a challenge to liberal notions of women's independence that structured many of the contemporaneous demands for gender equality. Her invocation of an "interdependency of different strengths," then, points to interdependency as a politically useful tool against the liberal capitalist alignment of individualism and freedom. For Lorde, freedom is instead an active, subjective orientation toward and with others: "Interdependency between women is the way to a freedom which allows the *I* to *be*, not in order to be used, but in order to be creative. This is a difference between the passive *be* and the active *being*."

Although such optimistic visions of interdependency can at times idealize relationships between essentially independent subjects, or worse, obscure internal power relations or deeper dependencies², they may also reflect the significant ways in which dependency structures politics and subjective identities. Following Lorde, I argue that critical social theory can benefit from recognition of both the violences and utopian possibilities of dependency and interdependence. Dependencies are central sites of power within modern biopolitical projects that, to paraphrase Foucault, legislate life through normalizing and differentializing processes. What I will call *horizontal dependency* or *interdependence* is a form of dependency in which a shared identity based on disability, race, class, gender, sexuality, nation, or species allows the formation of intersubjective bonds necessary for physical, social, economic, or psychological survival. It is distinguished from *vertical dependency*, which sustains the dependent party through a hierarchical relationship with a provider who is relatively privileged (socially, economically, politically, etc.).³ This strategic opposition allows for the conception of resistances within both dependency and dominance relations—resistances that are vital to understanding the politics of

liberal individualism since the invention of the normative laboring body under late nineteenth century industrial imperialism.⁴

There are numerous contemporary examples of the ways in which dependency relations entail a profit for the member of the relationship who plays the provider role. Medical tech companies need ill and disabled patients, colonizers benefit from colonial subjects, and caregivers for the disabled gain a sense of identity from their labor. Yet the dependent who survives in the context of such a vertical dependency may also be invaluable to the provider and gain positions of agency. Keith Wailoo writes of such forms of agency in the context of new medical diagnostic technologies (235). Michael Davidson identifies class- and disability-based relations of “mutual aid” that work against the vertical dependencies of neoliberalism in his reading of Jibril Mambety’s film *La petite vendeuse de soleil* (“The Little Girl Who Sold The Sun”) (123). The wide range of illness and disability activism—centered around diseases including AIDS and hemophilia, as well as around disabilities related to hearing, mobility, and mental difference—have transformed treatments and the design of social space. Here horizontal dependency (patient/disability communities) operates both within and against vertical dependency (industry/patient relations and state accommodation). Finally, if we consider the scale of dependency addressed in political-economic dependency theory, we might see the Nonaligned Movement, anti-corporate globalization movement, and immigrant rights campaigns as interdependencies that result from and challenge the vertical dependencies of neocolonial and neoliberal power. Thus *independence movement* may be a misnomer—the ideal of decolonization can instead be seen as struggle to transform dependency upon a colonizing power into interdependencies among the colonized class.

Interdependence can be summoned both against and within the violence of vertical dependency. The fact that new forms of interdependence can form in moments at which entire classes of people are disabled and rendered dependent demonstrates that dependency relations can produce unexpected resistances. I build here on postcolonial theorists such as Frantz Fanon, Homi Bhabha, Jacques Derrida, and others who argue that colonial mimicry stages a form of protest against colonial power. Although it would be dangerous to see all forms of colonial mimicry as homogeneous, such mimicry can be the symptom of a dependency produced when colonial symbolic and economic orders displace preexisting social relations, and when second-order interdependencies form to challenge the subjection of the colonized—both within and against colonial power.

Both types of dependency that I describe—the vertical and the horizontal—constitute reciprocal dependencies. In his study of the topic, *Dependence*, Albert Memmi conceives of dependency as a dual need between dependent and provider; he defines it as a system of exchange (66). Yet Memmi often theorizes dependency from the perspective of the dependent, seeing it as a “trinitarian relationship” of three parties: the dependent, the object on which the dependent depends, and the provider of the object (17). If we assume along with Memmi in his more careful moments that the relation is generally a reciprocal one—that providing entails a profit—then there is a fourth term at play in the sketch of dependency. Like the dependent, the provider will also obtain an object—identity, prestige, money, pleasure, etc.—through his or her act of labor. Acknowledging a fourth object—the object that returns to the provider—is key to understanding the relations between dominance and dependency that I outline here in the contexts of disability and U.S. empire.

At three points in his study, Memmi does directly acknowledge that “there is in almost every dependency, even if it is apparently parasitic, some sort of symbiotic relationship” (66). He first identifies a “reciprocal dependency” in his portrait of the dependent (33). In this situation, it is impossible to identify one member of the relationship as provider and another as dependent; both members give and receive. Memmi offers the example of the relationship between a horse and rider: the horse requires the care of the rider to survive, while the rider is vulnerable to attack without the horse. Next, Memmi describes reciprocal dependency in his portrayal of the provider. He identifies a “symbiotic dependency” that is opposed to a “parasitic” one (65). The example here is childrearing, which Memmi claims is based on the assumption that the child will provide for the parent later in life. Finally, in his examination of

the politics of dependency, Memmi explains neocolonial economic relationships as relations of “reciprocal need.” Here dependency is seen as “the expression of the permanent reciprocity that, because of their needs, exists between most of the members of a group: dependency of the weak on the strong, but also of the strong on the weak...” (154).

Memmi thus describes a dependency that ultimately provides something for a provider. Yet what is missing from Memmi’s account—and which Memmi consciously avoids as he theorizes dependency independently of dominance—is an analysis of the ways in which dependency complicates seemingly straightforward power relationships. In Foucauldian terms, dependency structures the productivity of power—the way in which power can simultaneously repress the subject and produce resistance to power at the site of subjection. I see the points at which dependency relationships forge identities as sites where dominance may be identified and contested. Read in this light, Memmi’s work attempts to redefine hegemony as a dependency relation in post-WWII imperialisms. Memmi uses the Cold War contexts of U.S. and Russian empire as his example: “The best way to dominate someone is not to rely on your own strength but to make the person you want to dominate dependent. Because they have understood this principle, Americans and... Russians have been able to take up where French and English colonialists have left off” (154). Unfortunately, he sets aside this analysis of dependency as a tool of imperial hegemony simply to declare that postcolonial dependencies are based on reciprocal need. Analyzing dependency independently of dominance can erase the violence of the naturalization and expansion of dependency through racial, colonial, gendered, and ableist ideologies. Yet Memmi’s work does open the door for analyzing how dominance and dependency are intertwined in the context of imperialism.

At the crossroads of culture, embodiment, and political economy, dependency relations form a field through which key categories of difference including disability, race, gender, sexuality, nation, class, and species are produced through and in relation to each other. Under the ideologies of liberalism and neoliberalism, individuals and groups are culturally marked in terms of complex relations to the ideal of independence and the diverse realities of dependency relationships. Although dependency relations take drastically different forms as cultural, political-economic, and state formations vary, they are a central site through which liberalisms conceive of subjectivity and political agency.

I will focus in this essay on the ways in which colonial public health at the turn of the twentieth century conceived of colonized bodies as dependent bodies. In particular, I will analyze representations of the institutional dependencies that structured the primitive/modern binary as the U.S. and Europe established health policies in their Asian and Pacific colonies. In the wake of panics over venereal disease, leprosy, and plague as new shipping technologies and colonial trade increased transnational contact, colonial powers and their allies criminalized diseases in India, the Philippines, Hawai‘i, and other important possessions. They developed quarantines—modern colonies-within-colonies in which to segregate, study, and treat people with disease—for persons diagnosed with “leprosy” (Hansen’s disease). In the case of U.S. and U.S. client government attempts to regulate leprosy in the Pacific, stigmatization, medicalization, and incarceration of primarily native Hawaiian, Japanese, and Chinese patients became socially disabling methods of subjection to vertical dependency at the moment that U.S. popular culture began to represent colonized bodies as racial and sexual threats to national security.

I will use writings on leprosy after the Spanish-American War to show how U.S. imperial discourse described colonized bodies in terms of a temporal progression from horizontal to vertical dependency—a progression that figured disability and disease as central to its racial politics. In such a context, Eva Feder Kittay gives a critical reminder that “cultural dimensions as well as physiological constraints determine what counts as young, as ill, as disabled, and as frail enough to be thought dependent” (29); the ways in which colonial public health institutions represented the human objects of health reform had everything to do with the representation of racial others as diseased, feminized, hypersexual primitives unfit for self-rule.

Jack London’s writing is a rich and contradictory example of such imperial discourse as it represents dependency both as necessary and as part of an alien modernity that threatens native

Hawaiian culture. Dependency in his writing frames the political grammar of colonial relations and allows a vision of communal resistances among the colonized; at the same time, it becomes the basis of an imperialist narrative gaze upon the colonized body. I will focus on his narrative tension between horizontal and vertical dependency to shed light on the ways in which various forms of social difference—particularly race and (dis)ability—structure the politics of colonial public health administration of leprosy at the turn of the twentieth century.

Familiarizing Dependency: “The Lepers of Molokai”

I will begin with a scene of interdependence: in a place called Hamel-en-Arade (perhaps Hamel, Algeria), a traveler views from above a scene of two men inside the city’s leprosy quarantine. One, having no arms, walks supporting the other, a man with no legs, on his back. The man with no legs drops peas at intervals as the one walking stomps them into the ground.

There is no dearth of such Orientalist tales of the interdependence of the “leper”⁵ figure of the late nineteenth century. As Zachary Gussow writes, the Orientalization and primitivization of the leper figure occurs as Hansen’s disease spreads in European and U.S. colonies in Asia and the Pacific. Leprosy becomes a mark of the primitivity of the colonized subject who stands opposed to the white, male, liberal subject of modernity (Gussow). The scene above comes from Charles Warren Stoddard’s 1885 narrative of his journey to the famed Kalawao and Kalaupapa leprosy settlements on the Hawaiian island of Moloka`i (58-59). Under a 1865 law of the Hawaiian Republic, signed by King Lot Kamehameha under recommendation by U.S. and European advisors, leprosy was criminalized in Hawai`i and persons diagnosed with it were banished to a remote corner of Moloka`i. Through the early twentieth century and especially during the debates over Hawaiian annexation, the disease and the image of condemned lepers on Moloka`i became the most common representation of Hawai`i in U.S. print culture. One review ran an article titled “Shall We Annex Leprosy?”; in an article in the *North American Review*, a New York doctor predicted that Hawaiians with the disease would enter the mainland in droves after annexation to escape quarantine at Moloka`i.⁶ After annexation, the association continued: McKinley attempted to make Moloka`i the national leprosarium, and the Surgeon General’s evaluation of the proposal in 1902 sees the areas of expanding U.S. influence—“China, Hawaiian Islands, West Indies”—as the key parts of the globe that threatened national security through the spread of the disease (“Report” 8). Later, in 1916, the former head doctor at Moloka`i claimed that “an atmosphere of leprosy clings to and surrounds the unfortunate Hawaiian” (Mouritz).

In Stoddard’s travel narrative and world-historical survey of the disease, the gothic—common to representations at the time of persons with leprosy as zombies—is the main mode through which he sensationalizes Hawaiian leprosy. The scene of interdependence above, which is but one example of leprosy that he traces across North Africa, Asia, and the Pacific, operates by producing the leper figure as the monstrous other to the normative human. It accomplishes this mirroring and differentiation of the able and disabled body by symbolically dismembering the leper figure (Hansen’s disease did not actually cause limbs to fall off), and then by doubling this dismembered body to produce a simulacrum of the “complete” human. In a text that vociferously upholds the Christian duty of outsiders to “care for” Hawaiian leprosy patients, the doubling of the dismembered body is the textual site at which an American Orientalist discourse on leprosy can co-opt the often necessary interdependence of late nineteenth century leprosy patients into a spectacle reinforcing the necessity of vertical dependency on colonial public health institutions. The literary representation of the leper figure thus becomes a moment of imperial discourse preoccupied with the monstrosity and primitivity of bodily interdependence; it naturalizes the dependency of Asian and Pacific Islander bodies upon colonial medicine as a form of modern progress.

Like Stoddard, Jack London was one of the few mainland visitors granted entrance to the Moloka`i settlements. Unlike Stoddard, however, London was invited by the Board of Health expressly to defend the colony against its sensational portrayal in the media (Tayman 184-85,

197-204). He downplays the threat of the disease in his travel narrative "The Lepers of Molokai," published in the *Women's Home Companion*. In the article, London critiques what he calls "sensational" depictions of leprosy in which the mainland press focused on the horrors of the disease and the evil of its carriers. Narrating instead the pleasures of hunting and horse-racing during his visit on U.S. Independence Day, he depicts the happiness—based on the sense of community—of those at Moloka'i. He does so not simply to counter stereotypes of leprosy, but also to justify medicalization and quarantine on both social and public health grounds, invoking the Biblical association of skin disease with dirt: "That a leper is unclean... should be insisted upon; and the segregation of lepers, from what little is known of the disease, should be rigidly maintained. On the other hand, the awful horror with which the leper has been regarded in the past, and the frightful treatment he has received, have been unnecessary and cruel." The "frightful" treatment to which London refers extends at least into the medieval history of European leprosy exclusion policies, when he argues the "great" but tragic "lesson of segregation was learned." It also resonates with the early history of Moloka'i, in which exiles were simply banished to the island with virtually no resources for survival, let alone treatment.

London enters at one of several moments at which the Board of Health attempted to improve both colony conditions and its PR strategy as a means of promoting tourism and trade. The subtle argument he produces here is one that first humanizes leprosy patients by idealizing the communal relations at the colony—the "democracy of affliction and alleviation"—and second uses the humanity of the colonists as the basis for their right to medical treatment. The successful interdependence of the colonists qualifies them for a relationship of vertical dependency. The difference in this textual dynamic from Stoddard's construction is the absence of a monstrous depiction of the leprous body. Sociality in the form of competitive, masculine, upper-class leisure activities of *the colonizing culture* replaces the sensationalized scene of agricultural labor among the leprosy patients whom Stoddard describes. A proper interdependence is one that Westernizes the social relations of colony residents. London's more sympathetic vision, however, ultimately upholds the primitive/modern binary by displaying Western forms of social participation as proper interdependence. In both cases a relation of interdependence becomes the basis of justifications for vertical dependency as a way of modernizing the leper figure.

London's idealization of vertical dependency paternalistically conceives of racialized leprosy patients as objects of progressive reform. How can we explain his avowed sympathy for and sentimentalization of leprosy patients—especially Chinese and Hawaiian ones—given London and California socialism's oft-cited Anglo-Saxonist prejudice against Asia? Colleen Lye recounts the ways in which London represented the Chinese as a "yellow peril"—a despotic specter of the coming capitalist modernity—against the primitive Pacific Islander destined to be overcome by the rise of a homogenizing "Asia." The Anglo-Saxon U.S. American was caught in between these two poles of hypermodernity and primitivity in the Pacific world. According to Lye, however, once the Chinese enter the Hawaiian setting in London's writing, they are subjected to an "Edenic Polynesian effect," losing their overt villainy in the primitivized Pacific setting (36, 94, 274-98). The Hawaiian setting is distanced from London's depictions of the teeming masses of continental Asia, which, according to his essay "The Yellow Peril," provide labor power to the hyperrational production schemes of emerging Japanese empire. Furthermore, the specific setting of quarantine brings the Chinese and Hawaiian outside of the capitalist world that structures London's Pacific Rim racialism. Unlike the Chinese "coolie" (migrant laborer) figure demeaned in Asian exclusionist fiction written at the turn of the twentieth century, the Moloka'i narrative identifies the Portuguese, Hawaiians, and Chinese quarantine patients—people who remain *outside* Pacific labor markets—as proper objects of sympathy.

Unlike his socialist narratives of global revolution of the zero decade, London's text is not explicitly anti-capitalist or anti-imperialist as it narrates an interest in the socially abjected. Dependency on U.S. charity seems vital to the advancement of the medical treatment of the colonists, and proper given the controlling U.S. presence on the islands. London does, however, retain an object of racist scorn as foil to the otherwise noble colony residents. A black colony

resident who has been screened and declared disease-free becomes the focus of several paragraphs of London's narrative. Despite his supposedly clean bill of health, the man "preferred Molokai" and fought expulsion from the colony. London depicts the man's stated desire to remain at Kalaupapa as a "game" intended to ensure himself the steady flow of government resources available for colony residents—to ensure his continued parasitic *dependency* on the state while pathologically remaining outside of what London saw as the proper forms of *interdependence* at Kalaupapa. There is, of course, no examination of how racial power might influence the man's view of the colony in relation to the "outside" society. Black freedom and black dependency are both figured as threatening, and London muses at the fact that the man is ultimately deported to Honolulu. Chinese, Hawaiians, and blacks are all seen as likely dependents, but black dependency is seen as socially pathological. There is thus in London's reporting a tendency to typologize particular relationships to dependency as features of racialized groups. His writing supports stereotypes of blacks as unproductive, unruly, and resistant to "tropical" disease, and reveals ambivalence toward an empire that would have to provide for the colonized. On the one hand, vertical dependency seems to be the responsibility of the U.S. given its claim to the islands; on the other, it allows some racial groups to steal from the state.

Mapping disease risk onto Chinese and Hawaiian bodies—against the parasitic black body—allows London to subtly walk a political tightrope. Sympathizing with the leprosy patients allows him to idealize rational social reform and the criminalization of the disease; at the same time, idealizing the place of this reform as outside the mainland remains in line with often virulently anti-Chinese sentiments among California socialists. Socialists had championed the racist association of leprosy and Chineseness to justify immigrant exclusion and minority marginalization in San Francisco, for example, in the late nineteenth century (Shah 99-100). The rhetorical strategy also allows London to situate the "real" source of leprosy in a *different* Asia, the failure of a different colonial power: "there are half a million lepers, not segregated, in India alone." The white Hawaiian business interests whose plantation economy was associated with the spread of leprosy on the islands escape blame as London idealizes the Board of Health's efforts at quarantine; meanwhile, it is key that the Indian lepers under British rule are "not segregated," threatening the real global pandemic feared by those who sensationalized Moloka'i.⁷

Addressing Rockefeller, Carnegie, and other large foundations that fund public health initiatives and research in Tropical Medicine, London ends by claiming that Moloka'i is "the place for your money, you philanthropists." The dry irony here is not aimed at philanthropy *per se*; instead, it targets the misplaced priorities of philanthropists who have failed to become providers at Moloka'i. Despite London's attempt to humanize patients, the article ultimately asserts the humanity of patients to justify their enforced dependency. The deployment of horizontal interdependence is a basis for the expansion of vertical dependency. London's humanization of colonists against the sensationalization of their disabilities can only operate in a context in which colonized dependents are enclosed in a space outside of transpacific capitalist production.

Queering Interdependence: "Koolau the Leper"

For Stoddard, the leper was a zombie: the disease was a condition in which "the living" were "well-nigh dead" (92). In his narrative, leprosy breaks binaries between life and death and human and monster, intensifying gothic horror. But, as Judith Halberstam has argued, if the gothic produces horror by using the abnormal to shore up the position of the normal, it is always still subject to "a vertiginous excess of meaning" (2); the gothic produces a number of possibilities in the monster, rather than a single position in the order of things. Along with fear, in this excessive signification, desire emerges. Gregory Tomso sees Stoddard's description of a disabled leprosy patient beneath a blanket as an example of *leprophilia*, especially when the narrator blurs a medical gaze with a sexual one. The images of a "tongue... like a fig" and the

eyes “not unlike bursted grapes” produce an Orientalizing desire at the site of the leprous Hawaiian body (Stoddard 99). For Tomso, “the body of this leprous child is nearly edible, the ripened flesh teasing if not tempting the reader with exaggerated versions of the same erotic metaphors of fruit and flesh that Stoddard uses in his quasi-pornographic stories” of the Pacific (761). As sexuality, race, and disability are intertwined in the gothic images, the mode affords Stoddard an expression of queer desire that otherwise cannot be made explicit—the narrative never mentions his cohabitation with a male resident of the Kalawao leprosy settlement at Molokaʻi.

Given the complex idealization of Molokaʻi in his 1908 piece, it is surprising that London takes on a tone similar to Stoddard’s in his 1909 story about resistance to U.S. empire, “Koolau the Leper.” In “Koolau,” London deploys gothic sensationalism to represent leprosy, but maintains identification with the Hawaiian subject who is stigmatized as disability links the power of U.S. empire, finance capitalism, and the emerging orders of racial and sexual difference. The story follows the historical figure Kaluaikoolau (called Koolau in popular accounts), who, in the annexation year of 1893, successfully avoided exile to Molokaʻi as a fugitive in the Kalalau valley. He famously killed a sheriff with close ties to the annexationists and outmaneuvered two groups of soldiers sent to hunt him down (Tayman 7-19). As a historical figure, Kaluaikoolau ties together anti-imperialism with resistance to the violence of enforced quarantine.

In London’s text, the character Koolau is a figure of masculine resistance to U.S. empire, refusing both stigmatization and the larger structure of colonial power that London associates with the emergence of leprosy in Hawaii. The story begins with Koolau’s speeches, which recall an idyllic past before land enclosure destroyed Hawaiian livelihoods and leprosy—brought by plantation labor—devastated Hawaiian bodies. These speeches—delivered in a participatory meeting of Koolau and other fugitives of the quarantine policy—are followed by a hula celebration featuring dancing and the use of indigenous narcotics. The scene is broken by a rocket fired in the distance, which signals the arrival of the American-led Hawaiian police. The fugitives surrender, betray Koolau, or are gunned down after initially resisting arrest. Only Koolau escapes the initial attack, but eventually he too is wounded and dies alone with his gun.

Drawing upon literary naturalism’s masculinist critique of industrial capitalism, as well as the gothic’s spectacle of desire and horror, London paradoxically exoticizes and eroticizes Hawaiians with leprosy, even as he critiques the imperialist logics of economic and medical dependency. He first invents a subaltern voice to critique the violence of U.S. empire in the Pacific. London portrays Koolau as ruler of the fugitives in Kalalau, his oratory providing the perspective of a native informant critiquing white colonial violence. Koolau’s opening speech portrays early missionaries and traders as underhanded avatars of colonial dependency and Hawaiians as their victims:

The one kind asked our permission, our gracious permission, to preach to us the word of God. The other kind asked our permission, our gracious permission, to trade with us. That was the beginning. To-day all the islands are theirs, all the land, all the cattle—everything is theirs. They that preached the word of God and they that preached the word of Rum have foregathered and become great chiefs.... They who had nothing have everything, and if you, or I, or any Kanaka [Hawaiian] be hungry, they sneer and say, “Well, why don’t you work? There are the plantations.” (London, “Koolau” 18-19)

In “Koolau,” the plantation brought by the American is the source of the native Hawaiian’s oppression. Figuring the eighteenth century Hawaiian as premodern and possessing a proper masculine relation to nature, by the end of the nineteenth century, Hawaiians have succumbed to a disease of civilization. Unlike “The Lepers of Molokai,” which constructed India as the global disease threat in defense of Molokaʻi as a Polynesian paradise, London returns to a “yellow peril” discourse, locating the Chinese source of the disease in labor migration paths. Koolau continues, “Because we would not work the miles of sugar-cane where once our horses

pastured, they brought the Chinese slaves from over seas. And with them came the Chinese sickness—that which we suffer from and because of which they would imprison us on Molokai” (20).

London’s writing constructs an identity for the Hawaiian with leprosy as a subaltern—as one dispossessed by national and imperial economic systems—through the representation of the fugitive’s communal interdependence. In the logic of the story, this interdependence is key to representing resistance to a subjugating colonial dependency. Like London’s use of underdog masculine heroes in a variety of works, the production of a heroic subaltern voice here protests U.S. empire from the perspective of a class-based critique. For London, U.S. commercial enterprises exploit the subaltern class and produce effete cultures of imperialism among the dominating classes. Meanwhile, the subaltern’s economic marginalization becomes the basis of medical dependency via the importation of the Chinese, who were often represented as a human virus at the time (Gussow 123-124). Thus London’s attempts to speak the voice of those dispossessed by U.S. empire tend to masculinize the subaltern in the face of a disability that is effeminizing: a lost limb is symbolic castration. By reading the supposed political “interest” of the subaltern as his or her desire,⁸ London represents the native Hawaiian man in order to produce him as a transparent other to a U.S. imperial discourse that, in London’s eyes, exploits him and renders him effeminate by destroying his proper relation to nature.⁹ Unlike the Chinese in London’s “yellow peril” writings, the Hawaiian is not portrayed as a machinelike, inhuman worker because his or her primitivity (and presumably inevitable extinction) prevents the use of the Hawaiian as a tool of capital. The Hawaiian instead presents a dying breed of people whose proper relation to nature—the object of London’s mourning—has been sidelined by the rise of U.S. capitalism and Asian despotism.

But, after Koolau’s opening speeches, London’s effort at masculinizing Hawaiian resistance is compromised in its production of a gendered, imperialist gaze upon the leprous body during the hula scene. At first, in describing the native informant, leprosy desexualizes the bodies on display. As Koolau delivers his opening oratory, the narrator describes the scene as troubling the categories of sex: “They were creatures who had once been men and women. But they were men and women no longer. They were monsters—in face and form grotesque caricatures of everything human” (19). Sensational diction throughout the piece depicts the fugitives as “barbaric,” “apelike” “human wreckage” (22, 20). But the desexualization of the body with leprosy, strangely enough, sets the stage for the eroticization of the fugitives’ bodies in a scene that draws sensational horror from the suggestion of queer desire. The narration shifts to describing the cultural life of the fugitives with an Orientalist gaze, removing Koolau from the scene. Hula dancing and ingestion of the narcotic *ti* plant are the sole diversions from the harsh conditions of fugitive life. Here, the narrator argues that only a drug-induced hallucination can cause the fugitives to think of themselves as human (sexed) again: under its influence, “they forgot that they had once been men and women, for they were men and women once more” (22). The drug induces a loss of historical memory, returning the fugitives their sex identities if not the pre-leprous bodies to which normative gendering must attach.

Yet as the narrator’s gaze rests on the dancers’ bodies, the gothic disfiguration of the female body shows in detail how empire is “travestying love”: next to Koolau’s protégé Kiloliana, in whose movements “love danced,” “was a woman whose heavy hip and generous breast gave the lie to her disease-corroded face.” In this “dance of the living dead” in which bodies “loved and longed,” the female is singled out for her compromised beauty. As Kiloliana leaves the scene, another figure appears dancing on the mat, this time with different impairments. Her “face was beautiful and unmarred,” but she had “twisted arms... marked by the disease’s ravage.” The scene closes with an image of these “two idiots” who “danced apart, grotesque, fantastic, travestying love as they themselves had been travestied by life.” Ending with two women—or, in London’s formulation, women-turned-monsters—“travestying love,” London cripples and doubles the figure of the leper, following the schema of Stoddard’s pea-planting scene. The doubling of the disabled body produces a simulacrum of the sexed body, eliciting the narrator’s desiring gaze. London simultaneously renders the leper figure monstrous

through a queering of disabled sexuality. Disability and sexual non-normativity signal dehumanization in what the narrator calls a “dance of the living dead” (22).

In the excessive signification of the gothic, the possible fears of the narrator multiply. For the leper’s mind to fill with “maggots crawling of memory and desire,” must the disabled woman—like Stoddard’s leprous pea-planters—be doubled? Is this the only way to produce the bodily wholeness presumed necessary for desire in a heterosexual matrix? Is the true “travesty” of love the possibility of same-sex desire between the dancing women? Is the possibility of such desires a result of the dislocation the Hawaiians experience from their land and their bodies, a reflection of the symbolic castration of the male body by the disease of empire? Does the true horror emerge from the possibility that the imperial gaze could produce (cross-racial) erotic desire even as the colonized body is materially ravaged and rendered dependent by the colonizer?

These questions go unanswered as the colony is invaded and as most inhabitants are killed or imprisoned by U.S. soldiers; the fugitives’ refusal of vertical dependency is the occasion for colonial violence, as U.S. capitalist hegemony is buttressed by military dominance. Here the narrative returns to the perspective of the native informant, Koolau. As the remaining survivor, he is left alone to die in the forest with his rifle and with the satisfaction of having killed white Americans. There is no need for sexuality or even for sociality in his lonesome end—he simply dreams of his “early manhood,” waiting to die as he holds the rifle that his fingerless hands can no longer fire (32). Like many of London’s masculine heroes, Koolau is triumphant but dies alone, unable to reproduce his masculinity in the face of transnational capital. Having been betrayed by several of his fellow fugitives, the only possible masculine identifications—with “brave” American soldiers—are foreclosed by the soldiers’ association with an empire that values the Hawaiian man’s body, but not his independence or subjectivity: “because he had caught the sickness, he was worth a thousand dollars [ransom]—but not to himself. It was his worthless carcass, rotten with disease or dead from a bursting shell, that was worth all that money” (28). In this lonesome ending, the lived problems of leprosy are cast by the wayside. Koolau’s leprosy serves as what disability theorists David Mitchell and Sharon Snyder have termed a “narrative prosthesis”: disability becomes a metaphor for social disempowerment, casting aside the lived problems of the disability (205). These problems—of producing interdependencies in the interest of the survival and community of the disabled—ultimately have no place in London’s vision of masculinity. The fugitives are ultimately killed or forced into vertical dependencies of empire.

The questions raised by the hula scene—and cast aside by the resolution—deserve attention. Women in general were not often represented as susceptible to leprosy (about twice as many men are impacted by Hansen’s disease than women). And the queering of the leprous body is a uniquely sensational moment in London’s corpus. I see the unusual scene as a result of two interrelated gendering processes: the first feminizes the majority of Hawaiian fugitives in order to isolate Koolau’s masculinity as transcendent, and the second feminizes the social modes of interdependence that bind the fugitives. Given the centrality of the interdependence/dependency dialectic in London’s writing on Hawaiian leprosy, it appears that sexuality (whether figured in terms of a heterosexual spectacle of the doubled female body or as leprous female homosexuality) emerges as a key site of social interdependence in the text. The idea that the normative wholeness of the able body is rendered unnecessary through community participation or disabled sexuality is anathema to London’s vision of independence, and in his response *sexuality itself is ultimately sensationalized and feminized*. As the pathologically sexed *women* “travesty love,” Koolau is conspicuously absent from the single scene in which the narrative shifts away from his viewpoint.

The horror of the hula scene, which emerges in a primitivization and eroticization of the leprous Hawaiian body, thus turns on the dual scales of dependency (its simultaneous emergence at the individual and collective levels in the contexts of imperial medicine and public health). London seeks to stress the independence of the colonized in the face of an effeminizing imperial enterprise, but he cannot help representing the incipient political contexts of empire without representing the corporeal life of Hawaiian “victims.” In the context of disability,

community interdependence is essential for the reproduction of culture (here symbolized by the hula). London attempts to feminize sexuality as a form of dependency, in contrast to the masculine hero who must always emerge as independent. But this ultimately means that Hawaiian culture—the mark of Hawaiian difference—is feminized at the moment London wants to assert Hawaiian masculinity and independence.¹⁰ The primitivist depiction of Hawaiian culture works against the legibility of individualist masculinity that London attempts to universalize. As Denise Ferreira da Silva writes, culture—in the sense of a bounded set of identifying traditions of a population—is a key mark of difference within the racial politics of modernity, and the basis of both the oppression of the “others of Europe” and the production of their post- or anti-colonial subjectivities as seemingly transparent “voices” (xix). London’s use of a cookie-cutter lone male hero¹¹ in the colonial context runs into the problem of having to signify the subaltern’s difference in a colonized setting: how can Koolau embody Hawaiian resistance if his dying body alone cannot reproduce the Hawaiian difference that underwrites the view of Hawaiians as innocent victims of the plague of empire? London needs to return to the voice of subaltern protest through a figure he calls “king” of the fugitives—the sovereign. He cannot allow the hula to speak an alternative set of desires that would recognize the ways in which cultural or bodily difference could queer anti-imperial politics; he instead subjects difference to a controlling imperialist gaze. Narrative prosthesis thus allows his vision of anticolonial resistance to avoid the lived issues of disability, sexuality, and community, while universalizing masculine individualism.

The Object that Returns

The short story’s resolution diverges from that of the travel narrative. The narrative closure of “Koolau” presents the independence of the leper figure and, thus, of Hawai’i, while “The Lepers of Molokai” idealizes the situation of the colony residents as one of proper dependency—on the government, scientists, and philanthropies that provide services in the context of enforced colonial quarantine. I see the contradictions between the two texts as resolvable only in a context in which literature attempts to represent leprosy by attaching race, gender, and sexuality to impairment. Hawaiians are feminized in their innocence, ravaged by disease, and primitive in culture. Idealizing Hawaiian resistance requires signifying Hawaiian cultural particularities while ultimately dismissing them either in the service of a universalizing masculinism or an imperialist and paternalistic reform discourse. The Pacific Islander as a racial type stands primitivized and dependent under imperialism, particularly given that he or she is threatened by another racial form—the Asiatic—who, embodying the rationalized labor formations of what Marx called the Asiatic Mode of Production, is represented as *excessively productive and reproductive*. The Asiatic is the virus of hypermodern production. London’s texts thus engage in a racial typing common to naturalist discourse. Examining London’s depictions of Asia and the Pacific generally, Colleen Lye claims that “American naturalism represents a failed critique of capitalism,” the evidence of which “lies in its tendency toward racialization, or the reification of social relations onto physiological forms, or types” (8). I would add that London’s naturalism reifies social relations by attaching racialized groups to particular types of gendered and sexual dependency. Vertical dependency, whether presented as necessary under a colonial order or as a curse of civilization, is always a trope through which racial mapping can locate the subaltern outside modernity, explaining colonial dominance as a result of the incapacity of the colonized body for modern life.

At the outset of this essay, I emphasized that in relations of dependency, an object returns to the provider. In the promulgation of “civilizing” projects such as the establishment of colonial public health institutions—as exemplified in London’s travel narrative—the relation of dependency provides the colonizer with both evidence of his or her superior position and justification for other forms of control, particularly in the regulation of trade. (There was an intimate relationship between the Hawaiian Board of Health and white, pro-American capitalists in the Hawaiian legislature.) But when London alternatively criticizes the predatory provider

role of the colonial power in vertical dependency relations, he does not strive to normalize interdependence. London's writing is too steeped in an American masculinist individualism to allow for a vision of interdependence (even one as blatantly stereotyped as the sensationalized hula). In London's narrative prosthesis, extinction seems to be the only end for those Hawaiians cursed by the disabling affects of empire. London maintains an imperialist gaze upon the Hawaiian body, contradicting his expressed anti-imperialism by figuring Hawaiian subjection and extinction as inescapable outcomes of modernity.

Yet if we follow recent historical work dealing with quarantine patients at Moloka'i, we can find forms of self-representation that break with both sensationalist representations of leprosy and the vertical dependencies of reform discourse. John Tayman's detailed history of the colony illuminates ways in which residents at Moloka'i represented themselves through escape attempts, lawsuits, autobiography, and letters to family members, politicians, and health care providers, creating juridical and political pressure for new freedoms and increased medical and monetary support from the state. Furthermore, in an important reading of Hawaiian resistance to U.S. imperial discourse in Hawaiian-language newspapers, Noenoe K. Silva recounts the existence of a chapter of the Hui Aloha 'Āina (Hawaiian Patriotic League) at the Kalaupapa settlement on Moloka'i, which added the names of dozens of leprosy patients to the 1897 petition of "native Hawaiian subjects and residents" who "earnestly protest[ed] against the annexation of the said Hawaiian islands to the said United States of America in any form or shape" (148-50). Though the political debates over Hawai'i's place in the empire did not often seek out the voices of those quarantined, patient protest played a pivotal role in improving quality of life independent of the vertical dependency relationship, expanding medical resources within dependency, and eventually ending the institutions of enforced segregation.

Considered the American Kipling, London did support U.S. imperial discourse in his writings despite an open stance against U.S. finance capital. Often ignored by literary scholars, his Hawaiian leprosy writings exhibit ambivalence over the position of the native Hawaiian given that Hawaiians were associated with femininity, disease, disability, and inevitable extinction. Yet the ways in which dependency can produce diverse resistances to subjection—through identifications, affiliations, and protest within and against dependency relations—escape the narrative frames to which he was tied. These interdependencies have worked to challenge both the stigmatization of leprosy and the cultural acceptance of quarantine as a model of disease control.

Notes

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² See Kittay (xii-xiii); McRuer (101).

³ The distinction between horizontal and vertical dependency is often unclear given that the community of interdependents can easily develop hierarchical power relationships. I deploy the opposition as a strategic essentialism that helps illuminate the ways in which turn-of-the-twentieth-century colonial health institutions organized new social bonds and created conflicts around bodily states such as leprosy.

⁴ Lennard Davis describes the invention of normalcy in the mid-nineteenth century with reference to industrialists' development of statistical languages.

⁵ I retain the term "leprosy" because from the 1890s through the 1910s, medical definitions of the illness had not yet obtained the specificity of today's "Hansen's disease." I use the pejorative term "leper" to describe the particular gothic figure of the person with leprosy as it appeared in literature; I always presume scare quotes. For a key discussion of patient activism around terminology, see Gussow.

⁶ See Anonymous; Morrow; Morrell; and "Leprosy in Hawaii."

⁷ On the prevalence of Indian leprosy, see Kakar 191-2, 200, 204.

⁸ For an important critique of the transparency of the colonial subaltern, see Spivak, "Can the Subaltern Speak?" Key revisions appear in Spivak, *Critique of Postcolonial Reason*.

⁹ In particular, London fears "male degeneracy" and sides with idealizers of an essentialized masculinity of physical power (Hoganson 133-55; Bederman).

¹⁰ On London's masculinism, see Forrey. Indigenous peoples were often feminized by depicting them as "receptive" to disease. See, for example, Mouritz: "Civilization blights aboriginal races, the Hawaiian is no exception; the harsh side of civilization kills by kindness, it may resemble the Greeks bearing gifts, in contact with primitive races it is treacherous."

¹¹ James McClintock and Earle Labor also see Koolau as derivative of London's other heroes (McClintock 137; Labor 211).

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