Norm and Deviance in Contemporary
Anglophone Fiction and Autobiography
explores the problem of the border between
norm and deviance in mental health as it
is reflected in contemporary Anglophone
literature. By combining post-structuralist,
phenomenological and medical humanities
approaches, the study demonstrates the
constructedness of the notion of the norm and
analyzes how the discourse dominating in
social and cultural environments has generated
such a conventional label as deviance.
NORM AND DEVIANCE IN CONTEMPORARY ANGLOPHONE FICTION AND AUTOBIOGRAPHY
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ABSTRACT

Anglophone literature has long been a productive platform for dealing with the issue of mental disorders. However, the experience of having a mental disorder remains “othered” knowledge, since it does not fit into the “norm”. This study examines the concepts of norm and deviance from both philosophical and sociological perspectives, since the normative attitude is formed in society under the influence of dominant discourses and superficial representations associated with stereotypes. On the basis of the findings of the medical humanities, this interdisciplinary study aims at demonstrating the ability of literature (both fiction and autobiography) to dispel myths about mental illness and lessen the ignorance of the readers and, in so doing, diminish the stigma attached to people labelled deviant. Labelling has proved to be one of the effects of operating with norm and deviance as a clear-cut binary; that is, treating them dichotomically. Post-structuralist and phenomenological approaches are employed to provide reflections on the ability of language to mediate the experience of mental illness and the human abilities to understand such experience through empathy. The ethics of alterity and responsibility, applied to the way narrators are perceived by the reader, helps to elicit the narrowness of the classificatory and diagnostic attitude and the medical gaze. It has also proved to be important to provide insight into the difference between literal and metaphorical mental disorder, namely schizophrenia. This theoretical background is tested in case studies among which two texts deal with the concept of postmodern schizophrenia: Will Self’s *My Idea of Fun* (1993) and *The Sweet Smell of Psychosis* (1996). The former is a novel that examines such issues as addiction, marketing, and transgression in their connection with metaphoric schizophrenia. Such techniques as Moebius-strip space, scale vision and the use of perpetual present are seen as formative for the schizophrenic world presented in the novel. The latter is a novella that pictures the character’s immersion into the schizophrenic world of media that involves addiction, loss of identity and agency,
and feeling of being under surveillance. Both texts feature an authoritative and manipulative “Big Other” figure that embodies the idea of power and total control. The third case study is the collaborative autobiographical text *Henry’s Demons* (2011) by Patrick and Henry Cockburn that reflects patients’ and carers’ experiences of living through schizophrenia. The analysis of this text involves reflections on the nature of voices heard by people with schizophrenia, the stigma that accompanies mental illness, and difficulties regarding the ways the illness can be treated. Alongside this, the problematic nature of collaborative writing is analysed and the following questions are addressed: Can a vulnerable subject retain his or her voice in an edited text? What amount of editing can turn collaboration into coaxing? Why is the mother’s diary given so little attention in the analysed text, even though she is supposed to be one of the collaborators? The fourth case study deals with Nathan Filer’s novel *The Shock of the Fall* (2013), which tackles issues such as guilt and trauma as triggers for schizophrenia that involves hallucinations. In my reading, the novel presents a confessional narrative that challenges the reliability of memory and the idea of confession as a truth-seeking and purifying enterprise. The fifth case study is Mark Haddon’s novel *The Curious Incident of the Dog in the Night-Time* (2003) that deals with difference and the normative attitudes of the readers. This study considers the interpretations concerned with autistic discourse often applied to the novel as classificatory and limiting. In this connection, the concepts of alterity and responsibility are addressed. The sixth case study deals with Jonathan Safran Foer’s novel *Extremely Loud & Incredibly Close* (2005) that is concerned with traumatic experiences involving “major” events such as the 9/11 terrorist attack and the Dresden bombings. I explore the literal and metaphorical unspeakability of trauma and the normative interpretations of the characters’ behaviour as autistic. Generally, this study provides readings that resist pathologization and normalization of the experiences presented in the texts as well as a “finalization” of the characters’ alterity.

**Keywords:** British literature; American literature; autobiography; madness; schizophrenia; autism; post-structuralism; Will Self; Patrick Cockburn; Henry Cockburn; Nathan Filer; Mark Haddon; Jonathan Safran Foer
TIIVISTELMÄ


Avainsanat: Britannian kirjallisuus; Yhdysvaltain kirjallisuus; omaelämäkerta; hulluus; skitsofrenia; autismi, jälkistrukturalismi; Will Self; Patrick Cockburn; Henry Cockburn; Nathan Filer; Mark Haddon; Jonathan Safran Foer
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Overall, I am very glad that this study has been published and that it has been carried out at all. I have done the research believing that its main findings could serve as an academic basis for a significant change in the normative (read pathetic) way in which society often deals with deviance. I am somehow proud that being primarily a literary study this research is multidisciplinary and thus transgressive: it provides an argument that can be employed within various disciplines and the background that can be used for educational and awareness-raising projects worldwide.

I am particularly grateful to my dad, who has always supported me. He also taught me to read in the early childhood and this had set the ball rolling. Since then I have never stopped. Since then reading and writing have become my vocation as this is what I have been doing best up to the present moment. My dad has always encouraged me to study and, being a professor of physics, provided a role model. Thanks to him, I never doubted the importance of intellectual growth.

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1 INTRODUCTION

To encounter a handwritten commentary that reads “modernism is not normal then?” in Louise Sass’s famous book *Madness and Modernism* (1992) is to realize that one never knows how one’s words are going to be deciphered by others. I discovered the note next to Sass’s explanation that eccentric symptoms of schizophrenic behaviour in a way resemble examples of modernist writing. Hence, one arrives at the conclusion that modernism at large is not normal. If I had the chance, it would be intriguing, for the sake of saving time and effort, to ask the note-maker what is “normal”? If modernist art is supposed to be abnormal, then what kind of art is normal? Following this logic, the person’s attitude towards the normality or abnormality of people with mental illness need not even be questioned. This situation proves that the main topic of this study is relevant, as its main objective is to escape from the binary of norm and deviance and to prove that there are other ways and means of cognition and evaluation in the world than those of binary divisions.

In this sense, deviance can be “re-framed” in the same way as disability: as Alice Hall notes, it can be “seen not as a damaging social process but instead as an alternative way of being in the world” (2016, 27). To examine this point, this thesis addresses both the issue of mental illness and the idea of difference, with each chapter providing an independent insight into a general problem: anyone may be diagnosable but not everyone is or should be diagnosed. The choice of topics is consequently aimed at examining the representation of non-normative subjectivities. In addition, while both schizophrenia and “autism” narratives are included, the latter is not regarded as “mental illness”.

Another reason for the relevance of the study is that there is often a neglectful attitude towards stories of mental health presented in literature. My motivation is concerned with the desire to demystify the concepts of literature and literary studies as a discipline dealing with artificial and abstract issues. I would like to demonstrate that the experiences of mental illness as presented in literature (whether autobiographical or fictional) play a significant role in reducing the reader’s ignorance about stereotypical images of those mentally ill as well as in changing some of the existing assumptions in academic discourse.

It is noteworthy that the study focuses on the binary of norm and deviance, that is, refers to the concept of deviance rather than madness. I suggest that “deviance” is a broader and less delineated concept than madness since the latter is highly connotative. Madness is usually clearly distinguished as non-reason, whereas deviance implies the idea of non-conventionality and can be used in both philosophical and sociological contexts. Occasionally, the notion of madness is mentioned in reference to the irrational or non-conventional.
1.1 AIMS AND STRUCTURE

This study explores the problem of the border between norm and deviance in mental health as it is reflected in contemporary Anglophone literature. One of the main aims of the study is to challenge the imposed assumptions about the binary of norm and deviance. By challenging them, I demonstrate the constructedness of the notion of the norm. To deconstruct it is to draw the attention of the public onto the way stereotypes operate and become the main issue of the dominant discourse. Since the idea of the norm is relational, it is the discourse dominating in social and cultural environments that has generated such a conventional label as “deviance” to conceal the fact that the norm is artificially constructed—for example, by such a cornerstone of medical discourse as the Diagnostic and Statistical Manual of Mental Disorders (DSM). The discourse aims at pathologizing lived human experience, contraposing it to the “norm”. The narratives I will discuss show that the constructed ideas of norm and deviance lead to the reliance on solely biomedical and classificatory approaches, while personal narratives are not comprehended. Such scientific objectification in the context of mental experience often proves to be untenable.

The second aim of my thesis is to reduce the prevailing ignorance concerning mental illness. Under the pressure of objectified diagnoses, labelling and imposed stereotypes, one tends to treat a person with mental illness as an ultimate “other”. There is a tendency among the general public to consider narratives of mental illness as a highly specialized sort of reading—irrelevant to a “normal” person. On the one hand, the entire issue of ignorance arises precisely from a lack of desire to be concerned while, on the other hand, the refusal to be concerned is a direct consequence of being ignorant. What I try to demonstrate in my work is that an attitude of “non-involvement” is limiting in many ways and within various scopes (e.g. people tend to confuse schizophrenia with a multiple identity disorder, or young people might find it a matter of fashion to pretend to have a mental illness or to be depressed, thus making the word depression a matter of everyday small talk and failing to realize the danger of a real clinical depression).

Moreover, the notions of schizophrenia and madness have become a part of postmodern philosophy and have been assigned certain connotations of freedom, of being an Artaudian “body without organs” (see sections 3.2, 4.1) as opposed to paranoia and its connotation of total control and surveillance. While such an approach to these terms has become important for critical theory and art studies, I would like to demonstrate that the postmodern message of the terms has differences as well as some similarities to the those represented in illness narratives. My third objective is to demonstrate how the combination of phenomenological and post-structuralist approaches provides an ethical foundation for a fresh view of the subject, individual and alterity. I will show how narratives of people with mental illness help readers to recognize the humanity of the other and thus
diminish their fear of alterity and otherness. Under the normalizing gaze a person cannot realize the alterity hidden in him- or herself and, therefore, cannot empathize or feel responsibility for the other. In other words, the normalizing gaze “domesticates” alterity, thus limiting the space in which a person can question the social construction of him- or herself and others.

However, literary and narrative studies are fraught with controversy concerning the problem of the self per se and its being constructed through language. I discuss the problem of the self and language in narrative studies and its complication by post-structuralists. Human existence is certainly saturated with cultural narratives, and the storyteller is often confused when they have to distinguish between the imposed constructions and their own interpretation. If those constructions take the form of tacit assumptions, they definitely affect the contents of a story, the way it is told and the way it is perceived by both the teller and the reader. It is a tedious task to keep a critical distance when telling or interpreting; for a person who tells the experience of a mental illness the task of finding the right kind of language and keeping the critical distance at the same time becomes all the more challenging.

The fourth objective is concerned with encountering the other’s narrative: I aim to demonstrate that certain experiences cannot be coherently expressed by language—an imperfect mediator for traumatic experience. People tend to fear what they do not know—thus, they fear those with mental illness because they believe that the experience of such people is inaccessible. Such experience is doomed to be pathological and, for this reason, is to be considered “useless” for a “normal” person. The incoherent speech of a person with schizophrenia, for example, has long been labelled as meaningless and, therefore, not taken into account. The experience seemed unimaginable and was thus “othered” or feared by the reader. To use the terms of postmodern philosophy, encounter with such experience can lead one to transgress the limits set by the normalizing tendency in society to gain a certain kind of limit-experience. I will show how narratives of mental illness can, in fact, dispel many myths about norm, deviance and otherness. Personal narratives provide patients with their own voice that helps them construct their own narrative identity (even though incoherent) and share their authentic experience with the reader. This objective extends the boundaries of the narrative approach in medicine and the medical humanities.

As the norm and deviance binary is challenged, the medical humanities provide an indispensable backbone of research on disavowing boundaries. Not tied to any particular discipline, the medical humanities help to provide insights into medical and social history, philosophy and literature. The field helps to answer the main questions that I pose: What makes people rely on the imposed judgments concerning the binaries of genius and madness, norm and deviance (Sass 1994, Baker et al. 2010, Kutchins and Kirk 2003), and how do they specify the idea of normality (Davis 2013)? The medical humanities pay much attention to personal stories and illness narratives as a tool for challenging the binary of norm and
deviance (Wood 2013). The medical humanities are tightly connected with the field of narrative medicine and the latter’s goal to comprehend patient’s narratives instead of the dry hospital records of DSM case books. I use the findings of narrative studies concerning the crisis of the subject (e.g. Meretoja 2014) and the ethics of life writing (e.g. Eakin 2008). Coherent speech can hardly represent the translation of a fragmented experience, and incoherence is often viewed as ungraspable. The unity and coherence of one’s selfhood and its expression are a widespread illusion that discourages many people from sharing their stories by evoking feelings of shame and inconsistency.

I argue that the limits of storytelling or writing are the limits of language and that this idea is further complicated in the works of post-structuralists. I am interested in the tension between post-structuralism with its crisis of subject, and the narrative turn with its phenomenology of the lived experience. Despite the limits of language, interpretation and social construction, I believe that a story is what makes understanding possible and what can really reduce ignorance about human conditions. According to Derrida (1997), the word is not accurate, yet it remains the only means available for sharing experience. Although such words as schizophrenia, depression, and anxiety are inaccurate and even etymologically misleading, and although our stories are mediated by language, words and stories do, however, convey and share the experience, showing that it is not incomprehensible or ungraspable.

The post-structuralist and deconstructive approaches are important for my research, as the impact of critical theory on the understanding of the nature of mental illness is extensive (Foucault 1988, Deleuze and Guattari 1983, Fee 2000). Since the accounts of personal experience are crucial for illustrating the constructedness of categories, the deconstructive approach to normality is significant in the context of personal perspectives, experience and actions. It is often wrongly considered that post-structuralist thinking opposes the phenomenological approach, that is, the critical deconstructivist approach denying solid knowledge has nothing to do with phenomenology, which denies the reducibility of the body to discourse (Critchley 1999). In fact, phenomenology and deconstruction appear to meet at a point where the achievement of some ultimate truth about human experience is challenged. The myth of ultimate truth or ultimate knowledge is deconstructed (Derrida 1981a), thus giving way to the deconstructive dimension of phenomenology (Watkin 2009). In practice, as my readings will show, both autobiographical and fictional works deal with the stories of personal lived experience in such a way that the human experience helps to transgress the reader’s stereotypes or fears about mental illness.

This study addresses contemporary literature of different genres written by authors with different backgrounds. All of the literary works addressed represent characters who encounter mental illness or deviate from the “norm”. In my work I deal with autobiographical and fictionalized accounts of mental illness that include
personal diaries, essays, poems, doctor’s notes and drawings that are often written in collaboration, which provides a variety of perspectives. These accounts of mental illness do not promise the truth of the experience, but they provide a perspective and recognition of and critical reflection on the shaping stereotype. What is important about choosing drastically different literary works is that their analysis leads the reader to similar conclusions—the questioning of the binary of norm and deviance as well as the imposed definition of norm, that is, the main goal of the study.

Chapter 1 of this study begins with the current introduction clarifying its contents, objectives and approaches. The first section outlines the aims and structure of the study and provides an overview of the analysed literary works. The second section addresses the medical humanities—a novel approach that deals with the interrelation of literature and medicine and emphasizes the importance of narratives for the demystification of mental illness. The final section of this chapter provides a literary context and includes literary works of different genres, namely autobiographies, fictionalized narratives and postmodern fiction, and outlines the main concerns that link these literary works to those addressed in this study.

Chapter 2 provides a detailed theoretical framework and introduces the concepts used throughout the study. The first section addresses the main theoretical backbone of the study, that is, the poststructuralist and phenomenological theories. The section states the relevance of the Derridean deconstructive approach and its link with Levinasian phenomenological philosophy. The second section of Chapter 2 aims at providing the definitions of such key concepts as norm and alterity and refers to theories of James Mensch, Emmanuel Levinas, and Mikhail Bakhtin. However, as the norm cannot be defined in isolation, sections 3 and 4 provide philosophical and sociological reflections, respectively, on transgression of the norm, deviance and the way that normative identity is constructed in society. These sections also address the notion of morality and how it underlies social norms and conventions that are perceived as natural or moral and often lead to stigmatization of the deviant. The philosophical section refers to Georges Bataille, Friedrich Nietzsche, and Michel Foucault, while the sociological section draws on the theories of Erving Goffman, Erich Goode, and Anthony Giddens.

Chapter 3 continues by exploring the topic of constructing one’s identity in the narrative context. The first section addresses the notion of a story that stands in the current study for both autobiographical and fictional narratives. It refers, in particular, to Paul John Eakin’s idea that there is always an element of fiction even in autobiographies. This element of fiction is conditioned by the challenges that language poses as a mediator—these challenges are addressed in the second section of the chapter. That section refers to Derrida’s theories and uses Antonin Artaud’s struggle with the limits of language as an example. The last section tackles the question of self-transparency, that is, whether a person can narrate his or her experience as a completely truthful reflection of their real experience. The section
also addresses the problem of social and media bias that may influence one’s own perception of oneself, one’s illnesses or incoherent and unstable self. The matter of morality is challenged in this chapter as well as in the previous: the idea of morality does not only seem to underlie social conventions but also seems to state that to be moral implies to have a solid identity that can be coherently narrated. The last subsection of this chapter “Narrative Identity and Morality” provides insight into the interrelation of morals and identity that is supposed to be “naturally” coherent.

Chapter 4 is devoted to the postmodern approach towards depicting schizophrenia in literature. Postmodernists use schizophrenia as a metaphor that follows the logic of capitalism (I refer to Frederic Jameson) or that resists it (Gilles Deleuze and Felix Guattari). In the first section of this chapter, I compare the metaphorical and clinical approaches to schizophrenia, as well as differentiate between cultural and philosophical representations of a “madman”. In so doing I use both Jameson’s approach to the postmodern condition and Deleuze’s idea of schizophrenic language. The second section provides examples of how Will Self’s novella *The Sweet Smell of Psychosis* (1996) and his novel *My Idea of Fun* (1993) demonstrate the postmodern metaphorical representation of schizophrenia. In the world that Will Self creates, his characters deal with paranoia, constant surveillance and the perpetual present. Moreover, they lack the autonomy of their own identity. I offer two readings of Self’s texts—as illness narratives and as postmodern metaphoric texts.

What is most important is that Self’s texts do not provide closure. I consider this absence of closure to be one of the main strengths of Self’s writings. I argue that the nature of the conditions in both texts is undecidable. Such undecidability opens the discussion of the often confusing and confused interrelation between mental illness and difference, which is also an important focus of the practical Chapters 4-7. Interestingly, literary narratives that are called “open-ended” by such theorists as Barthes and Blanchot appear to be highly valuable in the context of disability studies. Mitchell and Snyder emphasize the “inexhaustibility” of such narratives, underlining their explicit openness to the play of multiple interpretations (2001, 48).

In Chapter 5, I analyse an autobiographical account of a family’s encounter with schizophrenia. Such accounts of mental illness prove to be the most valuable source of access to authentic experiences of madness, given to the reader “from the inside”. I discuss Patrick and Henry Cockburn’s collaborative memoir *Henry’s Demons: The Father’s and Son’s Journey through Schizophrenia* (2011). This text represents not only a caregiver’s perspective on coping with mental illness but also gives voice to the patient himself. In the first section I discuss the nature of the collaborative memoir, since Henry’s Demons is a narrative written together by Henry, his father and his mother. Section 5.2 is devoted to Henry’s account of schizophrenia as an experience that is likened to a spiritual awakening. Henry’s narrative presents an alternative, different vision; one that can be illuminating in its questioning of the conventional. Section 5.3 provides a “rational” perspective, as belonging to the father Patrick,
whose writings are a critical reflection on the nature of voices in schizophrenia, the importance of talk therapy, and the reasons why schizophrenia is such a stigmatized illness. The notion of stigma is then emphasized and developed further in the following chapters. Despite the overall positive impression of the collaborative work, there are certain challenges that such a collaboration poses. The last section, 5.4, describes the mother’s perspective on the situation, which is provided only by means of a number of pages from her diary. Therefore, I discuss the genre conventions of a diary and challenge the amount of editing that Jan’s diary might have received. I refer to G. Thomas Couser’s theory on collaboration, vulnerable subjects and memoirs as well as to feminist theories concerning the links between genre and gender. It is also noteworthy that closure is absent from this text—this fact helps to challenge the conventional conception of illness narratives as those of a happy cure.

Chapter 6 analyses a work of fiction written by a psychiatric nurse: Nathan Filer’s novel *The Shock of the Fall* (2013). Filer is a registered psychiatric nurse who received the Costa Book Award for the novel. Filer’s novel represents a fictionalized story as told by a person diagnosed with schizophrenia after losing his brother and feeling dramatic guilt. The novel is saturated with special techniques and provides many insights into life in a mental hospital. Since Filer is in the medical profession, he provides a relevant reflection on schizophrenia as the most stigmatized illness—I discuss this idea in the first section of the chapter. Even though Filer admits that the diagnosis of schizophrenia is “implied” in the text, he also says that he “does not diagnose” the protagonist (Maughan 2014, n.p.). Thus, again the ideas of mental illness, deviance, difference and labelling can be observed. The next two sections are devoted to the analysis of the narrative and the interconnectedness of the guilt that the protagonist experiences and his developing schizophrenia. I argue that the novel is structured in a manner of a confessional narrative but, as with the other texts discussed in this study, it does not presuppose closure, that is, a complete unburdening from guilt and the illness. In this sense, the conventions of a confessional narrative seem also to be deconstructed, as in Foer’s novel examined in Chapter 7.

Chapter 7 continues to develop the idea of difference, though from a new perspective. It discusses the fictional stories of people who are described by the authors as different, but are not actually diagnosed with any mental illness. Mark Haddon has gained experience from working with people with disabilities and he is the author of the award-winning novel *The Curious Incident of the Dog in the Night-Time* (2003). Haddon’s novel is a story told by a boy having certain symptoms common to those of autism or Asperger’s, but the diagnosis or mental illness of the boy is never mentioned by Haddon. I suggest that to ascribe a certain diagnosis to the boy is a characteristic of labelling, which is a common practice in a society haunted by the constructed notion of norm. As Mitchell and Snyder note, it is within literary narratives that “cultural truisms” can be confronted (2001, 48), and
this chapter confronts the truisms regarding difference and mental illness in the manner of the previous chapters. Thus, in the first section I analyse the normative attitude towards Christopher, the protagonist of Haddon’s novel, and Oskar, one of the characters of Extremely Loud & Incredibly Close (2005), a novel by the American writer Jonathan Safran Foer. The latter novel presents several characters who have to cope with traumatic events in their lives. Oskar, a boy who has lost his father in the September 11 terrorist attack, is not “diagnosed” by the author but is treated as being on the autistic spectrum by reviewers as well as academic scholars. In my analysis of the novel I draw attention to the concept of guilt and trauma, and to the struggles that the narration of a traumatic experience entails.

In Chapter 8 I will provide concluding remarks concerning the entire study, its limitations and the possibilities for further work. I will also tackle such topics as the responsibility for interpretation and the role of literary narratives in the destigmatization of mental illness despite the challenges of language that prevents the reader (and also the writer/teller) from having direct access to the experience.

The reader might notice that the texts analysed in this study are, with the exception of Jan’s chapter in Henry’s Demons, exclusively male-authored. Gender implications did not, however, serve as the reason for the choice of texts, and the literary review section does analyse certain important female-authored texts, such as Lori Schiller’s and Elyn Saks’s narratives. The texts by Self, Cockburns, Filer, Haddon and Foer were chosen for the solid reason that they present a rich material for a productive discussion of the concepts outlined in the theoretical chapter and the study’s central challenge of the norm and deviance binary. Some of the texts have already received a great amount of literary criticism, others have been somewhat less explored. However, the chosen perspectives can be considered novel regarding the texts in question. Thus, the choice of texts was guided by their literary qualities and, most importantly, their appropriateness for the discussion of norm and deviance, rather than gender implications.

Above I have outlined the aims and structure of this study. Next, I will describe the general subject of the research: the interrelation of literature and medicine. I suggest an approach that addresses the link between literature and medicine from a novel perspective. The approaches of the medical humanities and that of narrative medicine, in particular, are often underestimated. Even in academia one might confess to having never heard of such an approach as the medical humanities. I therefore begin the next section by analysing the theoretical underpinnings of this approach with respect to the portrayal of mental health in literature in general. I examine the ways in which the approach of the medical humanities might be used in evaluating the impact of illness narratives on the ability to empathize with people with mental illness in society. I emphasize the idea that “normativity” affects the way in which a person conceives of as well as narrates his or her identity—illness narratives demonstrate the worthiness of storytelling, even if it cannot be coherent. Secondly, since this is an interdisciplinary literary study, I will
provide a literary review that will serve as a context for the contemporary literary works I analyse in Chapters 4-7. The literary context section is divided into subsections dealing with autobiographical texts, fiction and postmodern writing—as these genres correspond to those of the central texts analysed in the study.

1.2 MEDICAL HUMANITIES

Needless to say, the medical humanities is an interdisciplinary field, with all that entails. In particular, to use the idea of Lennard Davis, it entails the ability to point out the things that visitors in the discipline can see and residents often cannot. That combination, he says, may make interdisciplinary scholars “sometimes-unpleasant guests at the dinner table” (Davis 2014, 9). Unpleasant, because although trained in, say, English literature, one makes inferences about how to treat people with mental health conditions. Yet, the very ability to “apply a filter”, as Davis mentions, of cultural studies to the study of affective disorders “necessarily provides a corrective view” (ibid., 8). Applying the different viewpoint of the humanities or social sciences to medical issues is precisely what the medical humanities do. Today, taking into account both objective science and humanities, that is, bridging the gap and leaving the binary behind, is something the medical community cannot prosper without.

Not tied to any one discipline, the medical humanities help to provide insights into medical and social history, pedagogy, philosophy, and literature. Having so much at its disposal, the field helps to tackle the main question posed in this research: If the boundaries are obsolete, how can one differentiate between health and illness, genius and insanity, or specify an idea of the normal? The ideas of challenging the dominant discourse of normality and mental health have certainly not emerged out of nowhere. On the contrary, the emergence of the medical humanities is a logical consequence of the consistent reciprocal influences of various social factors as well as of the academic redrawing of formerly orthodox disciplinary boundaries.

In essence, the medical humanities represent resistance to the dominant biomedical approach to treating mental illnesses as well as the dominant contraposition of being healthy and being ill. This essence is easily explained if we note that the first Department of Medical Humanities ever established was founded in 1967. Thus, the rise of the field fell on the late 1960s—a turbulent period in the history of culture and philosophy. This period is characterized by the emergent crisis of authorities, which later became the core of postmodernist philosophy. The year 1968 was marked by a number of boisterous student demonstrations in the USA, Mexico and Europe. In 1960 and 1961 Ronald Laing’s key works were published. In 1965 Oliver Sacks moved to the USA where he started practicing neurology in his own “romantic” way (Sacks 1990, 35-36) and publishing *Awakenings* in 1973. It is true that the majority of research on the medical
humanities is conducted in the USA and the UK: the two main journals Medical Humanities (since 2000) and The Journal of Medical Humanities (since 1979) are issued in the UK and in the USA correspondingly, as well as Literature and Medicine (since 1982, USA), and PJMH: The Postgraduate Journal of Medical Humanities (since 2014, UK). Despite this USA-UK monopoly, according to Therese Jones, the editor of The Journal of Medical Humanities, in 2009-2012 about 40% of submissions to the journal came from outside the USA, including European countries as well as India, Japan, South Africa, and elsewhere (Jones 2014, 33).

It is important to mention Laing’s works when discussing the rise of the medical humanities. Laing is strongly associated with the anti-psychiatry movement along with such prominent thinkers as Michel Foucault, Jacques Lacan and David Cooper; Cooper being the first to use the term during the Congress on the Dialectics of Liberation in 1967. As part and parcel of the 1960s counter-culture, anti-psychiatry challenged the methods and stereotypes of orthodox psychiatry. In the manner of Sacks’s work that was aimed at “bridging the gulf between physician and patient” (Sacks 1990, 225-226), Laing encouraged practitioners to listen to the patient simply as a human, not trying to classify symptoms or make strict diagnoses: “If we look at his actions as ‘signs’ of a ‘disease,’ we are already imposing our categories of thought on to the patient” (Laing 1965, 33). This idea of giving the patient his or her own voice was readily accepted by the medical humanities with its interest in the patient’s own narrative. The field inherits an anti-psychiatric opposition to the role of orthodox psychiatry as an oppressive social agency that puts authorities before the patient’s interests and cultivates the superiority of authorities as places of power.

However, we must be wary of seeing only the bright sides of the anti-psychiatric movement. For Laing, as also for the avant-garde postmodern thinkers and schizoanalysts such as Deleuze and Guattari, whose ideas I will discuss in Chapter 4, the schizophrenic is a metaphorical hero, the living manifestation of creativity and nonconformity that triumphs in the face of repressive social power. This view is criticized not only by scholars (see Glass 1995) but also by those who have personally encountered the failure of pure talk therapy (see Chapter 5 below: Henry’s Demons, a memoir of mental illness). Pure talk therapy and pure biomedical approaches may both be harmful.

Breaking of the norm-deviance binary led anti-psychiatrists to oppose society, which they perceived as sick and dangerously obsessed with labelling the mad: “Society highly values its normal man. It educates children to lose themselves and to become absurd, and thus to be normal. Normal men have killed perhaps 100,000,000 of their fellow normal men in the last fifty years” (Laing 1967, n.p.). James Glass expresses a similar viewpoint based on psychoanalysis and social policy: he says that the fantasy of a clinically diagnosed schizophrenic is not harmful in reality, because it is kept inside, but the fantasies “of politicians, bureaucrats, and corporate executives impose tremendous hardships” (1987, 416).
Labelling is what the DSM, regularly reissued by the American Psychiatric Association, is all about, as anti-psychiatrists argued. Today the medical humanities question the validity and reliability of the diagnoses provided in the DSM (see Wood 2004; Kutchins, Kirk 2003; Lewis 2006), as well as its reliance on an objectified biomedical approach stating that all that is “wrong” with patients is a consequence of brain malfunctioning. Such malfunctioning is meant to be treated with pharmaceuticals as a kind of panacea. Where the medical humanities is set against such an approach is in its awareness that any mental disability “is more like retina patterns than measles” (Higashida 2013, n.p.). A patient himself or herself is a “multiplicity of configurations” (Hawkins 1993, 233) that has to be empathically explored. Trying to treat any disorder by looking for symptoms and appropriate pharmaceuticals as stated in the manual often deprives the patient of a chance to be heard. The reason for such medicalization is wittily described by Nathan Filer in The Shock of the Fall analysed in Chapter 6 of this thesis: a patient at a mental hospital drinks his coffee from freebie mugs bearing the logos of pharmaceutical companies.

What is crucially important about the medical humanities is that the field expands into a post-disciplinary domain where “cultural studies of psychiatry […] would expose and examine the social and political relations of the psychiatric knowledge production” (Lewis 2006, 81). If cultural studies consist of “the reading, or decoding, of dominant cultural artefacts against the grain to unpack the encoded culture and power dynamics of their production” (ibid., 95), then the medical humanities serves to decode and pick apart the power relations concerning the norm–deviance dichotomy as well as the general public’s notorious fear of the Other. Today, under the pressure of the objectified diagnosing system and imposed stereotypes, we still face the attitude toward a person with a mental condition as an “ultimate other” who is labelled as a “creature with a different, deeply flawed brain beyond the reach of understanding” (Wood 2004, 202).

Such labelling results in a need for a different approach to reading patients’ (or rather just peoples’) stories by scholars in medicine and the humanities as well as by the lay public. In his chapter in the recently issued collection of essays Medicine, Health and the Arts: Approaches to the Medical Humanities (2014) the editor Alan Bleakley states that the fields that the medical humanities mainly consider are the history of medicine, medical education and art therapies (Bleakley 2014, 17). Still the greatest charm of the medical humanities is how the field extends towards acquiring that necessary “philosophical outlook” that is “now widely recognized as being universally applicable to the sciences as well as the arts” (Greaves 2001, 17). Highlighting the importance of a complex medical-humanitarian education is a great start from which the field can expand further lest the results should be one-sided. If only practitioners are taught to be empathic and undogmatic and not to look for universal truths, they may end the prevailing a one-way game. Education in the medical humanities needs to exceed its own boundaries in order to make
changes in throughout society, which is often unable to recognize and accept the possibility of being different. In this sense the goals of the medical humanities become more considerable and significantly assist in going beyond the norm-deviance division by means of literature or philosophy.

Above, I mentioned that we need to comprehend peoples’ stories. While this statement may seem ambiguous, it bears an idea important to the medical humanities. The general public is often not prepared or willing to admit that “the experience of ‘madness’ is a quintessentially human experience” (Geekie & Read 2009, 6). If this were not clearly the case, it would be meaningless to talk of a norm-deviance boundary. James Glass addresses this head-on in his commentary on rational culture and the way it deals with the unconscious. The rational consensus rejects everything that does not fall under the notion of the conventional norm, and thus “banishes an integral part of human nature” (Glass 1987, 405). Glass also notes that the public “excludes the mad (the schizophrenic) whose delusions about power are considered outside legitimate discourse” (1987, 407). This idea mirrors Michel Foucault’s considerations about the mad being excluded from the discourse about them: the mad person’s “words are null and void, without truth or significance, worthless in evidence” (1972, 216). If the words of the other-than-self person are considered insensible, his or her language becomes a non-human sound that simply shakes the air. The public fails to establish any kind of empathic communication with that person and, eventually, ceases to associate them with humankind at all. Therefore, when I talk about the scope of the medical humanities, I imply the broad domain of the human lived experience, the admission of which is not a matter of theoretical construction.

As part of cultural studies, the medical humanities touch upon the issues broadly concerned with society as a whole—a fact that alone demolishes any assumptions of the speculative nature of the field’s objectives. When dealing with interdisciplinary fields, the binary of hard scientific data and the “soft” issue of the humanities is as obsolete as the binary of norm and deviance that I challenge in this thesis. As David Morris mentions in his article, narrative medicine (which I consider a part of the medical humanities) “challenges biomedicine not to reject scientific method […] but to rethink the concept of a knowledge that is neither purely objective nor purely subjective” (2008, 90). What Morris underlines is the “intersubjective” nature of the knowledge that we may arrive at. It is not hard knowledge that is inaccessible to a lay person outside of the field, nor is it soft knowledge bearing some precarious idea that everything is “relative”. It is, in fact, knowledge that appeals to anyone in society as it shows the untenability of the notion of the norm, as pathological formations are inherent in human nature and it is naïve to think that some imaginary “normal” self is immune from the human experience of guilt, anxiety, paranoia and omnipotence deemed deviant only in a certain setting. As Havi Carel writes in *Phenomenology of Illness* (2016), “vulnerability, limitation, and finitude are fundamental features of human life”
We will turn to the sociological implications of the norm in more detail in Chapter 2.3.

The medical humanities deal with stories that “depathologise madness through the invocation of the inevitability of disintegration, fragmentation, and disorder” (Baker et al. 2010, 165). Often the reader’s response to these can be symptomatic. Let us take as an example readers’ reviews of the novel *Force of Gravity* (1991) by R. S. Jones. The most common reaction can be best described by a commentary in the *Atlanta Journal & Constitution*: “In Force of Gravity, R.S. Jones chronicles a descent into madness with a wealth of details” (Jones 2009, n.p.). One problem with such an attitude is that we do not really fall from health and we do not fall into madness, as health and madness always come hand in hand: “If we are always already both healthy and ill, the fall from health to illness is not so serious” (Lewis 2000, 82). Thus, the goal is to bring awareness of the fact that such stories require an interpretation that is not biased and does not tend to label a person as mad or deviant, as you may someday find yourself in his or her shoes. I will discuss the idea of labelling and stigmatizing in Chapter 2 that deals with the theoretical framework, in Chapter 6 that uses the example of the novel *The Shock of Fall* to examine the concept of guilt as a basic human experience, and in Chapter 7 that critically approaches the normative approach applied to such novels as *Extremely Loud & Incredibly Close* and *The Curious Incident*. Moreover, all of the practical chapters address the idea of the “inevitability of disintegration” by focusing on the difference of vision and the alternativeness of being.

The approach of the medical humanities reveals the fact that ignoring the language of other-than-self reflects a rationalist social failure. Not only autobiographical accounts of mental illness but also novels written by practitioners and psychiatric nurses as well as by novelists describing psychiatric experience in a form of fiction are doing a great job in setting forward a new understanding of the Other. It might be claimed that writing about these issues requires a certain degree of personal involvement or a right to write about them. However, because pathology and deviance are simply part of being human—part of everybody’s story—such a right or involvement can be considered open to us all. On the one hand, the writer may be experiencing an illness himself or herself, as in the case of Robert Louis Stevenson suffering from a severe form of tuberculosis and creating *Treasure Island* with pirates displayed as disabled but highly masculine role models and where the able have something to learn from the disabled. Another example is Ronald Laing’s exclusion from the General Medical Council’s register for alcohol and drug abuse. His son Adrian has said: “He can solve everybody else’s problems but not our own” (Laing 2008, n.p.). On the other hand, the writer may not be experiencing physical or mental illness themselves, but aiming at humanizing the public understanding of deviance—Mark Haddon and Nathan Filer whose works are analysed in this study serve as examples of such writers.
In this study I also use the medical humanities approach to address the social awareness of otherness. The focus here is on the displays of mental illness in contemporary literature. I do not give preference either to fictionalized stories or memoirs classified by some scholars as pathographies that offer “a disquieting glimpse of what it is like to live in the absence of order and coherence” (Hawkins 1993, 2). Rather, I have chosen to examine the variety of genres ranging from postmodern literature showing the hallucinatory world haunted by anxiety, surveillance and paranoia to memoirs of lived-through schizophrenia, since this underlines how extensive and controversial the issue of deviance really is. The notion is that deviance is not something related solely to severe mental illness, true madness in the manner of Russian jurodstvo, something irrational that “normal” people have nothing to do with. It does not concern only those who compose illness narratives or those whose mode of expression is deemed unconventional and thus inhuman. In my view, deviance is integral to everybody’s life experience and, as such, the question arises as to whether it should be called deviance at all, since deviance implies a separation from the norm.

Narratives, or stories, offer a far-reaching means of challenging the norm–deviance binary. To deal with human experience is to deal with stories and, as Perri Klass notes, “every person is a story” (1992, 91). Why does narrative medicine not oppose, but rather support biomedicine? As a practitioner, Lewis Mehl-Madrona states that “we cannot treat illness without considering the lives and stories of those people suffering from those illnesses” (2007, 84). He also notes that in the conventional hierarchy the patient is typically positioned as not responsible for what is going on, not involved in the process of curing. Consequently, the problem is not understood correctly or is not comprehended at all. A prominent scholar in narrative medicine, Rita Charon, author of Narrative Medicine: Honoring the Stories of Illness (2006), explains that “people are being abandoned left and right, not because their doctors do not recognize their molecules but because they cannot apprehend their narratives” (2006, 24).

The problem with apprehending narratives is a result of the same assumption that to be meaningful a narrative should be coherent and expressed in a conventional language. As Michel Foucault notes, the experience of madness is one not liable to expression in the discourse of reason, that is, madness cannot allow “an appearance in the order of reason” (Foucault 1988, 107) because in this case it will not represent its true nature anymore (although, I should remark, Foucault was criticized himself by such philosophers as Derrida and Baudrillard, who noted that Foucault while writing a history of madness uses the language of reason, thus being trapped in the metaphysical closure, the meaning of which I will discuss later in the theoretical chapter [Derrida 2005; Baudrillard 2007]). It may be hard for the public to realize that one actually fights to present a coherent image of oneself, and such a fight would be of concern to anybody if they had to build such an authentic image themselves. What haunts madness in the discourse of reason is the “unsayability”
of the experience. It is communicable only within the discourse of madness, in the
corresponding language that is dubbed nonsense in the discourse of reason.
Narrative medicine is attentive to the capability of this kind of language to reveal
the true nature of experience. I examine the challenges of language and the
problems it poses for expressing one’s self in a narrative in more detail in Chapter
3. In the same chapter, I also discuss the interrelation between genius and madness,
the search for “the other of language”, to use Derrida’s words, that is adequate for
expressing personal experience.

It is not just the conventional means of expression that pose challenges to the
narrative approach in dealing with norm and deviance. Telling a story implies
positioning oneself in a certain discourse and certain social circumstances. To arrive
at a recognizable and integrated self usually means to be allowed to participate in
social communication. “To be allowed” to do it, in its turn, means to engage in the
tacit agreement that implies that, first, one possesses a unified self that one holds
control of and, second, that one constructs one’s story according to the accepted
narrative rules. I will turn to the “unified self” in my later discussion of the
challenges posed by the definitions of norm and deviance (Chapters 2.2.2; 2.3.2),
since the notion of unity is traditionally associated with the “healthy norm” while
disintegration is thought to be the quality of the mad.

The “narrative rules” are something that haunts stories of illness by specifying
requirements for language and structure. Dwight Fee, the editor of the collection of
essays Pathology and the Postmodern: Mental Illness as Discourse and Experience (2000),
gives a good example of this in his article on Wurtzel’s Prozac Nation. Fee argues
that the experience of depression and the way it is told in the novel is highly
dependent on the discourse about depression. Fee implies that the manner in which
the experience is presented is mediated because the embodiment of depression
“brings matters of language and social construction into the heart of felt
experience” (Fee 2000, 76). Language is defined by the systems that are widely
available to the public—mass media, the DSM, and illness narratives—and is
constructed in compliance with those systems. Thus, Prozac Nation appears to be a
constitutive part of the system. The main concern here is how depression or any
other disorder comes to be interpreted by means of the discourse of reason—the
very means that Foucault opposed. As Fee concludes, the discourse of diagnostic
classification guarantees a kind of “noncommunication” (2000, 95). This example is
relevant in showing that telling a coherent story in a conventional language does
not always reflect the experience as it is—unbiased and non-smartened. It is often
more important to pay attention to the voice telling story in his or her own
language or using different means of expression, including art or graphic
supplements, as present in Cockburn’s and Filer’s texts.

The requirements concerning structure can be dangerous as well. The danger
lies in the fact that a requirement for a coherent structure and a “happy ending”
might discourage people from narrating their experiences just because they cannot
do it coherently or they have not been cured. G. Thomas Couser noted that the happy ending is one of the “powerful conventions” of illness memoir (2012, 44). It is understandable, he continues, that people wish to tell and read reassuring narratives, and he gives the reason for this: “We dislike telling stories that turn out badly for us. It may be ‘human’ to do so” (ibid., 45). Mitchell and Snyder also note that one of the requirements of a schematic narrative of deviance is that “the remainder of the story rehabilitates or fixes the deviance in some manner” and that “the repair of deviance” should “involve an obliteration of the difference through a ‘cure’” (2001, 53). The idea that “unhappy” stories are human is significant—it points to the vulnerability of a person, to the fact that illnesses are not necessarily cured. Couser writes that the requirement of the happy ending is “troubling” because it leaves behind those narrators and readers “whose conditions are not cured” and whose experiences are, nevertheless, “worth narrating” (2012, 45). In order to escape the trap of misrepresenting experiences of mental illness and deviance, this study interprets the chosen narratives as lacking a single closure. In other words, there is no end (either happy or sad) to the stories presented in the novels and memoirs discussed in this study, and no ultimate “cure” for the protagonist—either because the difference is not meant to be “cured” (as demonstrated in Chapter 7) or because mental illness is not curable completely (as demonstrated in Chapters 4-6).

The reason I speak here about “narrative rules” and power discourse is that the way of constructing a kind of “proper” narrative identity functions as a criterion for normality. Charlotte Linde mentions that “in order to exist in the social world with a comfortable sense of being a good, socially proper, and stable person, an individual needs to have a coherent, acceptable, and constantly revised life story” (1993, 3). Those systems that Fee mentioned, or the “cultural devices” in Linde’s terms, turn a totally “improper” experience into one that can be shared and that remains at the same time socially acceptable. John Shotter also mentions the importance of social acceptability: “What we talk of as our experience of our reality is constituted for us largely by the already established ways in which we must talk in our attempts to account for ourselves—and for it—to the others around us” (1993, 141; original emphasis). Those established ways, in fact, constitute the legitimate discourse that keeps at bay everything that does not fit—everything that is incoherent and unconventional, everything that one, perhaps, cannot grasp at once, everything that demands time and effort to decipher. At a medical humanities conference in Exeter, England, a scholar mentioned an idea that has remained etched in my memory: “You cannot just not have a leg”, she said. “You should have some pretty little narrative why you don’t have a leg”. It reminds me now of what Dwight Fee called “a period of ubiquitous verbalization” (2000, 95), in spite of which or due to which we are still faced with the “noncommunication” of experience. To use Foucault’s terms, we are faced with the “broken dialogue”
between human experience and the language in which it is told, as the language of psychiatry leaves us with just “a monologue of reason about madness” (1988, 21).

In the next section, I provide a literary review that is comprised of texts that differ in genre and perspective and that address the issue of mental illness. In the review I refer to the texts that have formed a context for the contemporary literary narratives that are discussed in detail in the study. I first discuss autobiographical narratives, which provides a useful background for my analysis of Henry’s Demons in Chapter 5. In the section on fiction, I address novels that deal with normalizing attitudes, guilt and trauma, important for the novels discussed in Chapters 6 and 7. The last section addressing the metaphors of madness and transgression in postmodern narratives provides the literary context for Will Self’s texts to be analysed in Chapter 4.

1.3 LITERARY CONTEXT

Literary narratives present a great opportunity to unravel the myths of norm and deviance, and the binaries of sanity and madness. Literature appears to “reflect a greater awareness and understanding” of human experiences than “historical medical attitudes” (Rieger 1994, 13). Rieger refers to the madness theme in literature as the “Dionysian element” (ibid.) that opens the reader’s eyes to what has been thought as fearful and “other”. Beveridge also grants literary narratives the ability of giving the reader a variety of perspectives, which is especially applicable to illness narratives: he quotes T.S. Eliot, who observed that “we read many books, because we cannot know enough people” (qtd. in Beveridge 2009, 3). I would add that we cannot know enough about people because attaining the other’s point of view is a tough task. Narratives of mental illness are versatile and make boundaries flexible in many ways. First, they reveal the fact that the boundary between those who “have the right” to write about mental illness and who have not is extremely flexible. Second, the scope of motivation for those who need to read about it and those who do not is flexible as well. The former problem is concerned with the possibility of different approaches to mental illness, its context and origin. To answer it, this study deals with different kinds of mental illness narratives including autobiographical and fictional ones, postmodern narratives and those written by caregivers of a person with mental illness or by authors who are in touch with the medical profession. The latter problem points to the less rigid limit of what the reader can identify or empathize with in a narrative. As the notion of mental illness ceases to occupy solely clinical discourse, it stops designating irrational forces that are unsettling for a “normal” identity and acquires new meanings and functions in the literary field. The contemporary works analysed in this study are standing on the shoulders of giants in various ways: autobiographical pieces refer not only to scientific knowledge that has changed psychiatry and its ways of treating disorders over the years, but also to earlier literary writing. The latter
demonstrates the relevance of literary accounts of the experience of mental illness. Likewise, fictional works refer to actual mental illnesses to show how they affect societal attitudes towards the “others” or, in the case of postmodern texts dealing with metaphors, become a symbol for the societal condition per se.

1.3.1 Autobiographies of Mental Illness

One of “the most written-about documents in all psychiatric literature”, as Dinnage observes, is Daniel Paul Schreber’s Memoirs of My Nervous Illness (1903): “Everyone has had something to say about Schreber”, she continues (2000, 11). Sass grants Schreber the title of the prototype, saying that he is “a paranoid schizophrenic who is perhaps the prototypical madman of modern psychiatry” (1997, 210), while Pendergast refers to him as a “model schizophrenic” (2008, 57). Schreber became a model, indeed, for such thinkers as Freud, Deleuze and Guattari, even though their approaches to his figure vary greatly. While Freud, reluctant to treat psychotic patients with psychoanalysis, assigned Schreber with repressed homosexuality, Deleuze and Guattari claimed that Freud retained not a word from the original text, since Schreber would resist being Oedipalized (1987, 57). Other scholars note that Freud seems to concentrate on Schreber’s delusion of being transformed into a woman and overlooks his obsession with religion (Woods 2011). Schreber himself writes that he would like the religious aspects of his experience to be scientifically investigated (1955, 35).

Schreber is an exceptional schizophrenic individual of his time, if only because he managed to publish the manuscript he had written while in an asylum. Published in 1903, his Memoirs were a sensation as he managed to critically observe the “phenomena of which he [was] the center” (Lacan 1997, 233). Thus, Schreber’s account not only becomes a model for Deleuze and Guattari’s theory of a schizophrenic hero, along with Artaud, but also a motivation for those hesitant to share their stories. Being a respectable and highly educated person and a judge, Schreber insisted on publishing his work, not embarrassed by any consequences the publishing may entail. In the preface, Schreber admits that his experiences can hardly be “expressed in human language” as “they exceed human understanding” and remain a mystery (1955, 41), yet he tracks them down and that serves as an inspiration for those who find language an imperfect mediator. Schreber’s sincere account of his experiencing a revelation and sublime order of the world (ibid., 86) is in line with Sass’s description of the schizophrenic feeling of grandeur (1994) and is also important to the discussion of autobiographical and postmodern narratives in the present study.

Another early account of experiencing mental illness is Charlotte Gilman’s “The Yellow Wallpaper”. Published in 1892, the semi-autobiographical short story is still a valuable account of a woman’s encounter with the rest cure that figures as a part of the dominant medical discourse. The work is relevant to this study as it
highlights the important role of personal narratives in diagnosing and recovering from a disorder. The story does this in different ways: firstly, the woman keeps a journal as she feels that her writing is the only way to express what she feels and make her voice heard since her husband-doctor does not approve of either her writing or thinking about her condition; secondly, the husband’s reluctance to listen to what she has to say proves to be fatal to both of them; thirdly, Gilman’s own unfortunate experience of the rest cure inspired her to write a story that questions the medical policy of her time and the madwoman-in-the-attic approach to women in general. The end of the story is as metaphorical as it is ambiguous: though the woman descends into madness, she finds it liberating—an idea that refers to madness not as regressive but as an illuminating experience. As Penrose, a psychiatrist in Ballard’s Super-Cannes (2001), will state some 100 years later, “in a totally sane society, madness is the only freedom. Our latent psychopathy is […] a place of refuge for the endangered mind” (2001, ch. 29). While writing is presented as a place of refuge in the story, madness appears to be the only way for the woman to change perspectives and see her own pathetic position.1

It is relevant to note that autobiographical accounts of mental illness have quite a long history. Sylvia Plath’s and Susanna Kaysen’s texts are often brought into focus when narratives of madness are discussed.2 I will present a short outline of the history here, since these accounts (both collaborative and individual) will provide a basis for the analysis of Cockburns’ family memoir.

It is necessary to note that Sylvia Plath’s The Bell Jar paved the way for a substantial number of memoirs of mental illness. First published in 1963, it has become one of the most often mentioned autobiographical novels. Esther’s main source of anxiety appears to be the discrepancy between her wish to pursue an academic or poet’s career and societal expectations. Her friend, Buddy Willard, complicates the situation by saying in a “sinister, knowing way” that after she had children, she would “feel differently”, “wouldn’t want to write poems any more” (Plath 2008, ch. 7). This causes Esther to see marriage as brainwashing and enslaving for the woman. Moreover, he adds: “I wonder who you’ll marry now, Esther. Now you’ve been […] here” (ibid., ch. 20). Sylvia-Esther’s anxiety and lack of confidence about the future is not unknown to other memoirists. Lori Schiller, in The Quiet Room (1996), makes a direct reference to Plath: “We’re reading The Bell Jar in English. I absolutely hate it! […] The symptoms of the crack-upped Sylvia Plath-Esther Greenwood are me” (1996, ch. 2; original emphasis). Elizabeth Wurtzel also wonders if she might be one of those people “like Anne Sexton or Sylvia Plath who are just better off dead” and if she “too will die young and sad, a corpse with her head in

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1 For a discussion of how the gothic story reflects women’s desire to reassert self-autonomy and agency see, e.g., Murillo (2013). In Grace (2014), the short story is placed in the context of other 19th-21st century key texts that tackle the issues of gender, consciousness and transgression.

2 See, e.g., Ylä-Kapee (2014) and, for a discussion on how Kaysen’s autobiography and her use of real documents help to challenge the system of diagnosing, Adams (2005).
the oven” (1994, “I Hate Myself and I Want to Die”)—the latter remark obviously referring to Plath, who committed suicide in this way. Like Plath, Elyn Saks writes a great deal about the stigma of schizophrenia diagnosis in her medical record that haunted her academic career. In her memoir, Susanna Kaysen remarks that Plath spent some time at the McLean psychiatric hospital—the same one where Kaysen was kept. Like Plath, Kaysen was institutionalized after a pill overdose that was regarded by psychiatrists as a suicide attempt.

Kaysen tells her story in the memoir *Girl, Interrupted* (1993). On its becoming a bestseller, the memoir was adapted into a Columbia Pictures movie. It is noteworthy that while Kaysen had been sent to an asylum in 1967 for 18 months, she published the memoir more than 20 years later. Moreover, she writes that she “didn’t read them [the features of the borderline personality disorder she had been diagnosed with] until twenty-five years later” (2013, n.p.). The memoir *Henry’s Demons* discussed in this study differs radically in this sense: the memoir was published in 2011, right after Henry was well enough to leave hospital. On the one hand, such distancing helps Kaysen to provide the reader with a vast and detailed picture of the asylum community and make her narrative smooth and coherent. Kaysen describes both the patients and the staff, describing Polly, who set herself on fire and then was diagnosed with schizophrenia (a story that reminds us of Anna, as told by David Reed in the book of the same name) or detailing the appearance and behaviour of Valerie, an easy-going nurse. Kaysen also managed to obtain her own medical file from the asylum and supplied her memoir with scanned copies of her progress notes and case reports. In a similar vein, Nathan Filer supplies his novel *The Shock of the Fall*, also analysed in this study, with actual nurses’ notes. On the other hand, such distancing gives rise to some questioning concerning the authenticity of the memoir and its status: is it a memoir per se, or rather a fictionalized account with neatly written dialogues (such dialogues are also part of the mother’s diary in *Henry’s Demons* and a matter of suspicion in my analysis of it)? Nonetheless, Kaysen’s work provides a valuable critique of the diagnostic system in the 1960s: the so-called symptoms of BPD assigned to her include such examples as “instability of self-image” or “uncertainty about career choice”, which, in her push-back, she calls a “good description of adolescence” (ibid.).

Lori Schiller’s memoir *The Quiet Room*, published in 1994, is a collaborative work similar to *Henry’s Demons*. The accounts of Lori’s parents, close friends and herself are juxtaposed with hospital records also present in the text. Moreover, the memoir contains extracts of Lori’s diary written at the moments of acute psychosis, which makes them highly valuable as they offer the greatest possible immediacy. Lori’s psychiatrist makes a statement in the foreword that sums up the overall impact of the memoir on understanding mental illness: she writes “it is a story not just of mental illness, but of a human being” (Schiller 1996, foreword). For example, Lori

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3 On the inspirational nature of the memoir, see Carey 2011.
tells a lot about the nature of the voices she hears: “I didn’t know they [the voices] were in my brain. I heard them coming at me from the outside. […] Occasionally they were friendly, but mostly they reviled me, shouting in their hoarse, harsh tones” (1996, ch. 3). It is noteworthy that Lori’s depiction of the voices is in line with Henry’s, and she perceives them as absolutely real, i.e., not as hallucinations, as also he does. The same can be said about the voices Elyn Saks describes in her memoir The Centre Cannot Hold (2007): “I was receiving commands to do things. […] In my mind, they were issued by some sort of beings” (2007, ch. 6). This helps to make some generalizations concerning the nature of the voices in schizophrenia: in this study, I juxtapose clinical findings about voices with information gained from narratives. The main point of convergence for the two approaches is the origin of the voices: as Lori realized, “it was just [her] own hostile thoughts getting blown out of proportion inside [her] brain” (1996, ch. 24); Saks was told that she was talking about “threatening and scary ideas, because [she felt] threatened and scared” herself (2007, ch. 14)—the same conclusion that Patrick, Henry’s father, has come to.

Another best-selling memoir turned into a movie is Elizabeth Wurtzel’s Prozac Nation, published in 1994 when the author was 26. Wurtzel provides details not only of her own family but also makes an overview of the social and cultural background of the 1960s-1990s with references to musicians such as Bruce Springsteen and Kurt Cobain, writers such as Ernest Hemingway, and different literary works. The saturation of Wurtzel’s memoir with cultural issues and media is crucial for her own understanding of depression, or rather lack of understanding. At the end of the memoir, Wurtzel challenges the attempts of the media to make depression a “mainstream” malady of the generation with its origin in Cobain’s suicide in 1994. She writes that “by the time he was alone in his garage apartment with a shotgun in his hand […] his actions were far beyond any kind of cultural momentum we can associate with the times. Sylvia Plath killed herself in 1963, before there were slackers and before there were even hippies” (1994, “Epilogue: Prozac Nation”). Despite Wurtzel’s point that everyone’s story is “absolutely and completely his own” (ibid.), Dwight Fee writes that Wurtzel seems to have difficulties with her own identity as a depressed person because she might fail to recognize herself as not depressed (2000, 84). Wurtzel learns a lot about depression, but her knowledge is that of a lay person who knows what is “commonly recognized” as depression and that its meaning is “derived from engagements with intermixing elements of abstract systems—mass media, therapy, psychopharmacology, DSM-IV”, etc. (ibid., 85-86). Mainstream approaches to depression or other disorders tend to present a collective image or even a pattern that informs general representations of disorders in society. Thus, the crucial issues of labelling, definition and self-definition are raised there; in this study, I develop the idea of the embarrassment that occurs when different terms or diagnoses are
confused with each other or acquire various symbolic meanings under the influence of media.

William Styron’s account of depression in his memoir *Darkness Visible* (1990) provides an insight into the eeriest side of clinical depression that stands out against the lay representation of depression as distemper. Styron spent about seven weeks in hospital following a long period during which his doctors tried to select the right antidepressant for him. Styron refers to the experience of “severe depression” as “unimaginable” and “indescribable” to the extent that “healthy people” are unable to “imagine a form of torment so alien to everyday experience” (2010, ch. 1). Styron also points to one of the most important features of clinical depression that obviously differentiates it from distemper or sadness: he writes that the “faith in deliverance” or “ultimate restoration” is absent in depression, “the foreknowledge that no remedy will come” makes the condition “intolerable” (ibid., ch. 6). In this study, I refer to Styron’s definition of clinical depression while discussing the ambiguity of language that manifests itself when the names of the diagnoses are used mindlessly or out of context. While speaking about the possible causes of his depression (among which are genealogy, alcohol consumption or withdrawal from it, trauma of his mother’s early death, his turning sixty, dissatisfaction with work, etc.), Styron writes that a lot of people endure the equivalent of trauma without being severely depressed, and that to find the actual cause “one must search beyond the manifest crisis” (ibid., ch. 4). Cologne-Brookes’s critical study (2014) provides a useful reflection on Styron’s contribution to both autobiographical and fictional publications.

Mary Barnes’s autobiographical account differs from the ones discussed above, since it provides a vivid picture of Laingian therapy in practice. The book is called *Mary Barnes: Two Accounts of a Journey Through Madness* (1982) and presents a collaborative work as it is supplied with Joseph Berke’s story, Mary’s main psychiatrist. The Laingian theory is often considered controversial, yet innovative and is much referred to. Laing still remains a cult figure, with the 2017 movie *Mad to be Normal* featuring David Tennant dedicated to him. Elyn Saks makes a small reference to a former patient of Laing who told her stories “of the LSD parties Laing used to stage in the woods for his patients” (2007, ch. 8). The Laingian therapy as it is represented in *Henry’s Demons* is discussed in more detail in Chapter 5. As far as Barnes is concerned, in an essay Felix Guattari characterizes her as a woman who “took quite literally Laing’s recommendation of a ‘journey’ into madness” (1984b, 52); it is noteworthy that the journey must take place at the community house in Kingsley Hall as it would be impossible at a usual hospital. Presented by Laing as a

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4 See Orbach (2003) for the discussion of mental pain and negative emotions in the book; see Cusack (1991) for the review.

5 An interesting parallel to the Laingian usage of drugs in treatment can be found in Toni Davidson’s postmodern novel *Scar Culture* (2000), which questions traditional ways of psychotherapy, as well as the figure of the therapist.
healing experience, Barnes’s journey was one of regression to infancy, “a most profound emotional death-rebirth experience” (Barnes and Berke 1982, 89). One of its significant manifestations is that she became extremely dependent on Laing and Berke: “Mary, I’m going out today. A bomb has fallen. I’m shattered. Everything has gone. I’m away, stuck, can’t move” (ibid., 121). Eventually Mary manages to reveal herself in painting: as Laing said in his sophisticated manner, “in her painting Mary puts outside herself […] what is inside her. […] For want of a better word, we call it the ‘inside.’ But it’s an inside we are forever on the outside of. […] All our words are misleading” (ibid., 327; emphasis added).

Berke’s account is no less valuable as a representative of the Laingian approach. He writes that he was influenced by a doctor who tried “to observe another person from his or her social and experiential reference points” and did not “prejudge peculiar behavior as ‘sick’” (ibid., 84-85). Berke realizes that “unintelligibility” is the problem of the practitioner rather than the patient:

*During my clinical years, it became clear to me that most psychiatrists are not only not experts in communication, but are not at all interested in what their patients have to tell them. The concept of ‘unintelligibility’ is therefore a clever ploy for masking the true nature of their operations. Quite simply many psychiatrists attribute their own non-attempts at communication to someone else, usually a patient or a prospective patient, while, at the same time, denying that this is what they are doing. […] Should the patient still try to comment on what he thinks is going on, his ‘productions’ are passed off as ‘unintelligible.’ (ibid., 85)*

Berke sees Laing’s achievement as being that he confirmed that it is possible to come to terms with people dubbed unintelligible. He highlights how the atmosphere of the Kingsley Hall succeeded in changing the interface and challenging the hierarchy between patients and practitioners. He recalls that the observations the outsiders made regarding who was who were wrong “nine times out of ten”: “I can’t count how many times Mary was seen as the chief nursing sister. […] Great waves of embarrassment always broke across the face of a visitor after he learned that the ‘poor crazy’ he had chatted up was Dr Laing or Dr Berke” (ibid., 246).

The autobiographical works reviewed in this section present an invaluable backbone for this study and for the study of the experience of mental illnesses in general. My analysis of the Cockburns’ collaborative memoir in Chapter 5 problematizes the way the narrators’ agency and identities are constructed and expressed. Unlike Schiller’s memoir where Lori authors the majority of the chapters herself, the Cockburns’ memoir raises questions concerning the actual authorship, or rather, amount of editorial work done by the father. Thus, the memoir is noteworthy not only due to the family’s account of coping with schizophrenia, but

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6 For a more recent discussion of the therapeutic potential of regression see Berke (2010).
also due to the discourse of power and authority it might find itself to be involved in.

1.3.2 Mental Illness in Fiction/Non-Fiction

One of the most prominent novels on psychiatric disorders is Ken Kesey’s *One Flew Over the Cuckoo’s Nest*. Although fictional, Kesey’s story is based on his experience of working at a mental health facility.\(^7\) Written in 1962, Kesey’s novel deals with similar issues of authority and the disciplinary power of a mental hospital emphasized by anti-psychiatrists and mentioned in Barnes and Berke’s memoir. Kesey speaks about the crucial role of society in defining mental disorder: illustrating the notion of a therapeutic community, he claims that “society is what decides who’s sane and who isn’t, so you got to measure up” (1976, 47). This claim is reminiscent of Berke’s reflection on mental illness, which he considers a consequence of a “disturbance in a whole field of social relationships” (Barnes and Berke 1982, 83), and Laing’s idea that “authority should not be imposed from without” (ibid., 254). Kesey presents a number of features, such as Chief’s idea that a large mechanism controls society or the Big Nurse’s authoritative and inhuman attitude towards patients and staff, which serve as the metaphors illustrating Foucauldian disciplinary society and the notion of “internalized control” discussed in more detail in Chapter 4 dealing with schizophrenia and the postmodern. Moreover, Kesey’s depiction of the ward “provides powerful counterpoints to their respective cultures’ normalizing Truths about the construction of deviance” (Mitchell and Snyder 2001, 50). This study provides the analysis of such a construction of deviance in the contemporary literature of the late 20th-early 21st centuries.

Kesey’s depiction of the unethical use of electroconvulsive therapy, lobotomy and the abuse of power in general is reminiscent of other irresponsible acts carried out on the “deviant” or mentally disabled presented in fiction. One such example is Daniel Keyes’s short story *Flowers for Algernon* (1959) later turned into the novel of the same name (1966). Keyes had no medical education, but he had the experience of teaching English to students with low IQ. In the text he applies the narrative strategy of using progress reports that are part of medical discourse. Keyes is also the author of the novelized biography *The Minds of Billy Milligan* (1981) that pictures a person with multiple identity disorder and provides profound insight into this traumatic split.\(^8\) Although Keyes claims that the story of Charlie in *Flowers for Algernon* is not based on a real person (2004), he met students who tried hard to

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\(^7\) See the chapter on the novel in Barbara Lupack’s *Insanity as Redemption in Contemporary American Fiction* (1995).

\(^8\) Another example of a non-fictional account of the disorder is Flora Rheta Schreiber’s *Sybil: The True Story of a Woman Possessed by 16 Separate Personalities* (1973). On Sybil, multiple identity disorder and its difference from schizophrenia, dissociation and trauma, doppelgangers and split identity in American fiction (including Palahniuk) see Schwarz (2014).
“get smart” (ibid., n.p.) and, thus, be “normal”. This is precisely what Charlie wishes for: “With three times my I.Q. of 68, then maybe I’ll be like everyone else and people will like me and be friendly” (ibid., n.p.). However, when Charlie gets smart he is still rejected by society, since he seems unnatural and, therefore, not “normal”: “Who knows what you done to yourself to get so smart all of a sudden” (ibid., n.p.). What was actually done to Charlie was an experiment that had been carried out only on mice before. Charlie’s doctors conducting the experiment speak in a stereotypical way about people with mental disabilities, claiming that they are “hostile and uncooperative”, “dull, apathetic” (ibid., n.p.) and in general unmotivated. The ethical issues raised in Flowers for Algernon can be traced to those discussed in Shelley’s Frankenstein, where the creature is rejected and is not even given a name.

Another example of carrying out unethical therapies can be found in Burgess’s A Clockwork Orange. Although Alex is not labelled mentally ill in the novel, he is obviously “deviant”. The Ludovico technique applied to Alex becomes a means that the authorities use to suppress Alex’s violent impulses and turn him into a Foucauldian “docile body” (Foucault, 1977). While Burgess’s novel is fiction, Anne Collins writes about a real experiment of disorganizing patients’ habitual behaviour patterns to the extent that “they had no defense against the new patterns [Ewen Cameron] wanted to implant” (1988, 170). In her book, Collins writes about Ewen Cameron and his unethical secret treatment of patients with schizophrenia. For Cameron “the imperative to treat […] far outweighed the basic ethical principle of primum non nocere—first of all, do no harm” (70). In order to launch the “depatterning” process, apart from the extreme use of ECT and even LSD, Cameron used a “sleep cocktail” (consisting of strong medications) to cause the patients to sleep and played audio tapes that sent negative or positive messages to the patients’ minds for up to sixteen hours in a row (160). This therapy is reminiscent of the Ludovico therapy, which was concerned with messages and impulses transmitted to the patient Alex’s mind. While Alex’s will is eventually suppressed by the therapy, albeit temporarily, the efficacy of Cameron’s treatment is unsupported (127). The therapy was aimed at brainwashing and breaking down the individual (130), depriving him of memory and individual behavioural patterns and, eventually, submitting to mind control. Similar to the Flowers for Algernon, the unethical in this non-fictional account resides mainly in the fact of assuming the right to conduct experiments (CIA funded ones, as Collins claims) on the most vulnerable individuals who seem to either lack understanding of what is being done or to be unable to resist the authority.10

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9 See Ullyatt (2015) for a discussion on the experiment and Charlie’s position of a “wounded storyteller”.
10 See David Seed’s book Brainwashing: The Fictions of Mind Control (2013) for a discussion of both Burgess’s text and Cameron’s practices.
Guilt and trauma are frequent topics treated in fictional accounts of mental disorders. Judith Guest’s 1976 novel *Ordinary People* tells a story of a family that copes with a loss—each member of the family in his or her own way, to the best of their ability. Similarly to *The Shock of the Fall* that I explore in Chapter 6 of this study, the loss in *Ordinary People* is concerned with the tragic death of the older son in the family. While in the former novel Matthew develops schizophrenia as a reaction to his feeling guilty for his brother’s death, Conrad in the latter novel is depressed and attempts suicide. The months of treatment in the asylum are not pictured in the novel, yet the reader follows Conrad’s discussions with his rather unconventional psychiatrist who eventually helps him to realize what the essence of his feeling of guilt is. Conrad feels that it is unjust that he survived while his brother, who he considers to be perfect, dies in a sailing accident: “I need something, I want something […] for killing him, don’t you know that? For letting him drown!” (Guest 1982, ch. 27). Berger, the psychiatrist, puts it clearly: “Listen, you know what you did? You hung on, kiddo. That’s it. That’s your guilt” (ibid.). Conrad’s feeling of guilt and being imperfect is complicated by his mother’s inability to empathize with him. On the one hand, she feels awkward because of his being institutionalized and later seeing a psychiatrist: she scolds her husband for talking it over with their friends, as if these issues are shameful and stigmatizing. On the other hand, Conrad feels that she hates him even for covering her rug with blood rather than being empathetic. Whereas the mother’s behaviour can be explained as defensive, Conrad realizes that “not a house circumspectly clean […], not power or knowledge, or goodness—not anything—cleared you through the terrifying office of chance; that it is chance and not perfection that rules the world” (ch. 11). Berger explains to him the notion of chance by saying that Conrad’s only guilt is that he hung on to the boat, and this is what helps him to come to terms with his guilt by the end of the novel, while his mother chooses to leave her family, unable to resolve the situation.

Although fictional, Guest’s novel provides a notable perspective on depression: the psychiatrist manages to show Conrad that he tries to suppress his feelings but “feeling is not selective”, he says, “you can’t feel pain, you aren’t gonna feel anything else, either” (ch. 27). He makes Conrad think about why he chose to cut his wrists if his mere intention was to die, as he claims: “No. You do not slash yourself in a dozen places if you are merely trying to die. Nor do you overlook the full bottle of Valium beside the razor blades in the medicine chest. […] Oh, God, *why then?*” (ch. 26; original emphasis). Berger explains the meaning of depression to him in a clear way and, thus, answers the question why: “Geez, if I could get through to you, kiddo, that depression is not sobbing and crying and giving vent, it is plain and simple *reduction of feeling*. Reduction, see? Of all feeling” (ch. 27; original emphasis). This definition of depression is in line with Styron’s autobiographical account of the disorder and lends support to my argument that the misleadingness of language

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renders the identification of the essence of some mental disorders extremely inaccurate.

Another fictional account of experiencing trauma is Patrick McGrath’s 2008 novel *Trauma.* McGrath is well known for his “obsessive depictions of psychic disintegration and cosmic horror” (Mackenzie n.p.) and novels that are concerned with mental illness, such as *Spider* (1990) or *Asylum* (1996) (on the gothic and transgressive elements of these novels, see Zlosnik 2011). McGrath’s father was a psychiatrist at the Broadmoor mental hospital so he grew up seeing “psychiatrists sitting around the dinner table discussing psychology” (ibid.) and, after graduation from college, worked for a brief period as an orderly. McGrath explains his literary interests as follows:

*A ruin is more interesting than a sound structure; a jungle more interesting than a garden; crime is more interesting than law. And decadence is more interesting than virtue. [...] My people all feel too much, so much it drives them mad. And what I like to do is to observe the breakdown of people whose emotions cannot be assimilated into the realities they occupy. They have no proper outlet for their feeling. If they did they might have been saved.* (ibid.)

*Trauma* is told from the psychiatrist’s perspective and deals with post-traumatic stress disorder: it is known that McGrath’s father experienced war and seeing soldiers with wounded bodies as well as minds added to his desire to become a psychiatrist. It is likely that this experience is the source of the ethical aspects of the novel that lay bare the essence of the war as an “insane slaughter” (McGrath 2008, ch. 3) that traumatizes people and deprives them of humanity. Charlie, the protagonist, comes from a dysfunctional family and feels depressed after his mother’s death. He knows that his mother loved his older brother-painter more saying that “anyone can be a psychiatrist” but “it takes talent to be an artist” (ch. 1), yet the feeling of guilt for something he does not realize gnaws him. A suicide of the soldier, Danny, who came back traumatized from the war in Vietnam leads Charlie to a more severe depression. Charlie believes that he is guilty for the suicide and it ruins his marriage, as Danny was his wife’s brother. It is not before another psychiatrist notes Charlie’s weird condition that he realizes his own suppressed trauma: “It’s very possible”, the psychiatrist said, “that the real trauma lies elsewhere. It might be very deep. And I think Danny’s just a screen” (ch. 17). It turns out that seeing Danny who had shot himself in the head reminds Charlie of the episode from his childhood when his mother put a gun to his head but misfired.

As a result, the novel treats the notions of trauma and guilt from various perspectives. One of them focuses on war veterans and the diagnosis of PTSD, little heard of at that time. Charlie says that in his practice he “gave special emphasis to

\[12\] For a discussion on the representation of trauma as the “unspeakable”, see Kerler’s article “Trauma and the (Im)Possibility of Representation” (2013).
the creation of the trauma story, the detailed narrative of the emotion, the context and the meaning of trauma” (ch. 10). In general, the approach McGrath describes is highly psychoanalytical as Charlie tries to “assimilate” (ch. 5) the trauma story into the conscious memory, so that there are no displacements. This appears to be more difficult than he had expected: Danny kills himself right after the attempt to articulate his memories and Charlie himself realizes that in his dreams he substituted the image of the mother with a gun for that of the father. In the novel, Charlie states the idea that concerns all narratives and their untranslatability, as discussed in this study: “We see nobody clearly. We see only the ghosts of absent others, and mistake for reality the fictions we construct from blueprints drawn up in early childhood” (ch. 12). PTSD is described in much detail, emphasizing the suppression of all emotions and feeling already dead: “‘I never expected to get home alive,’ [one of the soldiers] said, ‘I never wanted to.’ There was a silence. He heaved a sigh, blew out some air. ‘Fuck, I never did’” (Ch. 11). Another perspective on trauma in the novel is more general and not linked to war directly. One of Charlie’s patients also attempts suicide after accidently running someone over with their car. Similarly to Matthew from The Shock of the Fall, he imagines speaking to the person he hit: “‘Oh sure,’ he said. ‘I talk to the dead guy, you know. In my thoughts. I ask him what more I can do. […] ‘Joe, do you ever see him?’ I knew at once that he did” (ch. 15). Charlie himself is emotionally withdrawn, being often referred to as “cold”. He says that “it is the mothers who propel most of us into psychiatry”, yet till the very end he does not realize that his interest in PTSD is triggered by his own unresolved suppressed conflict with the mother.

The image of a psychiatrist is prominent in Alastair Campbell’s 2008 novel All in the Mind. Martin Sturrock tries to help several patients, among them a burns victim, an alcoholic, a boy with depression and a rape victim. During these sessions Sturrock frequently feels that he is stuck with the patient and cannot provide them with any help. Campbell’s definition of depression is as notable as Berger’s in Ordinary People. One of Sturrock’s patients, David, says in his funeral speech that Sturrock helped him to understand his disorder: “Before he died, he sent me a message saying nobody described better than I did ‘what this is like’. That’s when I knew. […] He got depressed too. Really depressed. Being depressed is not the same as being fed up or a bit hacked off with life. Being depressed is when you can’t face the day” (Campbell 2009, “The Funeral”). It turns out that David, the patient, has managed to put into words the condition that was familiar to Sturrock, the psychiatrist, but that he has tried to suppress being unable to articulate it properly: “There had been several moments when he wanted to tell David that he experienced something very similar, but he had learned how to hide it” (ch. 5). The dramatic consequences of the hierarchy of relationship, challenged by the Laingian approach, are exposed there: “I sometimes had an inkling it was a fellow sufferer not a doctor speaking, but it wasn’t my place to ask. I wish I had” (ibid.; emphasis added). Sturrock himself knows about the problems he faced, yet does not tell
anyone as it would “run counter to the guidelines for psychiatrists” (ch. 1) and tries to cope with the depression himself. Before committing suicide Sturrock tries to reach David on the phone, as he thought “David was the only one who would understand and be able to help” (ch. 36). Feeling it too late to reverse the hierarchy, he just texts David: “I have never known anyone better describe how this feels” (ibid., original emphasis). This reminds us of Underwood’s claim in Theodore Dalrymple’s So Little Done: The Testament of a Serial Killer (1995): “It is well-known that psychiatrists are not the most balanced of people themselves, yet they presume to judge the sanity of others” (2012, ch. 3). Although a generalization, the claim reflects the complex nature of the profession and the hierarchy it engages with. Moreover, it reminds us once again that no one is immune to mental illness.

The fictional accounts mentioned in this section are not written by medical professionals or based on real individuals (except Milligan and Sybil). However, these accounts touch upon such relevant issues as power and authority in mental health facilities, the ethics of conducting experiments upon people with disabilities, caretakers’ attitudes towards relatives with mental illness, the position of the psychiatrist in the practitioner-patient relationship, the role of trauma and guilt in developing mental conditions, and attitudes towards the experience of mental illness and the stigma attached to it in society at large. To respond to these issues, in this study I analyse the fictional text The Shock of the Fall by Nathan Filer who has experience working as a psychiatric nurse, and The Curious Incident, the first adult novel by Mark Haddon, who focuses on picturing human emotions and experiences, different as they are. His noteworthy second adult novel A Spot of Bother (2006) deals with an experience of anxiety that can be labelled deviant, yet, as in the case of Christopher and the autistic spectrum, is presented in a way that makes the anxiety more human and less shameful. Another work that deals with both trauma and labelling is Jonathan Safran Foer’s 2005 novel Extremely Loud & Incredibly Close. In Chapter 7, I investigate the impact of traumatic events (the terrorist attack that led to his father’s death) upon nine-year-old Oskar, who is the narrator of the novel, as is Christopher in The Curious Incident, and the labelling attitude towards him in the media and in scholarly works, which is very similar to the prevailing attitude towards Christopher.

1.3.3 Metaphoric Madness in Fiction

Mental illness, or rather madness in general, is a vast topic in the context of postmodern literature. Mental disorders often appear to convey certain metaphorical or satirical meanings. One example of such fiction is the transgressive postmodern novel American Psycho (1991) by Bret Easton Ellis. Despite, or due to, the accusations of being too violent and misogynistic, the novel has become iconic—even more so after the release of the film adaptation starring

13 On metaphors in postmodernism, see Sarup (1988).
Christian Bale. However, as in the case of Will Self’s transgressive novels to be discussed in Chapter 4, the view suggesting that *American Psycho* is obscene for the sake of obscenity is limited (see, e.g., Venant 1990, Sutton 2015). I argue that Self’s texts are ambiguous as the nature of events described there is undecidable. The same can be said, for example, about Dennis Cooper’s disturbing novel *Frisk* (1991) as well as *American Psycho*: when asked in an interview whether Patrick Bateman is actually a serial killer (on serial killers in fiction see Simpson, 2000), Ellis answers: “No, I’ve never made a decision. And when I was writing the book, I couldn’t make a decision. That was what was so interesting to me about it. You can read the book either way” (Grow 2016, n.p.). Ellis notes that Patrick’s killing is not the central interest of the story though this is what critics blamed it for: “Patrick Bateman is not interesting to me as pure, unadulterated evil. He’s much more interesting to me as someone I am questioning things about”, that is why it is “more interesting to leave” the question “unanswered” (ibid.). At a point in the novel Patrick starts hallucinating and seeing things and he confesses that he is a killer to his colleagues, but they take it as a joke: “Bateman’s such a bloody ass-kisser, such a brown-nosing goody-goody, that I couldn’t fully appreciate [the joke]” (Ellis 2001, “New Club”). Ellis also claims that it was the “dandification of the American male” and narcissism that informed his novel, while Patrick’s being a serial killer is a “small section of the book” (Grow 2016, n.p.). It is likely that violence is just a means of resisting the yuppie cultured society he was part of, or rather tried to be part of but did not feel he belonged to, underscored by his aversion to superficial consumerist talk about clothes—in this sense Ellis’s novel is close to Self’s works.

Violence and madness as rebellion is a recurring coupling used by authors to produce postmodern metaphors. One example of such a product is Chuck Palahniuk’s *Fight Club* (1996). As in a postmodern novel proper, Joe’s dissociative identity is exploited for transmitting metaphorical meanings, unlike in the case of the description of the dissociative disorder by Daniel Keyes.14 Tired of working as an office clerk but too indecisive to take action, Joe reveals another identity—strong and ready to fight consumerism by any means from pissing in a guest’s soup in a restaurant to stealing left over liposuction fat to make bombs. However, Tyler’s most transgressive creation is obviously the fight club itself—transgressive to the extent that young readers seem to treat the novel as an instruction manual. Palahniuk writes: “This summer a young man pulled me aside in a bookstore and said he loved how in Fight Club I wrote about waiters tainting food. He asked me to sign a book and said he worked in a five-star restaurant where they monkey with celebrities’ food all the time. […] Kierkegaard says the moment we are forbidden to do something, we will do it. It is inevitable” (2004, “Monkey See, Monkey Do”). Another Palahniuk’s novel, *The Invisible Monsters* (1999), reads: “She says, ‘Don’t do what you want.’ She says, ‘Do what you don’t want. Do what you’re trained not to

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want.’ It’s the opposite of following your bliss. Brandy tells me, ‘Do the things that scare you the most’” (1999, ch. 21). Palahniuk’s ideas of violence or things that “scare” are usually founded on a firm philosophical basis, involving not only the philosophy of Kierkegaard but also postmodern and post-structural thinking. Consider the following extract that shows the awareness of the narrator of the post-structuralist approach to language: “‘You’re a product of our language,’ Brandy says. […] ‘Every bitty molecule about you has already been thought out by some million people before you,’ she says. ‘Anything you can do is boring and old and perfectly okay. You’re safe because you’re so trapped inside your culture. […] There’s no way you can get out’” (ibid.). The violent outrage as transgression is likewise used by Self in My Idea of Fun, and, as common to postmodern thinking, the figure of the violator and the reasons for violence are never univocal.

The coupling of violence and madness of a more complicated kind is presented by J. G. Ballard in his 2000 novel Super-Cannes. Ballard is known for his talent of creating images of closed, surveilled dystopian spaces that provide their inhabitants with all they need and exercise total control over them (see, e.g., Lewis 2008, Garcia 2015). The 1975 novel High-Rise and 1996 novel Cocaine Nights also deal with such spaces and protagonists who believe that they have managed to challenge the system and figured out the conspiracy, yet appear to be simply manipulated by that very system or the powers-that-be behind it. Super-Cannes serves as an important background for the postmodern chapter of this study, since the key character of the novel is an excessively ambitious psychiatrist who plays a totalitarian leader in his aspiration to control the populace by means of a therapy that he has invented.

In the novel, the psychiatrist Wilder Penrose’s therapy programme involves the prescription of “carefully metered violence, microdoses of madness” (Ballard 2001, ch. 29). Since there is no time for entertainment in this dystopian world, people need a discharge in order not to get sick. Yet Paul, the protagonist, notices that the “controlled psychopathy” moves far beyond such hobbies as imitating a drug dealer or pretending to have paedophile inclinations. Penrose’s patients actually beat immigrants invited into Eden-Olympia to death, rape women and children, abuse heavy drugs, kill those rebelling, and have it all recorded. Surveillance cameras hanging everywhere, however, are of no help, since Penrose assures that there is no criminal record in Olympia and these “ratiissages” are part of the therapy: “We need to revive him, give him back the killing eye and the dreams of death” (ibid.). Likewise, there is no need for morality: “Thousands of people live and work here without making a single decision about right and wrong. The moral order is engineered into their lives” (ibid.). Penrose’s intention is to produce an “ultimate gated community” run by a “human being with a closed mind”, “a new race of deracinated people” (ibid.). It is noteworthy that Ballard makes reference to Baudrillard, mentioning that Paul meets a girl in a white vest printed with a quotation from Baudrillard (ch. 10). Paul believes he can render justice, but he merely follows in the footsteps of Greenwood who had several people involved in
promoting the therapy shot before being shot himself. The novel raises several crucial issues, such as righteous differentiation between criminalized and therapeutic kinds of violence, both of which have similar consequences. Ballard raises the question of sanity and madness and the consequences of keeping the two in binary opposition. The attempt to separate sanity, defined as refined reasonableness that does not demand any moral or security assumptions, from madness, defined as unneeded irrationality, results in an “electrified but nerveless world” (ch. 15) of Olympia, where crimes are “recreational” (ch. 28) because “going mad is their only way of staying sane” (ch. 22). It is noteworthy that going mad is equated with engaging in violent acts—such a limited understanding of “madness” clearly results from the initial binary differentiation, which condemns madness together with unconscious needs. In a sense, the idea of recreational violence can also be located in Tom McCarthy’s 2005 novel Remainder where the protagonist experiences the need to re-enact events he cannot recollect in order to stop feeling alienated from the world and recover authenticity. The fact that violent events in Eden-Olympia are staged serves as a cover story for carry out crimes and dosing the inhabitants with drugs.

Paranoia is another popular topic in postmodern literature, usually coupled with ideas of technological progress and media saturation (see Coale 2005). While Richard in The Sweet Smell of Psychosis, explored later in Chapter 4, feels that he is being chased by a popular broadcasting personality, for example, Oedipa Maas in Thomas Pynchon’s The Crying of Lot 49 (1966) is lost in a mystery she attempts to solve in order to find the property her friend left to her. Neither the former nor the latter succeeds in finding the truth—but neither does the reader. Oedipa wonders whether in the end she might “be left with only compiled memories of clues, announcements, intimations, but never the central truth itself” (Pynchon 2000, 66). Similarly, neither Richard nor Oedipa knows for sure whether they are experiencing real events or are caught up in a dream—the binary of reality and dream being too straightforward for postmodern thinking. Oedipa presents herself and the reader with several possibilities, including the option that she is hallucinating or that “a plot has been mounted” against her that involves “items like the forging of stamps and ancient books, constant surveillance” or that she is “fantasying some such plot” (ibid., 117-118). Any of these options would, however, imply that she is experiencing paranoia.

In this literature review, I have provided a short analysis of several groups of literary works that form an important background for the entire study. The groups correspond to the literary genres I look into in this study and include autobiographical and fictional accounts. The review of the autobiographical works has proved that such texts are an invaluable source of first-hand knowledge about different mental disorders. Their great value lies in the vastness of experience that they can hold: autobiographical narratives afford much more access to complicated issues than any manual or medical record could offer. Despite the shortcomings of
memory and the inadequacy of language, such narratives reveal the human perspective on disorders. My review of fictional works highlights issues of ethics in psychiatry, experiences of guilt and trauma, and the responsibility of psychiatrists. Fictional works are of great interest in terms of their representation of mental illness as they tend to focus not only on individual experiences but also address the social, cultural and historical context of the depicted events. In my short review of works of fiction dealing with a postmodern metaphorical approach to mental illness, I have focused on the issues of violence, paranoia and the incomprehensibility of truth, which are crucial to the analysis of Self’s works presented in this study.
2 THEORETICAL FRAMEWORK

"where the mess is
it's where my heart is"
David Rivard

This study takes into account the discursive underpinnings of the norm and deviance binary that is part of the legitimate psychiatric discourse. The strategy of post-structuralism can elicit a tension between experience and discourse, the inability of the self to be outside the discourse, thus making “the phenomenology of pain and desolation to be closely tied to the shifts of bodies and selves within structures of power and knowledge” (Fee 2000, 10). It may be suggested that the post-structuralist strategy with its critical deconstructivist approach denying solid knowledge has nothing to do with phenomenology, which denies the reducibility of the body to discourse. However, perceiving phenomenology and post-structuralism as binary would be the same as perceiving norm and deviance as two polarities that never merge. Neither phenomenology nor post-structuralism are one-dimensional, nor is the language of experience. As Louis Sass notes, “For language—at least inner language—could be the medium of the most authentic mode of human consciousness” (1994, 194; original emphasis). Thus, the first part of this theoretical chapter (2.1) deals with the interrelation of phenomenology and its deconstructive dimension (deconstructive phenomenology) with a post-structuralist approach that sees the ideas of norm and coherence as myths, as well as with the postmodern myth of grand narratives.

One of the reasons to call coherence a myth is Lyotard’s idea of the “unpresentable” that I discuss in the first section along with the idea of the inaccuracy of language. Section 2.2 continues this discussion by defining the notion of alterity, one of the central terms in the study, along with the notion of the norm. It should be comprehended that the identities of other people are as fluid and unstable as one’s own. This fact concerns any person, including those considered deviant. This situation becomes more apprehensible if considered from the perspective of the respect for alterity. Such respect is the cornerstone of Bakhtin’s dialogical interaction and the ideas of responsibility and unfinalizability as well as of James Mensch’s interpretation of Levinasian ethics. However, before turning to alterity, in section 2.2.1 I will provide some reflections on how the norm per se can be interpreted and defined.

The third and the fourth sections of this chapter are devoted to clarifying the other key terms used throughout the study. I provide two main frameworks for defining the concepts: philosophical (2.3) and sociological (2.4). Post-structuralist theory owes a great deal to French and German philosophy and often recourses to the concept of transgression and questioning the foundation of norms, morals, and
conventions. A sociological perspective is also needed for the study since the above-mentioned norms, morals, and conventions are inseparable from the concept of deviance and non-existent outside of society. Thus, I will examine how boundaries and limits are seen from the point of view of philosophy and how they frame a person’s self and identity. Similarly, I will analyse how labelling, stigmatization and social bias in general influence a person’s construction of his or her identity. It is also important to examine the concept of morality from both philosophical and sociological perspectives because naturalizing morals often leads to naturalizing social norms and conventions.

2.1 POST-STRUCTURALISM AND PHENOMENOLOGY

All claims common to the post-structuralist strategy are connected in one way or another with language. This concerns all of the references of postmodernism to language, from Lyotard’s language games to Foucault’s idea that “language is oppression” and Deleuze’s “language of power”. For Deleuze, language is inseparable from the political model that makes language standardized, thus turning it into a means of power: “Forming grammatically correct sentences is for the normal individual the prerequisite for any submission to social laws. No one is supposed to be ignorant of grammaticality; those who are belong in special institutions” (Deleuze and Guattari 101, 1987). According to this logic, to be grammatically correct means to be normal, that is, rational, whereas expressing oneself unconventionally means to be condemned to a special institution. This is the logic of language as power.

The post-structuralist approach attempts to challenge the language of power, yet what makes this challenge incredibly controversial is the fact that “all representation is necessarily representation through language” (Lewis 2000, 77). The best illustration of this controversy is the way that Derrida interprets the Heideggerian term sous rature, that is, “under erasure” (Derrida 1997). Sous rature implies that one may spell a word but then be compelled to cross the word out because it is inaccurate. As one of Louis Sass’s patients diagnosed with schizophrenia asked: “But what is a train?” His own answer was: “It’s a word. The word has nothing to do with a solid thing like a train” (1994, 187). When one encounters such utterances, it is fair enough to stop and consider what the person with schizophrenia is actually pointing to; this is the essence of the controversy that language poses. On the other hand, a word that is not crossed out implies that the word is still necessary as it is the only means of communication. Thus, under post-structuralism the word is at the same time inaccurate but necessary. This is dilemma is fundamental to the norm and deviance binary that I analyse here. Narrative medicine challenges the biomedical approach to treating mental illness and the classification of disorders based on the model of objective sciences. Yet, importantly, when post-structuralists talk about the inaccurateness of language, its
agreement-based nature and the crisis of representation in general, they do not imply the possibility of extreme relativism. Similarly, Dwight Fee does not imply that depression as a diagnosis is non-existent only because he argues that the narration of depression is discursively biased. Post-structuralist ideas may serve as a relevant framework for narrative medicine since they point out that language tends to divide representations into binaries, such as mental health and mental illness. Furthermore, as Bradley Lewis mentions, a “fine-tuning” of categories occurs, for example, schizophrenia versus manic depression (2006, 70). Even the first binary of health and illness was inaccurate, but then further divisions were made along the same lines that are, actually, not at all neutral: there is “no unmediated representation, no direct access, no possibility of a view from nowhere” (Lewis 2000, 77). Neutral stands for unbiased or authentic, notions that face even bigger challenges when it comes to the issues of mental health.

Post-structuralist and postmodern theorists often turn to examples of artists whose works can be perceived as consequences of living through mental instability as well as masterpieces reflecting on the authenticity of consciousness. Thus, one can analyse, for example, Van Gogh’s art and mental condition from the point of view of different theories and arrive at drastically different conclusions. What the post-structuralist approach offers here is to admit the possibility of different perspectives on a single issue. Post-structuralism questions the criteria according to which assumptions are made, and thus points out the relativity of perspective, ranging from the objective truth of the correspondence of Van Gogh’s symptoms with manic depression to the social-constructedness of that perspective, which accounts for its relativity (I will refer to Artaud’s view on how Van Gogh was “suicided” by society in Chapter 3 when discussing the challenges of language). Needless to say, the relativity that I refer to here derives from Saussure’s relational theory of the sign, caught up by post-structuralists. “Relative theorists”, Bradley Lewis says, “do not see chaos; they see the possibility of alternative interpretations and the need to respect alternative worldviews” (2006, 26).

The notion of objective truth mentioned here is something that haunts narrative medicine, demanding that one objective scientific method should be considered reliable and followed without divergence. However, as I remarked above, knowledge is not neutral. Post-structuralist theory questions the solely objective method and the idea of a single truth, allowing at the same time a more human approach. It is here that phenomenology and its cherished lived experience benefits from a post-structuralist strategy. Here, too, one starts to doubt whether Derrida is a phenomenologist in disguise, especially in light of his statement that “deconstruction [...] is not negative. Destabilization is required for ‘progress’ as well. And the ‘de-’ of deconstruction signifies not the demolition of what is constructing itself, but rather what remains to be thought beyond the constructivist or deconstructivist scheme” (1988b, 147). This means that it is not accurate to insist that deconstruction stands “for chaos, for the undecidable, for the primacy of the
flux” (Borgeouis 2001, 79). As Simon Critchley argues, “it must be understood that such hesitation is not arbitrary, contingent or indeterminate, but rather, a rigorous, strictly determinate hesitation: the ‘experience’ of undecidability” (1999, 42). Hesitation here is not negative in the same way that the “negative capability”, to use Keats’s term, is not, in fact, negative. For “negative” here stands for the ability to endure uncertainty, that is, as Keats himself put it as far back as in the 19th century, “when a man is capable of being in uncertainties, mysteries, doubts, without any irritable reaching after fact and reason” (1889, 277). One may note that while uncertainty can be a prerequisite for anxiety, it also affords the dogmatic mind the same that the post-structural crisis of representation does: it questions the constructedness of boundaries and indicates that the limits of one’s ways of thinking can and ought to be transgressed in order to see that other ways are not deviance but rather a possibility.

The notion of possibility is more than appropriate in this context: while Lewis mentions the “possibility of alternative interpretations”, Nel Noddings uses the term for explaining the notion of empathy: she prefers to “see the other’s reality as a possibility for [her] own” (2003, 14). Possibility is the notion opposed to what David Wood calls “naiveté of the established discourses and practices”, which, if admitted, rejects the positive rational approach (2005, 4). Both phenomenology and post-structuralism provide critiques of positivistic naivety. David Wood (2005) distinguishes the self-renewing and self-transformative potential of phenomenology, which is currently a constituent of deconstruction, just as it was a constituent of existentialism or hermeneutics. In other words, deconstruction comes neither as a realm subsequent to phenomenology nor as a part of some kind of hierarchy. As a result, we arrive at the notion of deconstructive phenomenology used, for example, by David Wood and analysed in Christopher Watkin’s book Phenomenology or Deconstruction: The Question of Ontology in Maurice Merleau-Ponty, Paul Ricoeur and Jean-Luc Nancy (2009). The use of the term is feasible, at least, due to the essence of deconstruction that Derrida assigns to it: not being an approach or a method, deconstruction is characterized as an event or a motif. Derrida admits that he is indebted to philosophers and scholars like Freud and Heidegger (1981a, 9) and made a similar significant declaration regarding Emmanuel Levinas in his speech at Levinas’s funeral. When introducing the term closure to deconstruction, Derrida relies to a certain extent on Husserl’s rejection of the possibility of arriving at certain conclusions after philosophic debates and, thus, of the idea that “philosophy can bring itself to a conclusion […] by postulating a closed system or structure” (Critchley 1999, 63). In his own work, Derrida contests the idea of the finitude of philosophy, bringing forward the notion of alterity, which the logocentric world wishes to eliminate. Even if Derrida is not a phenomenologist in disguise, as I suggest above, he certainly wears a mask and turns to Husserlian phenomenology as the point where structural closure is overcome.
Certainly, Derrida questioned the foundation of phenomenology that appeared to him as a part of the logocentric world he meant to deconstruct. Although phenomenology represented a rather reflective attitude, a move from the rationalist or naturalist bias by means of phenomenological reduction, Derrida still questioned the already reduced structure of phenomenological lived experience, that is, its genesis. Although Derrida referred to Husserl, he broke with the philosopher’s idea of “returning to the things themselves”, thus moving away from metaphysics but returning to it by means of phenomenology. As Wood notes, Derrida rather extends the scope of phenomenology than contests it (2005, 134) for one and the same reason—to keep positivist reduction at bay. Derrida mentions that he tried “to keep himself at the limit of philosophical discourse”, where limit does not equal death, as he “does not at all believe in what today is so easily called the death of philosophy” (1981a, 6; original emphasis). In extending the limits Derrida’s aim is not to eliminate philosophy, but to point out that it is only within logocentric thought that “philosophy is the territorial desire for totality and closure” (Critchley 1999, 74). Being at the limit is important for the philosopher, as the limit is forever moving, thus the limit of metaphysical closure extends forever as it restores any transgression that is made against it. “Every transgressive gesture re-encloses us”, Derrida explains, “within the interior of the closure” (1981a, 12) (the concepts of transgression and limit are discussed in detail in Chapter 2.2). There is no end to philosophy in the Heideggerian sense, but closure as the moments of transgression and restoration for Derrida are inseparable. At least, this is because Derrida realizes the paradox that haunts deconstruction: it talks about the deconstruction of philosophy using the language of philosophy (similarly, when talking about the challenges of languages, we inevitably use language, that is, unintentionally multiply the confusion). Critchley explains the problem of closure thus: “Deconstruction operates within a double bind of both belonging to a tradition, a language, and a philosophical discourse, while at the same time being incapable of belonging to the latter” (1999, 29-30). Derrida recognizes the ambiguity of phenomenology and metaphysics, as the former, for Derrida, remains within that metaphysical closure since it inevitably uses its language, bringing forward the problem of belonging and not-belonging.

I would add that for the current study the focus of deconstruction on the constructedness of experience and its critique of binaries is crucial. Doing justice to the 20th century linguistic turn, Derrida focuses on the challenges of language. Illustrative of this is, for example, his critique of Gadamer’s idea of the role that language plays in the fusion of “horizons”. From the point of view of deconstruction, the goal of Gadamer’s hermeneutics to reach the ultimate truth by means of dialogue, that is, understanding of each other, is unreachable. As I have discussed above, language is inaccurate for Derrida. Coming back to the focus of the current research, that is, the analysis of narratives of mental illness, it must be mentioned that a deconstructive gesture of drawing attention to the inaccuracies of
language is crucial to answering the phenomenological question of whether a complete understanding of another’s experience is possible. I have mentioned that deconstruction manifests an undecidability that cannot be calculated but also does not seek chaos (e.g., Borgeouis 2001). It is illustrative that Paul Ricoeur, a phenomenologist, speaks about this same human feeling of undecidability. The reason for this feeling is the fact that human existence is located at the intersection of various discourses, none of which is the discourse at the centre. Watkin explains Ricoeur’s position as follows: “I cannot attest to anything outside my own perception and judgments, for all that I know, I know through my perception and judgments” (2009, 89) (more on the idea of judgmental attitude in Chapter 6). Does this not comply with the deconstructive scepticism towards the metaphysics of presence? This scepticism admits that one’s “own perception” is forestalled by a “series of interpretations” in Foucault’s terms, or “grand narratives” as metaphysics in Lyotard’s terms. Yet, not only does phenomenology bear the seeds of its own deconstruction, that is, the possibility of deconstructive phenomenology, but, in turn, deconstruction can itself be deconstructed.

The possibility discussed above manifests in different areas that all point at one general goal—the acknowledgment of the constructedness of conceptual meaning and “the incompleteness of the narratives with which we provide ourselves” (Wood 2005, 5). The notion of grand narratives is common within postmodern philosophy, yet is highly ambiguous and debatable. There are scholars who righteously admit that they do not believe in grand narratives at all. While the existence of grand narratives can be questioned, they are central to postmodern theory and, thus, cannot be totally denied.

Being central to postmodernism, the notion of grand narratives is consequently crucial for the medical humanities and narrative medicine. The notion can be widely used to challenge psychiatric discourse, as “incredulity toward metanarratives” puts the objective method in psychiatry and the existence of one ultimate truth into question. Yet the whole idea of grand narratives cannot be totally renounced as it accounts for the entire process of development of humanity. J. M. Bernstein, for example, regards Lyotard’s grand narratives (Lyotard 1984) to be analogous to Foucault’s series of interpretations (Bernstein 1991). Foucault mentions in “Nietzsche, Genealogy, History” that “if interpretation were the slow exposure of the meaning hidden in an origin, then only metaphysics could interpret the development of humanity” (1977b, 151). It is that side of interpretations or grand narratives that postmodernism seeks to dismiss, as it doubts the existence of “the meaning hidden in an origin” that should be exposed. Yet Foucault continues: “If interpretation is the violent or surreptitious appropriation of a system of rules, which in itself has no meaning, in order to impose a direction, [...] then the development of humanity is a series of interpretation” (1977b, 152). Thus, while acknowledging the weakness of interpretations and grand narratives, one cannot dismiss them outright. As Bernstein notes, in the wake of critical theory the idea...
that there is “no thing which grounds or founds a society” was accepted, yet, he says, “there have been and do exist societies” (1991, 111). Lyotard suggests the idea that temporary contracts should replace grand narratives, yet the world that such temporary contracts offers is still engaged in social contacts, structured and legitimized through grand narratives, paradoxically rejecting the latter and telling the story of the end of ideology. And Lyotard admits it himself: “There is no question here of proposing a ‘pure’ alternative to the system […] an attempt at an alternative of that kind would end up resembling the system it was meant to replace” (1984, 66).

The paradoxical way of “rejecting the system while being in the system” is important for the idea behind this study. Dwight Fee’s idea of remaining within the structures of power and knowledge, that is, of the discourse of depression, while talking about depression, is illustrative here. This thesis uses the notion of grand narratives as proposed by Bernstein: while I reject grand narratives as metaphysics, it is not possible wholly to dismiss the concept. When Derrida speaks of the deconstruction of institutions he does not dismiss them or call for their destruction. He says it is a question “of making us aware of what we are in fact doing when we are subscribing to this or that institutional way of reading”, as deconstruction “enables us to interrogate the covert philosophical and political presuppositions of institutionalized critical methods which generally govern our reading of a text” (Derrida 1984, 125). Rejecting metaphysics goes a long way towards challenging the psychiatric discourse that I address, as it opens the way to questioning the boundaries of norm and deviance, objective and subjective approaches, the exposure of one hidden truth, and the (im)possibility of a one-size-fits-all approach.

While commenting on Husserl, Derrida mentions the difference the philosopher makes between exact science and philosophy or phenomenology. Exact science, he explains, is subject to closure since, being finite, it contains all hypotheses and possibilities within it, so that “nothing further remains open” (Derrida 2005, 415). Unlike exact science, phenomenology is beyond closure. The lived experience, too, is open and beyond the structures of closure. We must retain, Derrida writes, “the principled, essential, and structural impossibility of closing a structural phenomenology” (ibid., 204). Lyotard highlights the binary that scientific discourse presents as a part of language games: “Scientific knowledge requires that one language game, denotation, be retained and all others excluded” (1984, 25). As far back as in his Postmodern Condition (1979) Lyotard raised the important question of legitimation of knowledge when considering the relation between narrative and scientific knowledge as part of the history of cultural imperialism. For scientific knowledge, he says, narrative statements are of a different mentality—“savage, primitive, underdeveloped, awkward, alienated” (Lyotard 1984, 27). If, at that, language games are part of a contract made between players, and if there is no game when there are no rules, the question of legitimation definitely arises. Christopher Watkin specifies the questions with which phenomenology and
deconstruction struggle as: “Who will witness for the witness” and “the question of arbitrating between different witnesses” (2009, 205). As Lewis notes, once we stop idealizing the scientific method, there is no longer any reason to limit psychiatric knowledge to scientific knowledge (2000, 80-81).

However, the tendency is to remain bound within systems, particularly the language system, which, although imperfect, is indispensable. Lyotard highlights the socially bonding function of language: “Even before he is born […] the human child is already positioned as the referent in the story recounted by those around him” (1984, 15). All the “moves” in the language games account for a certain social bond, one that a temporary contract was meant to make asocial, part of an open system without rules. In a way, this is connected with Lyotard’s idea of the “unpresentable”. This is of central relevance to my interest in the narration of the lived experience of mental illness. For Lyotard, the unpresentable is something that cannot be made visible or objectified, ideas whose presentation is not possible. The peculiarity of the unpresentable in postmodernism is quite like that of the coherent self: postmodernism has no nostalgia for a “lost united self” and does not pretend that there are things unconceivable, unlike modernist art. The idea of the unpresentable is similar to Derrida’s unspeakable in post-structuralism. This study often refers to the idea of the unspeakability of traumatic experience (see Chapter 7) or the experience of mental illness (see Chapter 3). Postmodernism lets the unpresentable in and, similarly to madness, speaks its language, the language that is marginalized in the discourse of reason. This idea is important in the context of the need to construct one’s narrative identity in order to play a certain given part in the language game—the condition upon which one is considered normal or not. Lyotard’s idea is easily applicable to my speculations on the norm and deviance, I and Other. For Lyotard, encountering the unpresentable is the way to fulfil the “desire for a return of terror, for the realization of the fantasy to seize reality” (1984, 82). In the context of the current study, I would put it more specifically: encountering the unpresentable or alterity is the way to realize the fantasy of seizing experience or limit-experience. However, to encounter alterity does not mean to fully understand it, grasp it and decode it. I will elaborate on the philosophical concept of alterity in the next section, which aims to define the main concepts used throughout this study.

In this section, I have shown that Gadamer’s myth of ultimate truth or, let us say, ultimate knowledge, is deconstructed in post-structuralist philosophy, which gives way to a deconstructive dimension of phenomenology. The myth of complete understanding in the deconstruction of phenomenology would be the same myth as the coherent self or norm in post-structuralism, and the idea of grand narratives in postmodernism. Simon Critchley explains that while western logocentrism aims at “domesticating” alterity, deconstruction may be understood as “the desire to keep open a dimension of alterity”, that is, the goal of deconstruction is not dismissal or “the unthought of the tradition, but rather that which cannot be thought, […] to
point towards that which philosophy is unable to say” (1999, 29). Does this mean that alterity cannot be overcome? Before we turn to the discussion of facing alterity in fiction, the notion of alterity and other terms concerned should be clarified. The question of overcoming alterity reminds me of the cult of undecidability inherent in post-structuralism. While uncertainty is traditionally associated with anxiety, post-structuralism finds bliss in undecidability, bringing in a metaphorical flavour of always being on the limit forever to be surpassed. While alterity is traditionally associated with fear, a close look upon its definition may urge one to look inside oneself to find alterity within, unseen or unrepresentable. While phenomenology and deconstruction are looking for witnesses to arbitrate between them, I would merely conclude with Lyotard’s words in the final part of What is Postmodernism: “Let us be witnesses to the unpresentable” (1984, 82).

2.2 NORM AND ALTERITY

“Nothing in man—not even his body—is sufficiently stable to serve as the basis for self-recognition or for understanding other men”

Michel Foucault

Alterity, as one of the key notions of Levinasian phenomenology, before being deciphered, requires the clear definition of the cornerstone notion that was inherited but constantly challenged by post-structuralism—the notion of the norm. The notion is applicable in a number of various disciplines, including ethics, social psychology, mathematics, medicine. This study is particularly interested in the role of the norm in psychiatry (in this context also called normality) and its influence on the public attitude towards mental conditions. The norm is the grounding feature of the dominant psychiatric discourse, which exploits the notion, breeding stereotyping and stigmatization. It is Michel Foucault’s idea that norm and mental illness go hand in hand that enables the latter of the two to be used as a justification for the dominant medical discourse. Yet, despite its overwhelming dominance and control over public opinion, the norm has never been given an ultimate and complete definition.

2.2.1 Norm

The definition of the norm can be made only against the definition of deviance, in other words, normality against mental illness. Yet there are two issues that I would like to emphasize, both of which concern the Diagnostic and Statistical Manual of Mental Disorders, the “psychiatric bible”. The first one proves the reluctance of the editors of the DSM to provide readers with a solid definition of mental illness. It is a cold fact that in the first and second editions of the DSM there was no formal definition of mental disorder. The DSM ignored the problem until 1980, a full 28
years after its first publication. As Kutchins and Kirk argue in *Making Us Crazy*, their book on the DSM, “DSM-II offered general, vague descriptions of specific disorders that had evolved over the years through professional consensus” (1997, 29). Considering this, it is not surprising that the critics of the DSM question the validity of the classifications it offers. Kutchins and Kirk regard the DSM as a “book of tentatively assembled agreements” (1997, 28), as, without formal definition, what is considered to be the norm and what is considered to be disorder appears to be an agreement or a construct.

In addition to this, in spite of the lack of a solid definition, the editors keep on defining. They define human behaviour, often classifying it as a symptom of a certain mental disorder. For example, it was once argued that homosexuality should be included in the DSM-II as a deviation from the norm.\(^\text{15}\) The more recent editions of the DSM also have surprising things to offer. Much argument was caused when the editors of DSM-V added bereavement to the list of depressive disorders, thus endorsing the prescription of antidepressants to the grieving. An editorial in *The Lancet* responded to this change even before the DSM-V was published in 2013: “Medicalising grief, so that treatment is legitimised routinely with antidepressants, for example, is not only dangerously simplistic, but also flawed” (“Living with Grief” 2012, 589). The editorial explains that grieving in such a situation is an ultimately human reaction because “grief is not an illness”, and grieving may be required for recovery: “Putting a timeframe on grief is inappropriate—DSM-5 and ICD-11 please take note. […] For those who are grieving, doctors would do better to offer time, compassion, remembrance, and empathy, than pills” (ibid.). Following a series of protests from gay activists, the DSM removed homosexuality from its list of “disturbances”, though the argument is still on: the notion of homosexuality as a genetic abnormality is widespread, yet controversial, a debate that will lead to either acceptance or further stigmatization, the latter being the more likely. Whether the added category of bereavement will be removed or restated is not yet known, though the ICD-11 (International Classification of Diseases, 11th Revision) is considering a proposal to include a “prolonged grief disorder”. Such moves do little, or nothing, to ease the problem inherent in defining universal diagnoses. Lennard Davis nails down the dilemma: “To diagnose is to define; to define is to diagnose”, he says, “Definitions produce diagnoses, which in turn produce definitions” (2014, 90), which thus represent “a knowing based on not knowing” (ibid., 86).

Why should it be this way? There is one key reason. To define something is, in a certain sense, to imprison it, to condemn it. Defining something involves creating boundaries and locating that something within them. Likewise, defining mental disorders creates boundaries between normality and mental illness, norm and deviance. Once boundaries are made solid, there is no need to apprehend individuals’ life stories, and the medical discourse becomes saturated with political

and economic interests. The former editor of the *New England Journal of Medicine*, Marcia Angell, frames the way those interests work in her review of the DSM-V: mental illness is unlike physical illness as “the boundaries between normal and abnormal are often unclear. That makes it possible to expand diagnostic boundaries or even create new diagnoses. And drug companies have every interest in inducing psychiatrists to do just that” (2011, n.p.). Defining and creating new diagnoses because the boundaries are blurred is what makes it eligible to operate globally and label anyone mentally ill. If you go through the checklist of symptoms, you will, sooner or later, find a diagnosis that fits you. Kutchins and Kirk put the idea clearly: “Where you thought your friends were just having normal troubles, the developers of the American Psychiatric Association’s diagnostic bible raise the possibility that you are surrounded by the mentally ill. Equally disconcerting to you, you may be among them” (1997, 22). Lennard Davis makes it even clearer: “Sadness, shyness, obsession, sexual desire, anger, adolescent rebellion, and the like now fall under a bell curve whose extremes become pathologies” (2014, 8). The DSM works in this case as an empowered hunter: the more psychiatrists look for deviances, the more they find. Foucault tackled this idea in his commentary on the search for sexual deviants in *The History of Sexuality* (1976). Thus, the DSM may represent another case of an artificial witch-hunt taken up by those within the medical power discourse. Davis also calls the DSM “an Enlightenment project of the first order” and the process of creating categories in it “haphazard and arbitrary” (2014, 85).

There is an unsurpassable paradox haunting the expansion of diagnostic criteria. Although almost everyone can be given one or another diagnosis, the stigma of being diagnosed remains as real as before. The example given in the previous section supports the paradox: it was mentioned that The National Alliance on Mental Illness had counted that one in four adults aged 18 to 24 “has a diagnosable mental illness“. But those young adults, as well as older people, are reluctant to admit to having problems in fear of stigmatization. Patrick Cockburn mentions this in the memoir that I discuss in Chapter 5: once Patrick encountered the problem of schizophrenia in his own family, only then did he discover that a lot of people well known to him face the same problem. Despite diagnoses being so widespread, it is still considered shameful to mention them in public. The key to this paradox is quite simple. Being diagnosed means to be not normal, that is, deviant, mad, ill, disordered, unlike “normal” people. This leads to a situation where it is unlikely that the following logical question will be asked: If everyone can be so readily diagnosed, what is a “normal” person? To be mentally not normal carries a public stigma. The majority of people therefore aspire to return to the hardly identifiable normal category by all possible means: either by concealing their experience or hurrying to the practitioner in search of medication. As long as the norm is part of the dominant medical discourse, it will breed fear of alterity with respect to both the self and the other.
What role does the DSM play in retaining the norm and deviance binary and the stigma that follows it? In other words, why should the discussion of the norm start with the DSM? The DSM is a manual constructed in such a way that makes the claim of being a reliable valid document based on hard scientific data. Yet the reliability and the validity of the manual are questioned. As Davis mentions, “the DSM cannot itself provide anything resembling certainty, although it aspires to certainty” (2014, 83). I have already mentioned the absence of solid definitions. What it offers instead is a checklist of symptoms. Another surprising feature has recently emerged: the DSM has issued a mobile app allowing you to access the checklists from your smartphone. The app advertisement claims that users have full offline access to the criteria sets. There are also other applications that test your knowledge of symptoms. The whole thing is starting to resemble a multiple choice game: the practitioner chooses the symptoms he thinks the patient displays and the on-hand app quickly gives the diagnosis. Considering that we are talking about mental conditions, this way of diagnosing does not seem reliable. While the symptoms checklist determines whether a symptom belongs to a certain class, it “does not substantiate what that class is” (Kutchins and Kirk 1997, 28). In short, in aspiring to be an objective scientific document, the DSM leaves behind the subjective approach considered crucial by narrative medicine. Mehl-Madrona, for example, argues that “the ‘patient’s story’ has huge effects on the course of the illness” as the conventional paradigm, of which the DSM is a part, “takes all accountability away from the sufferer except for taking medications as prescribed. The life story is not explored” (2007, 84-85). Ignoring this, the DSM tries to become a part of exact science, which is characterized by the words quoted above: “Nothing further remains open” (Derrida 2005, 415). When it comes to the lived experience and life story, there is a lot that remains open after one has filled in the checklist.

If the DSM is haunted by the paradox of not defining mental disorder or the norm but providing a set of diagnoses, and if people are ashamed of deviating from the norm despite knowing that the list of criteria is ever expanding—what, then, is the norm? Before I suggest a definition, I will turn to Lennard Davis’s reflection on what it means to be disabled. At the End of Normal (2014) Davis opposes the criticism towards postmodernism and Tobin Siebers’s idea that “we all seem to share a basic intuition about what it means to be human” (qtd. in Davis 2014, 24). Likewise, says Davis, we should have a basic intuition of what it means to be a disabled human. Davis concludes: “Isn’t one of the main points of postmodernism that we can see how identities are falsely constructed and deconstruct them in the hopes of showing how that ‘basic intuition’ isn’t inherent but learned, and often wrongly learned in the form of prejudice and self-interest?” (ibid.). I refer to this quote due to its similarity to the question of what it means to be normal. It might be that many people believe in some basic intuition of what normal means, and thus ignore the apparent constructedness of that intuition. Acquired along with language, basic intuition absorbs all the prejudices and stereotypes that can be
transmitted by means of language—an idea that confirms Davis’s words. If the “basic intuition” is flawed, how can we define the norm?

I would suggest that the norm is a “spherical cow in a vacuum”—a metaphor originating from a famous joke with various cultural variations (in Russian, for example, one would say a spherical horse in vacuum). According to the English version, a farmer, desperate because his cows were not producing milk, wrote to the local university for a solution to the problem. A team of dedicated professors worked on the problem for several weeks, producing a flurry of data and calculations. Finally, the head physicist announced to the farmer that they had found the solution—but it worked only for spherical cows in a vacuum. The metaphor is widely used to depict the real danger of scientific models oversimplifying complex real-life phenomena to the extent that they have nothing to do with reality. Nobody, hopefully, has or ever will see a spherical cow, let alone one in a vacuum. The same can be said about the notion of the norm: we refer to it endlessly, but no one has ever actually encountered it. One might also say that it is something that everybody believes they possess, or pretend to, in order to differentiate themselves from those who seem alien to them. In short, the norm is, to use Jean Baudrillard’s term, a simulacrum, a hollow notion without entity. Baudrillard provided the world of philosophy with a great example of a simulacrum that applies also to the norm and madness binary. Baudrillard used to say that Disneyland exists only to cover the fact that the whole world is, in fact, Disneyland, that is serves as the idea that veils the actual absence of content. To quote Baudrillard: “Disneyland is presented as imaginary in order to make us believe that the rest is real, when in fact all of Los Angeles and the America surrounding it are no longer real, but of the order of the hyperreal and of simulation” (1983, 25). The same applies, Baudrillard says, to prisons: “Prisons are there to conceal the fact that it is the social in its entirety, in its banal omnipresence, which is carceral” (ibid.). Hence the analogy: the notion of the norm exists only for the reason of concealing the fact that there is no universal norm, or rather for the reason of separating it from everything else that is doomed deviant or mad. In a sense, the idea of concealing the fact that all the world is fooled also reflects Michel Foucault’s example of ships of fools taken from the Narrenshiff concept common in the 15th century. Foucault assigns a substantial social meaning to the existence of such ships that were supposed to keep the mad out: “Entrusting a madman to the care of boatmen meant that he would no longer roam around the city walls, and ensured that he would travel far and be a prisoner of his own departure” (2006, 11). The city walls are mentioned for a reason: Foucault adds that in medieval society the mad was in a “liminal” situation, “confined at the gates of the cities”, thus having no other prison than “the threshold itself” (ibid.). I will examine liminality and the transgression of boundaries in the next section dealing with philosophical terminology.
The binary of norm and deviance can be viewed from various perspectives; however, one issue inevitably comes up in any discussion of the binary—it takes two to differ. That is, one cannot be deviant if there is no norm in relation to which one is deviant. This is how the binary is itself constituted through language—by creating a system of binaries language can settle the world, putting everything in order under convention (as in classic Saussurean linguistic theory). Reflecting on Foucault’s theory of power in asserting sexual perversions, Barry Allen states the following: “Impairment, like perversion (and disability), is not something missing, not a lack or absence; it is something added. [...] It is as impossible for a person to be ‘impaired’ without reference to a statistically constructed ‘normal case’” (2005, 94). The idea of mental illness is comprehended in the same way as the idea of sexual perversity—by reference to the norm. Lennard Davis (2014) elaborates the idea of referring to the norm and suggests the new term dismodernism, arising from his speculations on the idea of norm and difference. Davis challenges the idea of finding bliss in claiming difference. The main reason for this is, once again, the idea of binary that difference points to—if there is difference, there is a norm. To quote Davis:

“You can’t have a statement like “we are all different, and we celebrate that diversity” without having some suppressed idea of a norm that defines difference in the first place. It seems impossible to have difference without some standard that sets what is different apart from what is not different.” (2014, 9)

Davis names a number of groupings that are intended to create difference—ethnicity, gender, sexuality, so on. “Diversity is the new normality” (ibid., 1; original emphasis), he says. Yet, according to his idea, diversity implies that there is a dominant group of ideal healthy men. Wirth-Cauchon, for example, speaks about this in the context of borderline diagnosis: “The borderline is defined negatively in comparison to the healthy norm: the possession of a firm, full, unified, and well-bounded self” (2000, 145), though you never know what that firm self is. The idea is also supported by the Derridean approach stating that normativism needs the difference of disability to form the notorious binary: a person without an impairment can define him- or herself as “normal” only in opposition to a person with an impairment (Corker and Shakespeare 2002, 7). To overcome the binary Davis uses the term dismodernism, which instead of emphasizing wounded identities regards all people as wounded. This idea is best illustrated by Davis’s own example of a parking lot. He claims that a parking space for the disabled located closer to the shop door should not be seen as a small part of a bigger parking area for the normal, but vice versa. Davis admits himself that the idea is utopian, but it is a way to challenge conventional thinking. The explanation of the idea is simple: not all people who have trouble walking long distances are disabled, and not all disabled use wheelchairs. Davis proposes changing the sign to: “If you
are having trouble walking longer distances, please park here” (2014, 30). Thus, Davis rejects the notion of an ideal that marginalizes impairment and states that “impairment is the rule, and normalcy is the fantasy. Dependence is the reality, and independence grandiose thinking” (2013, 276).

Davis does justice to the postmodern realization of the power structure and its decentralization, yet aims at acting further: at “expanding the protected class to the entire population”, “removing the veil of ideology from the concept of normal” (ibid.). Under the “veil of ideology” Davis implies the normalizing gaze that came into power with modernity or industrialization. The norm acquired its modern meaning during the period 1840-1860, whereas during the Enlightenment and earlier medieval periods the impaired were not expelled from the community, since everyone realized the unattainability of such an ideal that belonged rather to gods than people (Davis 1995). In his History of Madness (1961) Foucault points to the specific role of madness in medieval times. Although during the Middle Ages madness was made into a vice, madness was not perceived only as darkness and was not opposed to reason. It is the Classical Age of the 18th century that made madness unreason and gave way to locking up the mad. In earlier times, madness was rather a part of reason: it was perceived as a kind of knowledge, not the absence of knowledge. As knowledge, it was much demanded and wished for. In this thinking, unlike men of reason who strive and aspire for knowledge, the mad need do nothing to attain knowledge, as in their innocence and foolishness they already possess it. Foucault explains the fascination with the mad by the fact that the knowledge of the madman is a forbidden knowledge that promises both happiness and punishment at the same time: happiness as possessed by the mad on the ship of fools and punishment in the inability to return to a state of innocence or not-knowing. In his reflections on the nature of madness, Foucault explores Hieronymus Bosch’s “The Temptation of St. Anthony”. Foucault explains the painting as illustrating that esoteric knowledge by which St. Anthony is tempted and thus falls prey to the vice of curiosity (not that of madness), as “for men of the fifteenth century, the fearsome freedom of dreams and the fantasies born of madness held a power of attraction stronger than the pull of the desires of mortal flesh” (Foucault 2006, 18). What do these reflections offer us? They, once again, support the idea of the dominance of binary: as long as madness is not opposed to reason, it fascinates as a kind of knowledge, yet as soon as it is deemed unreason, it is locked up and stigmatized.

2.2.2 Alterity

The sort of knowledge that madness represents is one that is desired but at the same time feared. The reasons for the fear may be different, but they are mainly the same as those that account for the fear of alterity: stereotyping or labelling, stigmatization, and the paradoxical fear of different knowledge in general. The fear
of the difference of knowledge is the fear of the difference in oneself—a fact that constitutes the often ignored but crucial side of alterity, that is, being other to oneself, thus rejecting the comforting idea of self-sameness. The idea of alterity here deserves closer examination. Firstly, I should note that the notion of alterity is often substituted with the notion of otherness in the works of scholars and philosophers. In this study, though, I refer to alterity as I believe that there is an idea of binary built into the notion of otherness, whereas alterity rejects the idea of reciprocity, representing to use Emmanuel Levinas’s words, “the absolute exteriority”:

*The relationship with the other is a relationship with a Mystery. The other’s entire being is constituted by its exteriority, or rather its alterity, for exteriority is a property of space and leads the subject back to itself through light. (Levinas 1987, 75-76)*

I begin my exploration of alterity with the change that the advent of psychoanalysis brought to the public awareness of the role of the unconscious. To understand the idea of alterity appropriately, one should first turn to Freud’s idea of the uncanny, developed in the essay *Das Unheimliche* in 1919. By using the German word *heimlich*, Freud demonstrates its ambiguity as it may at the same time point to something well known to us as well as to something hidden. Thus, *heimlich* apparently contains the seeds of the *unheimlich*, whose discovery creates the feeling of uncanniness. The uncanny in turn reminds us of our unconscious fears and desires. Rationality opposed the advent of the unconscious pushing it to the margins of its idea of being human. In the previous chapter on the norm, I mentioned the idea of “basic intuition” in defining what it means to be human. For the sake of rationality, basic intuition banishes the unconscious, not seeing it as a part of human nature, that is, normal human nature, which is supposed to be immune to unconscious desires. This idea is also important in connection with alterity and uncanniness since, in the rational discourse, to be normal means to exclude the unconscious as it is regarded as delusional, while those who are subject to those delusions are mad or deviant. Banishing the unconscious means, once again, retaining the binary of what constitutes normal and deviant human experience. In his analysis, Freud also used to neglect the dominance of normality, naming the normal ego “an ideal fiction”: “Every normal person”, he says, “in fact, is only normal on the average. His ego approximates to that of the psychotic in some part or other and to a greater or lesser extent” (1937, 235). From a different psychoanalytical point of view, Jung considered life a quest of realizing that there are powers beyond anyone’s conscious control originating from “where the dragon of chaos lives”, the primordial chaos of Tiamat, implying the unconscious (1968, 137). If one refuses to realize that part of human nature, one is doomed to an artificial personality. As James Glass mentions, “if psychosis, however, is part of human experience, then by

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16 See also Derrida’s reflection on the concept (Derrida 2005).
ignoring the messages and utterances of schizophrenics, the rational consensus banishes an integral part of human nature” (1987, 405). Consequently, if it does not constitute a part of human nature, a person with a mental diagnosis then ceases to be human in the fullest sense. Being beyond “normality”, one becomes “a kind of ultimate ‘other,’ a different kind of subject who can then be cast as not a subject at all but a creature with a different, deeply flawed brain” (Wood 2004, 202). I suggest that the inhuman nature of the mentally ill breeds the same uncanny feeling in the rational public as Freud’s own example of the doll Olympia in E.T.A Hoffman’s The Sandman (1816). The example of the automaton perceived as a living lady is a good example illustrating the difference of one’s intentions towards a living person and a lifeless being.

James R. Mensch, in his book on alterity, hiddenness and Levinasian ethics (2005), uses the terms “intending” and “exceeding”. Any time we deal with others, we should be aware that there is some hiddenness in them that cannot be overcome. Although the hiddenness represents something beyond one’s reach, we still assume it, as the other can inform us about it via language. Language appears to be misleading as it is inaccurate, as I argued above. From this it follows that language, first, gives the ability to dissemble and, second, contains the prejudices, patterns and categories one has inherited with it. Due to these categories we intend a person “from our own place”, granting him or her qualities and characteristics that are known to us. Yet some hiddenness or alterity remains, which is why the other should exceed us. In Mensch’s view, when the other exceeds us, he or she interprets the shared situation from his or her set of categories and the interpretation may fail to confirm our expectations (Mensch 2005, 8-9). When we intend the other we must be aware that the other has their own interpretation, and this awareness constitutes our responsibility and recognition of their humanity. Regarding the example of Olympia, the intending depends to a great extent on this recognition of humanity. If we intend Olympia as a living person who possesses freedom but then realize that she is an automaton, we feel that Olympia offered us less than we had intended. If the situation is reversed, the person would offer us more than we intended, that is, they will exceed us. Mensch writes that “in giving himself as free, the person sets a limitation to my treatment of him” (2005, 80), yet if “we fail to recognize the humanity of the other, when, through stereotyping, we reduce him to a thing or an animal, we conceal the evil we do to him” (ibid., 117). For many, intending a person who is deemed deviant or mentally ill is the same as intending Olympia. This is how stereotyping works: I use my own categories when I intend the other and, according to my stereotypes, I consider myself normal while the other is deviant, mentally ill, less than I intend when I intend a human. This means that in intending less than human, one “does not feel the need to transcend the social norms that set stereotypes”, that is, “instead of encountering person, I think of the stereotype and close the door” (ibid., 173).
What, in fact, does intending a mentally ill person or rejecting humanity imply? Mensch argues that it implies that we reject the alterity, i.e., deny the idea that the other possesses alterity. To stereotype is to deny alterity, he says. To deny alterity means that the other cannot exceed my intentions or, more simply, be more than I expect of them. I suggest that the reason for such denial is fear, failure to apprehend the alterity. When rationality denies something, it seeks to banish it, or rather as Rodolphe Gasché (1986) puts it, to domesticate it. To domesticate alterity means either to reduce it or make it appropriate for rational understanding. In his book on the ethics of deconstruction, Simon Critchley points to the fact that it is the project of philosophy (as metaphysics) in general to “master the other, thereby reducing its alterity” (1999, 19).

Is there a goal, then, to overcome alterity, since it is feared so much? I mentioned above that, according to Mensch, alterity cannot be overcome due to the ungraspable hiddenness of the other, which is, however, reduced by stereotyping. Thus, once alterity is completely overcome or domesticated, the logocentric world, which has been divided into binaries and contains nothing disguised or unapprehended, will reign. The world of domesticated alterity is a void space where everything is given its place in the classification or its set of categories. It can also be called the world of Husserlian “exact science” that banishes subjective narratives as savage (as discussed in the Introduction) or the world of the spherical cow (as discussed in the previous section). I would suggest that instead of reducing alterity, we ought to consider reducing the fear of alterity. Deconstruction, in turn, does not seek to disestablish either Western philosophy, which wishes to domesticate alterity, or alterity itself. Deconstruction “desired to keep open a dimension of alterity” (Critchley 1999, 29) so that it can point to the Derridean “unsayable”, to that which is beyond philosophy, tradition or binaries. In this sense alterity is not represented as a negative phenomenon along with postmodern undecidability or incalculability, which implies an absence of stereotyping or, if we suppose that the categories are inevitably inherited with language, at least the readiness to face how those stereotypes are exceeded. Watkin explains Derridean incalculability as follows: “Calculability is not exceeded in a moment of ‘anything goes’ but in an openness to the other who comes, the alterity which a strict calculability would foreclose” (2009, 91).

Mikhail Bakhtin’s idea of unfinalizability can also be mentioned in connection with alterity. Unfinalizability consists in supporting dialogic relations, those which allow one to face alterity or otherness without trying either to appropriate it or sacrifice one’s own position. To explain his position Bakhtin uses the notions of live entering [vzhivanie] or, in some translations, empathy, and pure or passive empathy [chistoe/passivnoe vzhivanie]. Unlike passive empathy, vzhivanie presupposes the maintaining of one’s own place, the irreducibility of alterity, yet the respect to the other: “I empathize actively into an individuality and, consequently, I do not lose myself completely, nor my unique place outside it, even for a moment. [...]
Empathizing actualizes something that did not exist either in the object of empathizing or in myself prior to the act of empathizing” (ibid., 15). Luce Irigaray mentions that a certain “third world” is created when one is able to be with the other without reducing the other’s subjectivity to one’s own (2012, 110). When discussing alterity and hiddenness I quoted Mensch, who writes that if the worlds of the two participants merge, they will not be two anymore but one of them is duplicated. The respect for the outsidedness of the other reflects a similar idea, as Bakhtin notes that “pure empathizing as such is impossible. If I actually lost myself in the other (instead of two participants there would be one—an impoverishment of Being)” (ibid., 16). Being is thus impoverished when dialogue is no longer possible or sustained. Reducing the other to one’s set of rules or categories, thus expressing no respect, is a failed dialogue. Moreover, the set of rules or categories is often not one’s own in that it does not manifest any responsibility—the categories are often acquired culturally or linguistically and their inherent morality is not questioned.

Luce Irigaray notes that in a culture where we operate with a number of dichotomies that make our world into something finished, we do not know how to “attain a culture of alterity, of relation with the other as such, of acknowledgment of the other as irreducible to us” (2004, 25). Yet the eventual attainment of an alterity culture could illuminate us, as we would give up the habit of appropriating and accept that the other remains unknowable and irreducible to some object of knowledge. One of the most important aspects of respect for alterity is that it does not lay claim to achieve a full understanding of the other’s experience—it does not even aim at it. Derrida’s refusal to “domesticate” alterity is of the same nature. In my analysis of narratives of mental illness and difference, I emphasize that it is not shameful to fail to understand the other’s experience or, rather, what others may experience, but it is bigotry to categorize as deviant those that we do not understand.

Is there, though, a way in which we could imagine overcoming hiddenness? There are certainly things that cannot be seen but can still be imagined. It is an unreachable ideal, but if we allow the possibility of knowing the other’s experiences and memories, one can theoretically imagine oneself in the shoes of the other. There is, however, a problem with attaining the right goal, which is concerned to a certain extent with the discussed calculability. If the other’s mental life is revealed to us completely, we can predict what the other would do, as it is the same as we would do. As Mensch argues, his life “would merge with my own” (2005, 3) and thus we would obtain knowledge of ourselves, not the other. Moreover, the other “would not be an other, but would rather be myself duplicated” (ibid., 8). When one is duplicated, one is predictable, thus calculable, and for this reason the other should exceed us.

Yet the idea of experiences “merging” can be further complicated. If “the hidden is the other” as Mensch says (ibid., 2), should it follow, then, that the unhidden is
the same? There is, however, hiddenness not only in the other but also in the individual, as no one is completely transparent to oneself. In this sense, alterity implies that each subject is an other not only to the other, but already to themselves. It is therefore important to understand alterity as more than just a synonym for difference or external difference. Although Derrida uses the term *différance*, he does not imply exteriority. Difference for Derrida is a radical alterity that is found within the self-identical subject. Alterity, being within the individual, accounts for “the impossibility for an identity to close in on itself” (Brandt 1997, 120). This impossibility leaves a certain spacing, inner distance or splitting which is made by the alterity within the individual. Peeren and Horstkkotte in *The Shock of the Other* (2007) mention that “alterity disrupts the illusion of self-sameness”, which can result in facing the “shock or shame of discovering the other in the self” (2007, 11).

Encountering alterity can lead to the unexpected revelation that: “The other can be more like me than I expected or I can find myself to be other to myself” (ibid.). While there is inabsorbable hiddenness in the other, there is also hiddenness in me, the other-in-the-same. In trying to assimilate the other, we reduce the significance of the hidden in him or her, thus failing “to arrive at an authentic thought of the Other”, as the despotism of the Same, which is incapable of recognizing the Other” (Badiou 2001, 18-19). This despotism means that one considers the Other from the place that is revealed as the Same—and such consideration deprives the other of his or her agency. “Alterity appears as a nonreciprocal relationship” (Levinas 1987, 83); that is, if we suppose that we obtain full knowledge of the other, we would thus lay claim to the identification. If we somehow admit the alterity in ourselves and in the other, then, as Levinas says, our relation to the other is a relation with “this other-in-the-same […] who cannot be together with the same, who cannot be synchronized with it” (Levinas qtd. in Mensch 2005, 42). But, as I note above, merging is not the goal. Moreover, I agree that the place that our identity is supposed to have is not guaranteed, and its grounds are not secure (Peeren and Horstkkotte 2007, 11). Moreover, it is alterity that “causes the ground to shift under the self’s feet” (ibid.), being an openness to the new. In this sense Levinas calls the other the future. He writes that “the future is what is in no way grasped […] the future is […] what befalls and lays hold of us. The other is the future. The very relationship with the other is the relationship with the future” (Levinas 1987, 76-77).

It makes sense that Peeren and Horstkkotte call their book on alterity *The Shock of the Other* and claim that “alterity delivers a particular type of the shock to the system” (2007, 10). Pointing to the excess, alterity presents a postmodern threat and a challenge to the secured place in the world, well-defined identity, sameness and finally—normality. When Derrida refuses to eliminate alterity and does not pursue the goal of domesticating it, he wishes to renounce the philosophic aspiration to arrive at the ultimate truth, to gain an objective universal knowledge. Alterity reveals the mechanism of stereotyping, thus challenging the norm and deviance binary and, to a certain extent, complicates the binary of the same and the other.
In his early works Derrida used the term closure to demonstrate the desire of logocentrism and metaphysics for closure and totality, that is, to always “master the limit” and “command one’s frontiers and thereby regulate the traffic that moves in and out” (Critchley 1999, 74). Derrida uses deconstruction to show that the dominant interpretation that logocentrism embraces has faults, inconsistencies “which are the marks of an alterity which the text is unable to reduce” (ibid.). Interruptions in any logocentric binary discourse are a form of alterity that helps to uncover the discrepancies of the discourse. When I mentioned that possession of language does not reduce the hiddenness of the mental life of others, I regarded language as a conventional system within which there are interruptions and uncertainties, as each sign within that system is subject, according to Derrida, to iterability. In his later works, Derrida referred to the idea of closure as a moving limit, as it restores its own transgressions and thus cannot ever come to an end, decision or calculable conclusion. The goal here is to demonstrate that stereotyping is calculating, is reducing. I mentioned earlier that the other has their own interpretation of the situation: to calculate that interpretation is to use stereotyping. Mensch in this case speaks of responding rather than calculating, that is, responding to the other’s interpretation, which is a “form of responsibility” (Mensch 2005, 9) that recognizes the other’s humanity and the hiddenness that the other possesses.

In the next section, I address the notion of the limit and its transgression in more detail. While logocentrism tends to “master the limit”, that is, to define the frontiers from the centre, the post-structuralist approach questions the dichotomy and the hierarchy that this implies. Transgression does not simply reverse the hierarchy of the binary, but rather challenges the impenetrability of boundaries.

### 2.3 PHILOSOPHICAL TERMINOLOGY

Since the post-structuralist approach is rooted in philosophy, it is necessary to provide an outline of philosophical ideas that underlie it in order to apply this approach to the analysis of literary works. In this section, I will examine several important concepts that I use throughout the study from the philosophical perspective. One of these key concepts, transgression, can be considered constitutive in regard to the other concepts and is thus useful for challenging normative attitudes. Very often transgression is seen as a threat to moral stability and common human values. Notably, such suspicion tends to be aimed at writings acknowledged as transgressive and at supposedly antisocial behaviour. Yet, what would those suspicious of transgression say if faced with Julian Wolfreys’s statement that *any* text “can be read as transgressive” (2008, 12)? In the following theoretical part of the current study, I will argue that writing does not need to be violent to be transgressive—such an attitude results, as a rule, from a narrow understanding of the notion of transgression. It is noteworthy that no texts
discussed in this study display any violence (there is a hint at violence in Will Self’s writing but, as I argue in Chapter 4, the nature of violence is ambiguous and metaphoric rather than actually taking place in these texts). However, all of the studied texts can be seen as transgressive in the sense they challenge the conventional boundaries of normativity.

In section 2.2, transgression is analysed in connection with the post-structuralist idea that binaries are never rigidly differentiated but rather contaminated by each other. Therefore, it is impossible to deal with either of the binary constituents separately. I refer to the notion of binary terror, used in the context of performance studies (Schneider 2013), to demonstrate that it is impossible to deal with the notions of norm and deviance as dichotomies and to analyse one separated from the other, that is, describing the norm in one chapter and deviance in the other. A transgressive attitude challenges the norm/deviance binary and helps to deal with dominant/marginal approaches to reading literature. Transgression points to the narrowness of the dominant approach and clears the way for other interpretations. For example, in Chapter 7 I use this theory to show how a dominant approach can be challenged when questioning the medicalized classificatory approach towards Christopher’s narrative, a character in Mark Haddon’s novel.

In the same way as it is limiting to comprehend deconstruction as destruction, it is limiting to perceive transgression as the anarchy-induced or even immoral renunciation of norms. I have mentioned that transgression is regarded as a threat to morals and moral stability. In order to challenge this view, I will turn to the analysis of the genealogy of morals in the second section of this chapter. However, my objective is not to denounce morals in favour of the Dionysian obscurantism of relativistic ideas. Neither is it the objective of Foucault’s or Nietzsche’s works that I refer to. I have found Nietzschean and Foucauldian perspectives useful for speculating on the myth of givenness and the natural character of morals. In the same section, I tackle the concept of identity and how it can be seen as either fixed (normative) or fluid and continuous (non-normative). In the case of identity issues there is a certain threat of classificatory behaviour that prescribes conformity to certain range of possibilities, which is one of the foundations of the process of stigmatization. I call it a threat as it may result in limiting or narrowing one’s outlook to a single way of being: as Lennard Davis writes, “few of us are just one thing”, because “identity is intersectional” (2014, 18). The rational approach tends to divide the world into binaries and, therefore, one is supposed to herd, to use Nietzsche’s term (e.g. 1968), to one of the alternatives or, in other words, to identify oneself with one or another.

Thus, this chapter deals with the theoretical implications of such philosophical concepts as transgression, morality, identity—all of which are central to the theoretical background of the current study. The discussion of these concepts will provide a basis for my analysis of literary works in Chapters 4-7, which challenge the demonizing attitude towards mental illness and stigma attached to people with
mental issues, traumatized people or those who display unconventional views. All of the protagonists presented in Chapters 4-7 can be called unconventional or different. In other words, all of them are diagnosable, but not all are diagnosed.

2.3.1 Transgression

“I repeat, if you want to be healthy and normal, go to the common herd”
Anton Chekhov

In this section, I will examine the deconstructive ability of transgression to show that binaries are always permutable. There is no system that excludes transgression—on the contrary, its limits always presuppose the possibility of their transgression. As Derrida notes, “in the analysis of so-called normal cases, one neither can nor ought, in all theoretical rigor, to exclude the possibility of transgression” (1988b, 133). I will first turn to Georges Bataille as one of the most prominent philosophers of transgression and examine his critique of absolute knowledge and absolute difference (e.g. between the sacred and the profane). Secondly, I will refer to Foucault’s analysis of transgression and limit-experience that provides a basis for his theory on madness and power. According to Foucault, the challenge of transgression is needed as means of comprehending one’s own self and acceptance of the other. I also refer to Nietzsche’s ideas since they have impacted Foucault’s thinking and post-structuralism in general. In an interview, Foucault likens reading Nietzsche to “opening a window”: 

Nietzsche was a revelation to me. I felt that there was someone quite different from what I had been taught. I read him with a great passion and broke with my life, left my job in the asylum, left France: I had the feeling I had been trapped. Through Nietzsche, I had become a stranger to all that. (Martin 1988, 13)

Lastly, to demonstrate the deconstructive (but not destructive) character of transgression I will also examine the concepts of carnival and laughter and their deconstructive ability to question the binary logic and the givenness of conventions in general. This is relevant to this study as such a deconstructive ability may also be used outside of a strictly carnival sphere for the purposes of decentralization.

It would be unfair to deny that some of the general public’s fears concerning transgression are warranted. Transgression does, in fact, pose a threat. It is by no means, however, the kind of a threat to moral values that could plunge the world into chaos. Rather it is a threat to the solid order supported by social norms and conventions, a threat to the trust put into one’s secure position in the world. This order is supported by such binary oppositions as norm and deviance and presents a general reason why I turn to the concept of transgression in this study: the established order is often equated with the idea of “being normal” that provides one with a feeling of security and superiority above those considered deviant. The
solid order also presupposes staying within those binary categories and operating with them without ever questioning their status as being something natural, given or sacred. Yet, as in the case of deconstruction, transgressiveness is always at work within the system to be deconstructed as it is already locked into that system (Derrida 1989). The philosophical formula “always already” is illustrative here: it is not deconstruction that creates inconsistencies—they are always already hidden within (or, to use Derrida’s term, there is a trace of contradiction; moreover, only a challenge from within the customary system can lay bare the inconsistencies, shattering the system at the same time. Concerning the famous anything-goes critique of deconstruction, Derrida says that deconstruction “is not ‘inherently’ anything at all. […] It is ‘inherently’ nothing at all”, implying that it “does not exist somewhere, pure, proper, self-identical, outside of its inscriptions […] it ‘is’ only what it does and what is done with it” (1988b, 141). The concept of trace presents a good reason why it is impossible to discuss deviance outside of the norm or to claim that norm is the absence of deviance (as the definitions in the DSM read). This always presupposed range of alternatives is only an imitation of freedom of choice—for which reason the concept of transgression has inevitably become the key concept of post-structuralism.

During his nervous and transgressive last appearance on stage a little more than a year before his death, Antonin Artaud said: “If there had been no doctors there would never have been any sick people” (1976, 529). The idea of one depending on the other and presupposing each other is what can be well demonstrated by a metaphor of the system of signs and the trace inherent in it. In other words, when considered in a binary system, madness exists in its relation to normality and vice versa. For example, George Canguilhem—the first professor to read Foucault’s doctoral thesis—was very much surprised by the thinker’s idea of madness being “an ‘invention,’ a product of social relations—and not an independent biological reality” (Miller 1993, 103). “Madness only exists in society”, Foucault insists, “It does not exist outside of the forms of sensibility that isolate it, and the forms of repulsion that expel it or capture it” (Miller 1993, 98). Interestingly, scholars in the field of disability studies have been traditionally divided into two broad groups: the “social constructionists” and those holding the medical model view. Both have been criticized for the way in which they approach people with disabilities, and the most recent theories, referred to as “interactionist”, tend to abandon the binary of the medical and the social (Hall 2016, 27). As a result, the interactionist perspective does not reject the fact that the identities of disabled individuals are socially constructed. However, it also takes into account the assumption that these identities are “complexly embodied” and are, therefore, “real” (Siebers 2008, 30). Thus, the interdependence of the “constructed” and the “real” is emphasized.

As Anne Waldschmidt puts it, “when we define ourselves as normal, we also simultaneously define who should be considered as abnormal in comparison to us” (2005, 192). In a similar vein, Barry Allen claims in his article that “it is as
impossible for a person to be ‘impaired’ without reference to a statistically constructed ‘normal case’” and that “impairment has no reality apart from the social mathematics of normalizing judgment” (2005, 94-95). It is important to realize that the elimination of the opposition always already hidden in a notion is not the way to escape the binary system. The well-known Slovenian philosopher Slavoj Žižek has commented on the failed attempt to imagine the world without the other: “The mistake of such an attitude is not that it is ‘too radical,’ that it wants to annihilate the Other instead of merely changing it; but, on the contrary, that it is not radical enough: it fails to examine the way the identity of its own position […] is ‘mediated’ by the Other” (2000, 72). Foucault was not one to suppose that by simply trespassing against the norm the binary of norm and madness would be unsolidified. This statement can be supported by Foucault’s reaction to the famous call of gay activists in 1968 to “come out of the closet” (D’Emilio and Freedman 1988, 322). While activists regarded such a call as a protest and a process of escaping the boundaries, Foucault did not want his name to be associated with the movement. He believed that such protests “assumed that one had a more or less fixed sexual identity that was worth avowing in public”, and that the affirmation “I am a homosexual” was a “necessary affirmation of a right, but at the same time a cage, a trap” (Miller 1993, 256). A cage of labelling and of choosing either this side or that side was impossible for Foucault, who said: “Do not ask who I am and do not ask me to remain the same” (1972, 17). Interestingly, Derrida uses the same metaphor of a trap when speaking of a stable identity: “Look out for the trap”, he says, “you’re caught” (1995a, 340).

The notion of binary terror mentioned above reflects how solid and “rigid” social binaries are: “The rigidity of our social binaries—male/female, white/black, civilized/primitive, art/porn—are sacred to our Western cultural ways of knowing” (Schneider 2013, 13). Scholars find the roots of the Western binary system beyond the “totalizing” of Hegel’s dialectic—in Aristotle’s logic and his syllogisms that propose either-or logic, condemning the halftones of the grey area (Jenks 2003, Jervis 1999). These binaries maintain the dominant order. Schneider points out the necessity to interrogate these rigid distinctions in order to see how they structure social networks. “Modernist avant-garde methodological collapse of such distinctions”, (ibid.), as well as binary terror, are what fascinated Georges Bataille, founder of the French College de Sociologie and the philosophe maudit, as well as Antonin Artaud, founder of the Theatre of Cruelty, and Alfred Jarry, the proponent of pataphysics. In Schneider’s examination of Robert Mapplethorpe’s art, often associated with pornography, it is no wonder that reference to Bataille appears: “Binary terror is provoked when the word ‘art’ is flashed over the image ‘porn’” (ibid., 14). This clash or explosion of binaries exposes the collision that has always resided within social networks.

It seems to me wholly fitting to begin my discussion of transgression with reference to Bataille as despite, or perhaps due to, the problem of classifying his
work (as he transgresses the common disciplinary boundaries of art, literature, poetry, philosophy and pornography and can be referred to as both postmodern and modern), Bataille was clearly of immense interest to Blanchot, Foucault, Baudrillard, Lyotard, Derrida and others. It is interesting that Foucault’s famous essay “A Preface to Transgression” first appeared in *Hommage a Georges Bataille* (1963). Moreover, Foucault assisted in the publication of Bataille’s *Oeuvres complets* (1973). To justify my reference to Bataille, I will provide a short outline of his “encounter with the impossible” (1988). Encountering the impossible means, for Bataille, forever being at the limit or at the threshold of the impossible, of having a transgressive expérience intérieure. This inner (or, in some translations, interior) experience is the experience of transgression or, as Derrida writes, “that which indicates itself as interior experience is not an experience, because it is related to no presence, to no plentitude, but only to the ‘impossible’ it ‘undergoes’ in torture” (2005, 344). Bataille’s disavowal of the absolute spirit and absoluteness is a key issue for post-structuralism: “Non-knowledge attained”, writes Bataille, “absolute knowledge is no longer anything but one knowledge among others” (1988, 55). Absolute knowledge is for him a limit to experience, not a limit-experience. Hegel’s philosophy requires knowledge, while his is the philosophy bordering on poetry, which is a form of encounter with the impossible, it “introduces into the ‘philosophically serious’ the figures of the game” (Pefanis 1991, 101). Poetry (or literature, or art) resides in the very transgressive zone where the sacred and the profane are continuous. “In the [Hegelian] ‘system’, poetry, laughter, ecstasy are nothing”, Bataille writes, “Hegel gets rid of them in a hurry: he knows of no other end than knowledge” (1988, 111). Bataille’s idea of the heterogeneous “de-coheres away” (Wolfreys 2006, 175) from the traditional understanding of philosophy as unambiguous and coherent.

Derrida notes that “taken one by one and immobilized outside their syntax, all of Bataille’s concepts are Hegelian” (2005, 320), however, they acquire their impossible transgressive nature, and for that reason “the reading of Bataille […] must not isolate notions as if they were their own context” (ibid., 345). Thus, the notion of sovereignty, although taken from the same spectrum as Hegel’s lordship, or the notions of the sacred and the profane, acquires a new impossible perspective in Bataille’s philosophy. The absolute difference between the sacred and the profane is non-existent for Bataille: sovereignty is attained “in the festivity of sacrifice and in its sacred violence” (Michelson 1986, 115). There is a profound difference between “the man of sacrifice, acting in ignorance (unconscious) of the full scope of what he is doing, and the Sage (Hegel) surrendering to the implications of a Knowledge which, in his own eyes, is absolute” (Bataille 1990, 19). Bataille’s interest in the notion of sacrifice resulted in his founding a secret society and a public review Acéphale, in the last issue of which he called the process of a sacrifice dying while watching oneself dying a “practice of joy before death” (Pefanis 1991, 46). The continuity of the sacred and the profane is stressed in
Bataille’s philosophy as the experience of death “opens the door into what lies beyond the limits usually observed” (Bataille 2001, 67); thus, transgressing the limits, exceeding them in the profane world, propels one beyond the moral realm into the sacred and the self is surpassed in death and ecstasy. It is important to note that the profane is in no way eliminated in transgression: Bataille argues for the reconciling of the sacred and the profane as heterogeneous, they are interrelated though not discontinuous, not absolutely divided as in Durkheim’s thought (1965). Thus, transgression maintains the limits, that is, the rules, morals or taboos, as otherwise there is no place for transgression to reside in. Similarly, the limits maintain transgression as they are always considered open to being trespassed.

Mentioning that transgression has its “calcinated roots, its promising ashes” (1977a, 33) in Bataille, Foucault writes that “transgression has its entire space in the line it crosses” (ibid., 34) and thus gives transgression one important characteristic: it is always involves a limit and is, therefore, never limited. Earlier I discussed Foucault’s attitude towards fixed identity and his demand not to be asked to stay the same (1972, 17). To express the idea of transforming, Foucault adopted the term limit-experience, associated with Bataille’s mysticism of encountering the impossible, the limits of sacredness and death, and the Nietzschean turn in Bataille’s philosophy. “Do you think”, says Foucault, “that I would be so stubborn, so reckless, if I were not preparing—with a rather feverish hand—a labyrinth into which I can venture […], where I can lose myself and appear at last to eyes that I will never have to meet again” (1972, 17).

This metaphor of the labyrinth can be examined through the lens of Friedrich Nietzsche’s theory of daimon. Nietzsche’s ideas of finding one’s true daimon, becoming a “a self-propelled wheel”, and “creating beyond oneself” (1978) reflect Foucault’s idea of following a labyrinth in order to accept and find his own self—a labyrinth which in the meantime represents the seeker. “What returns, what finally comes home to me”, says Nietzsche, “is my own self and what of myself has long been in strange lands” (ibid., 152). Nietzsche’s return of the self reflects Foucault’s story of the labyrinth, where in Foucault’s words, the labyrinth is “no different in nature from the monster it contains” (1970, 905), as the labyrinth encloses and explains him from within. The labyrinth as an example of an other site, a heterotopia that dissolves the boundaries between inside and outside: the self is lost in this heterogeneous experience, yet otherness is encountered. The labyrinth becomes a metaphor for otherness as its horror consists in the very fact that it is a “dangerous and subversive site, destroying established boundaries and conventions” (Botting 1996, 83). A monster found in the labyrinth is what Foucault seeks to recognize and understand—a notion closely related to the thinker’s vision of madness and power. “I had had a personal, complex, and direct relationship with madness, and also with death”, says Foucault in his interview with Duccio Trombadori (Miller 1993, 113). In the search for the origins of the mentioned “direct relationship”, Foucault created Madness and Civilization (1960) as his doctoral thesis. Not aiming at creating
a conventional thesis on history, Foucault manages to provide insight into the essence of madness and to analyse the experience that is spoken and brought into the light from the depths of madness par excellence.

Being receptive to Nietzsche’s idea of the “return of the self”, Foucault challenges the boundaries of any possible experience by “moving from an interrogation of the limit and of transgression toward an interrogation of the return of the self” (Miller 1993, 142). For Foucault, Nietzsche’s “creating beyond oneself” is a further development of the Kantian idea of free will. Kantian philosophy and the philosopher’s strict division into transcendent and empirical subjects were of great importance to Foucault: the notion of free will implies that the world is not given as some pre-constructed entity, but is to be “created beyond”. It can be transformed and transfigured by means of transgressing the limits and emphasizing the limit-experience. It is important to highlight that the main significance attached by Foucault was to facing the void, walking along the edge of the abyss. For Foucault, transgression was about emphasizing the very limit itself, rather than escaping or eliminating it—an idea expressed as the “limitless reign of the Limit” (1977a, 32). When Foucault speaks about heterotopia and places in which to isolate the mad, he emphasizes the margins: “At the edges of the community, at town gates, large, barren, uninhabitable areas appeared, where the disease no longer reigned but its ghost still hovered” (2006, 3). The gates of the cities are mentioned here but not the space behind them—living right on the very margin, along the border or limit is emphasized. Transgression is “not a victory over limits”, it does not carry that meaning of protest that gay activists ascribed to their movement, it rather “affirms limited being—affirms the limitlessness into which it leaps as it opens this zone to existence for the first time” (Foucault 1977a, 35; emphasis added). Such limitlessness is one that, besides the limit itself, includes the inside and the outside, “for transgressive thought, what lies outside each unity or totality (and which defines it as a unity) also works within it (in order to delimit it). This is one sense, then, in which transgressive thought occupies the open rather than the closed border” (During 2005, 80). The affirmation of a “limited being” is in a way related to the notion of undecidability ascribed to Derrida and discussed later in this study.

Madness, in Foucault’s philosophy, is an experience located precisely on such a border: a madman is “confined at the gates of the cities: his exclusion was his confinement, and if he had no prison other than the threshold itself he was still detained at this place of passage. In a highly symbolic position he is placed on the inside of the outside, or vice versa” (Foucault 2006, 11). This is the case because madness is not opposed to reason, and so the given binary cannot be eliminated here. All the attention is given to the tiny line between the two that shows that they are not simply “not opposed” to each other, but rather interchangeable and permutable: “Delirium is a reason which is so blinded by its own light that it loses that light at the very moment that it retains reason’s structure. It is a simulacrum of reason” (During 2005, 34). Presenting a fissure, a loss of oneself, a challenge, and a
question to the world that need not be answered, madness appears to be a “nondiscursive language” (Foucault 1977a, 39) that opens a void and the experience of the limit, which fascinated Foucault so much. The reason the philosopher speaks mainly about the artists’ madness is not that that works of art are unreasonable in essence, but that madness “is a constitutive moment of an abolition, which founds the truth of the oeuvre in time; it delineates the outer limit, the line of its collapse, its outline against the void” (Foucault 2006, 536). Here, “to question” means to turn around itself and see the “excluded language” (ibid., 549) that is responsible for the experience. The interrelations of reason and unreason as well as the separation of reason from the standpoint of unreason, is what is important for understanding transgression as inherited from Bataille’s philosophy. Derrida writes that “the slumber [of reason] engenders monsters and then puts them to sleep; [...] The slumber of reason is not, perhaps, reason put to sleep, but slumber in the form of reason, the vigilance of the Hegelian logos” (1980, 318). “Reason keeps watch over a deep slumber in which it has an interest”, he continues, at the end of the night, when opening the eyes would mean risking death, philosophy completes itself including “all the figures of its beyond” (ibid.). Reason “takes hold” of the “enunciation” of those beyond figures, yet there is one thing it could not devour (or re-enclose and restore as in Derrida’s closure). And that is laughter. Below, I will examine the concept of carnival as one of the transgressive “techniques” that can unsettle the binary logic by moving beyond the dichotomized structure of thinking, and the concept of laughter that reflects the artificial nature of conventional morals.

Bataille’s Dionysian ecstasy, laughter and poetry, which invade philosophy beyond Hegel’s system, are what open different possibilities for reconstituting philosophy, making it less absolute and rigid. Dionysian ecstasy means as much to Bataille’s philosophy as carnivalesque laughter to Bakhtin’s. Bakhtin highlights three main features of carnival laughter, namely its festivity or globality; its universality and ambivalence as “it asserts and denies, it buries and revives” (1968, 11-12). Carnival knows no authority or dogmatism and therefore undermines the seriousness of high culture, immortality and absoluteness: “Carnival celebrates temporary liberation from the prevailing truth of the established order; it marks the suspension of all hierarchical rank, privileges, norms and prohibitions, [...] it was hostile to all that was immortalized and complete” (Bakhtin 1968, 109; emphasis added). Thus, carnival parodies the social order and inverts it—that is why laughter, as Derrida noted, cannot be appropriated by reason, for it would explode it from the inside. Yet, the idea of carnival as Bakhtin presented it came up against opposition mainly due to the understanding of carnival as a short, officially authorized feast. I added emphasis to the word temporary in the above quotation because, as Jenks puts it, “the dominant ideology and the ruling group released their control for a day to regain their power in full thereafter at the cost of some slight indignity” (2003, 167). Eagleton finds carnival ineffective as it is “a
permissible rupture of hegemony”: he equates it with Olivia’s remark regarding an “allowed fool” in whom “there is no slander” (1981, 148).

In general, critics are concerned with the fact that carnival fails to overcome the dominant order due to its fleetingness and dependency on governmental permission (Bruner 2005, Sales 1983). Regarding such criticism, Stallybrass and White (1986) suggested viewing the carnival transgression of official culture in two ways. If it is the case that carnival merely inverts high and low, the hegemony of the binary system is not overcome in any fundamental way. Yet, if a process of “merging of elements usually perceived as incompatible” (ibid., 44) takes place, then the binary system is unsettled and the hegemony is threatened. In this latter case there is a possibility to “shift the very terms of the system itself, by erasing and interrogating the relationships which constitute it” (ibid., 58; original emphasis). It is quite evident that the official culture wishes to control the carnival and retain its hegemonic order, and so it does not ban the carnival as it realizes that banning could “spread the germs” and transgressive actions would occur in everyday life (I will discuss this idea in detail when examining how the deviant groups are formed). It is important to note that such “spreading” is exactly what poststructuralists want to emphasize, which is why the idea of carnival and order can be paralleled with the way that norm and deviance are interdependent. Effective transgression17 is not limited to carnival, it retains its deconstructive force outside the context of the feast, in non-carnival spaces.

To conclude this section, it is worth noting that what pretends to be a transgressive movement may often also take the form of hegemonic order with solidified rules and an authoritarian centre that generates a binary of what is allowed and what is sanctioned. As such hegemony loses its initial transgressive characteristics, it might be transgressed itself. One actual example is the story of Andre Breton excluding Bataille and Artaud from the Surrealist movement that he domineered (Matthews 1986). Rational approaches tend to exclude everything alien from being called rational, and it often appears that they exclude human characteristics that are labelled unwelcome because they are troublesome. Transgression demonstrates that rationality and boundaries are constructed so that one can transcend them, but not deny or destruct them. By discussing Bataille’s, Foucault’s and Bakhtin’s views on transgression, limit and carnival in this section, I have demonstrated that transgression is neither negative, nor violative. Transgression always keeps an idea of order within itself in the same way that order contains an idea of transgression. Similarly for Foucault, transgression and the limit are related by way of a spiral; he finds a brilliant metaphor for transgression, saying that it reminds him of a “flash of lightning in the night which

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17 Stallybrass refers to transgression as symbolic inversion, understood not just as inversing binaries, but as a “movement into an absolutely negative space beyond the structure of significance itself” (ibid., 18 original emphasis); Foust mentions it under the notion of companion subjectivity as a transgressive mode of resistance, taken from Nietzsche’s rejection of the herd-shepherd binary (2010).
[...] gives a dense and black intensity to the night it denies [...] and yet owes to the dark the stark clarity of its manifestation” (1977a, 35).

The next section will continue the analysis of transgression from the point of view of morality and will question the foundation of morals with the help of Nietzsche’s genealogy of morals. The discussion of morals is important for approaching the idea of what constitutes a fixed identity and an incoherent identity. This often serves as a reason for a sharp differentiation between normal (fixed) and deviant (incoherent) identity and behaviour (discussed in more detail in terms of sociology below). Since the norm is always relational, that is, it demands deviance in order to be measured against it, the lack of a coherent identity may be a foundation for stereotyping and “exclusion” of the non-conventional from the range of normative.

2.3.2 Morals and Normative Identity

However utopian Bakhtin’s carnival might be, the idea is widely used in many different concepts of transgression and strongly influences or provides the foundation for the majority of anti-hegemonic transgressive movements. Carnival is crucial to critical theory and postmodernism with its decentralization and indeterminacy (I will demonstrate the usefulness of the concept in Chapter 4 dealing with Self’s postmodern texts), as well as carnival laughter being one of the issues central to the genealogy of morals in Nietzsche’s and also in Foucault’s views. In the essay On the Genealogy of Morals (1887) Nietzsche speaks of laughter and cheerfulness—the only things that the poison of the given moral values cannot endure: “Cheerfulness—or in my own language gay science—is a reward: the reward of a long, brave, industrious, and subterranean seriousness, of which, to be sure, not everyone is capable” (1989, 21). The day, says Nietzsche, “we can say with all our hearts, ‘Onwards! our old morality too is part of the comedy!’”—the Dionysus, as “the grand old eternal comic poet of our existence” (ibid., 22; original emphasis) will be enthroned once again. Bakhtin’s idea of carnival is reminiscent of Nietzsche’s Dionysian as they both dissolve the hegemony and through the cosmic Dionysian laughter challenge the hierarchy and the normativity of morals. The following passage from Nietzsche’s Thus Spoke Zarathustra addresses the power of laughter:

When I came to men I found them sitting on an old conceit: the conceit that they have long known what is good and evil for man. [...] I disturbed this sleepiness when I taught: what is good and evil no one knows yet, unless it be he who creates. [...] And I bade them overthrow their old academic chairs and wherever that old conceit had sat; I bade them laugh at their great masters of virtue and saints and poets and world-redeemers. (1978, 196; original emphasis)
Nietzsche’s perspective on morals is often mistreated due to its supposed shockingly light-minded immorality. Yet, the characteristic of lightmindedness can hardly be applied to the approach if the latter is taken up seriously: the demand to seek a “critique of moral values” and to call into question “the value of these values themselves” (ibid., 20) is not an immoral demand. It is a demand that leads to real experience: as Nietzsche puts it, “whoever […] learns how to ask questions here will experience what I experienced—a tremendous new prospect opens up for him, a new possibility comes over him like a vertigo, every kind of mistrust, suspicion, fear leaps up, his belief in morality, in all morality, falters” (ibid., original emphasis). What may actually be associated with such a critique is not immorality per se, but rather the questioning inherent genealogy, which results in self-transformation, as genealogy “allows us to reconstruct the grids of moral history by transporting us past the prisons of resentment and normalization” (Lightbody 2010, 46). In addition, self-transformation is central to Foucault’s interpretation of Nietzsche’s genealogy, where he emphasizes the issues of masquerade and carnivalesque changing of masks:

*The new historian, the genealogist, will know what to make of this masquerade. He will not be too serious to enjoy it; on the contrary, he will push the masquerade to its limit and prepare the great carnival of time where masks are constantly reappearing. No longer the identification of our faint individuality with the solid identities of the past, but our “unrealization” through the excessive choice of identities. (Foucault 1977b: 160–1)*

Foucault calls the genealogist a new historian for a reason: while history in the traditional sense “pretends to base its judgments on an apocalyptic objectivity” with its “belief in eternal truth, the immortality of the soul, and the nature of consciousness as always identical to itself”, it may still be useful to genealogy if the genealogy “evades metaphysics” and “refuse[s] the certainty of absolutes” (ibid., 152-3). “In what, for instance”, Foucault asks, “do we find the original basis (Ursprung) of morality, a foundation sought after since Plato?” He finds the answer in Nietzsche’s *Morgenröthe*: “In detestable, narrowminded conclusions. Pudenda origo [Shameful origin]” (ibid., 140-1). Those “narrowminded conclusions” are what genealogy is meant to avoid and for this reason it does not seek for origins or primordial truth: due to this it finds, as Foucault quotes from Nietzsche, “‘something altogether different’ behind things: not a timeless and essential secret, but the secret that they have no essence or that their essence was fabricated” (ibid., 142). It is, therefore, found, that there are things that only seem to be fundamental or natural concerning human beings, such as liberty or moral and social norms—I will discuss the reference to the latter as “natural” in more detail in the section on deviance and conventions. Or else, it becomes evident that, as Bataille noticed, “the taboos on which the world of reason is founded are not rational for all that” (2001,
He explains this by claiming that “we feel like laughing when we consider the solemn commandment ‘Thou shalt not kill’ followed by a blessing on armies” because “if the prohibition were a reasonable one it would mean that wars would be forbidden” (ibid.). Humanity does not seek the rationale that the rule should finally replace warfare: instead, “humanity installs each of its violences in a system of rules” (Foucault 1977b, 151). What this shows is that Bataille and Foucault emphasize how the “natural” or the “rational” appear to be not natural or rational at all under the gaze of genealogy or of anyone who poses the question of whether the given (moral) truths might appear to be erroneous or rather erroneously taken up as the sacred and the only possible.

Self-transformation in the manner of changing masks in the masquerade is one result of genealogy’s evading metaphysics: normalized society is fissured under the influence of critical thought; this fissure results in the disintegration of fixed identity or the refusal to pursue a solidified one-dimensional identity. Foucault explains that an identity “which we attempt to support and to unify under a mask, is in itself only a parody” and quotes Nietzsche saying that one can be “happy, unlike metaphysicians, to possess in oneself not an immortal soul but many mortal ones”—a complex system impenetrable to synthesis (1977, 161). The positivistic demand for a solid identity often substitutes difference for universality and sameness. What appears different is thus solidified to the extent that it is no longer dissimilar from the norm it appears to have departed from—for the solidification requires the elimination of internal inconsistencies. Foucault states that “philosophical activity” is today the “critical work” of thinking differently and consists in “the endeavour to know how and to what extent it might be possible to think differently, instead of legitimating what is already known” (1985, 8-9). A similar idea belongs to Nietzsche: “We have to learn to think differently—in order at last, perhaps very late on, to attain even more: to feel differently” (1997a, 60; original emphasis). Dwelling on Foucault’s idea of thinking differently, Tim Dean notes that this means thinking “beyond or against the status quo”, “against identity, particularly one’s own”, since “when difference coalesces into identity, one is no longer ‘thinking differently’” (2002, 25-27). In a way, to possess a coherent identity with a universally applicable set of rules and judgments is to engage in deception and, particularly, self-deception or in the “act of misrecognition (meconnaissance), a fiction, an illusion” (Bronfen 1992, 395).

Apart from the fact that such an acquisition of identity narrows one’s scope to a single perspective, there is an element of fear in condemning views that slightly, or radically, differ from one’s own. This is the fear for one’s own stable position on the one hand, and one’s own fissures and inconsistencies on the other hand. The entire process of condemning that stems from fear is what accounts for the equating of the “other” and the deviant, or transgression and deviance. A coherent identity with a universal set of rules is dismantled by Nietzsche in Thus Spoke Zarathustra, a process that starts with the issue of human language. On the one hand, Zarathustra’s
speeches are often misunderstood by the crowds as they wish to receive a coherent image of the truth or virtues, which are incommunicable for Zarathustra who sees that the crowd does not understand him. “No shepherd and one herd! Everybody wants the same, everybody is the same: whoever feels different goes voluntarily into a madhouse”, Zarathustra tells the crowd but then realizes, “they do not understand me: I am not the mouth for these ears” (1978, 18). On the other hand, Zarathustra does not wish to be a shepherd and preach to the crowd as virtue cannot be transparently and universally conveyed through words: “An insight has come to me”, he says, “let Zarathustra speak not to the people but to companions. Zarathustra shall not become the shepherd and dog of a herd” (ibid., 23). One becomes a companion and not one of the herd when, according to Nietzsche, one adheres to one’s own virtue and no longer seeks for clarity or coherence in the words of a shepherd: “If you have a virtue and she is your virtue, then you have her in common with nobody. […] Inexpressible and nameless is that which gives my soul agony and sweetness” (ibid., 36). As soon as the virtue is expressed in language, it is shared in a manner of preaching—the herd-shepherd communication is, for Nietzsche, the basis for reifying those virtues into norms, laws and morals. Zarathustra refuses to be a shepherd, refuses to solidify his virtues into universal norms that do not require critique or interpretation by the herd. Therefore, he prefers to call himself “a railing by the torrent”: “Let those who can, grasp me!” he says, “your crutch, however, I am not” (ibid., 40).

I would like to draw attention to the idea expressed above that the search for coherence is not needed. This idea applies to the question of identity and self as well as the challenges of language. The words “inexpressible and nameless” can be applied to attempts to remember and formulate one’s experience in order to share it. In the next chapter I will discuss in more detail the problems of narrativizing identity and, in particular, of telling the experience of mental illness as well as the experience of trauma (Chapters 5-7). One of the most illustrative examples of questioning language as a closed system and an imperfect mediator is represented by Antonin Artaud—I will refer to his writings throughout this study since, as Foucault says, “the fury of a poet like Artaud” (Miller 1993, 107) is needed to express experience and, in particular, limit-experience.

What I wish to emphasize by referring to Zarathustra is how the act of overcoming the herd-shepherd pattern prevents one from acquiring a fixed identity, often composed of given, foreign or borrowed virtues. Nietzsche’s view on morality and the creation of virtues should be correctly approached lest it should be misunderstood. It is easy to call his speculations extremely relativistic or anarchistic: “The interpretative pluralism it [doctrine] seems to be promoting – the view which holds that there is no single truth about the world, but only different interpretations which serve the need of ascending and descending forms of life – can easily degenerate into a theoretical anarchism” (Pearson 1994, 18). This certainly concerns the above discussed idea that the moment one’s virtues are put
into language, a set of categories is ready and a new convention or a rule has appeared as universal. Yet, to approach it from a different perspective is to see that what is stressed is not that anyone can generate any values they want, but rather that morality is not universal (as Nietzsche says, “to become moral is not in itself moral” [1997a, 59]). It could be argued that no accusation of Nietzsche of extreme immorality would find any support if one reads carefully why learning to think differently is important for Nietzsche: “It goes without saying that I do not deny—unless I am a fool—that many actions called immoral ought to be avoided and resisted, or that many called moral ought to be done and encouraged”, he says, “I deny morality as I deny alchemy, that is, I deny their premises” (1997a, 60).

While it may be complicated to follow the idea of companionship, it makes perfect sense for comprehending how one’s fixed identity requires putting the label of deviance onto anyone outside the scope of that fixed identity. One of the characteristics of slave morality is, for Nietzsche, that it “always first needs a hostile external world” to say from the outset “no to what is ‘outside,’ what is ‘different,’ what is ‘not itself’” (1989, 36), and how transgression helps the “subject to break its own limits and still remain itself” (Wolfreys 2008, 9). It is enough to mention, for one thing, that the definition of transgression is transgressive in itself, because “there is not transgression as a stable universal concept” (ibid.). Defining transgression as an act of deviance or as simple rule-breaking is as narrowing as defining deviance as (always) dangerous antisocial behaviour. As in the case of deconstruction, which is neither an “outside” view or operation, nor approach, nor method, transgressiveness is not something contained by some texts and lacked by others. A text can be read transgressively just as human behaviour can be transgressive or pretend to be fixed (I use the word “pretend” since a fixed stable identity is a self-deception, as discussed above). J. Hillis Miller wrote that “deconstruction cannot by definition be defined, since it presupposes the indefinability or, more properly, ‘undecidability’” and that it “can only be exemplified, and the examples will of course all differ” (1991, 231). When the urge for self-sameness and personal limits are transgressed, one’s identity becomes transfigured as the realization of multiple new possibilities opening up is made: as Wolfreys puts it, “transgression is in the imagined step beyond the self into any other life, losing the self in other possibilities” (2008, 15). The realization of other possibilities always involves an interrogation of one’s own position, all the more so if it is a fixed position. The interrogation may include anything that questions one’s identification with a certain group or groups and the values imposed by the group. It is also an interrogation of one’s very need to identify and stick to a group in order to remain bought to certain values or stereotypes.

The above explanation of the characteristics of transgression and its importance to this study seeks to demonstrate how to deal with Bataille’s claim that “evil is not transgression, it is transgression condemned” (Bataille 2001, 127). In this theoretical section, I have laid out Nietzsche’s understanding of the genealogy of morals,
which rejects the absoluteness and universality of their origins and emphasizes their being imposed by a group in a manner of a “herd”. I have also referred to Foucault’s idea of “thinking differently” and the importance of self-transformation for not getting into the trap of identity politics. Yet there is one further issue that underlies the speculations expressed in this and the previous sections. Transgression does not imply negativity in any of the described philosophies, yet the rejection of transgression, fear of its “destabilizing” power, is decisive for the occurrence of bigotry and subsequent stigmatization. Where Bataille speaks of experiencing limits as a human characteristic, there is no call for staying within them—quite the opposite is implied—pushing the limits of experience or the limit-experience per se. Where transgression is condemned and limits are solid, normativity occurs as the produced conventions turn into norms and thus define normality. Where transgression is not evil, it does not renounce conventions but shows that the patterns of norm and deviance that they produce do not match the reality one faces in everyday life. A condemned transgression or universal notions of deviance will not lead the individual to an experience of limits that could, in turn, lead to recognition and critical reflection on limit-experience.

Realizing that halftones are always at work in a seemingly black-and-white world is a frightening and illuminating moment. Foucault’s reign of the limit opens itself up as a liminal position. The ambiguity of the transitional state is fraught with danger—liminality promises no stable identity or certain place in a structured system apart from that on the threshold, yet when identity dissolves, the variety of perspectives opens up (see, e.g., Turner 1974, Thomassen 2014). Transgression, thus, should not and cannot be understood as mere violence or destruction for its own sake. Transgression does not eradicate limits or boundaries—it instead points to them and thus interrogates what lies on either side. It is only as a consequence of one’s fixed perspective and identity that transgression often appears to have a destabilizing effect. Transgressive reading of texts may have a similar effect: memoirs and fictionalized narratives of mental illness or difference that I will analyse in this study are an example of how critical reflection, self-reflection or self-irony point out whether one believes in their coherent identity or one admits that a decentralized and often messy self is a more relevant characteristic of almost any human being.

The next section will present a sociological perspective on the terms norm and deviance in general and will show how the wish to belong to a group and share the imposed views influences stereotypical thinking concerning people considered deviant by that group. What is lacking in such identification is responsibility for interpretation and critical reflection. Nietzsche has tackled the issue of the hidden inconsistencies and the constructive nature of the moral systems: “Nietzsche is the first philosopher to exult the fact […] that value is not something we discover, but something we invent” and “individual valuers are liable to derive their values from the culture of which each of them is a member, and to think that because they feel
the values imposed on them, it is the world in general that is doing the imposing, and not the group of which they are members” (Tanner 1990: 20–1). To understand better what is actually imposed when one deals with the universal notions of norm and deviance, I will discuss in the next section different views on how the notions of deviance and convention can be defined and why the concept of morality is thought to serve as a foundation for them. I will also specify how stigmatization and labelling result in refusing the other’s alterity as the stigmatized person is reduced to a stereotypical one-dimensional image.

2.4 SOCIOLOGICAL TERMINOLOGY

In the previous section I examined the concepts of transgression, identity and morals from the philosophical perspective. However, the perception of one’s own or the other’s identity is not formed in isolation—therefore, a sociological perspective is needed to show how the ideas of norms, conventions and deviance are formulated and operate in society. I examine the ways in which normality and deviance are dependent on the general public’s comprehension of norms and conventions. It is noteworthy that the label of deviance can be applied to almost any group of people, including those with mental illness. The following sections in this chapter speculate on the possibility of defining the concept of norm, central to the current study. Since norm is relational and cannot be viewed in isolation, I first examine the notion of deviance drawing on the interactionist, labelist, and phenomenological approaches, and the works of such theorists as Erich Goode, Howard Becker, and David Matza. One of the most important ideas presented here is the meaninglessness of deviance outside of a given society and in the absence of the judgment of others. In this sense, this chapter starts the discussion on judgementalism, which will be continued in Chapter 6 where the notions of empathy and sympathy are discussed. A judgmental attitude often results in the labelling and stigmatization of those considered deviant, and this connection between the notion of deviance and the act of stigmatization demands scrutiny. The notion of identity discussed in Section 2 is useful here: I will discuss how closely identity politics may be related to conformity which, in turn, leads to classifying and creating categories, or, as Nietzsche would have phrased it, it leads to creating common values, hence, authority (1978). The section “A Constructed Identity” discusses in detail Erving Goffman’s approach to differentiating between one’s selfhood and personhood, that is, one’s “human” self and “official” self, as well as his theory on stigma and deviance. The last section of this chapter returns to the issue of morality partially tackled in the previous philosophical section. The main objective of the last section is to demonstrate the often confused notions of social norms, normative and non-normative conventions and, most importantly, how these are confused with the idea of morality and immorality.
2.4.1 Deviance

It is an amusing paradox that if one aims to challenge the tendency to identify oneself and others in terms of the binaries of good and bad, normal and deviant, one should first define their meanings. This does not, however, sound nearly so paradoxical if one admits that there should be no single overarching definition or opinion in the first place. The previous statement, thus, is in itself part of the reflection on definition. When I mention that one solid definition is not compulsory, or even not possible, I do not intend to lay myself open to those who are always (already) combat-ready to apply the anything-goes label to deconstructive criticism. Neither do I wish to play into the hands of those accusing Derrida of unclarity, Dadaism, obscurantism and using neologisms that cannot be defined or words that are well known but used in odd contexts (Rorty 1989, Smith et al. 1992). Solid definition is part of the rationalistic quest for the ultimate truth—a quest integral to the traditional approach to identifying the normal and the deviant. From the point of view of a logician, establishing true statements is the fundamental and “ultimate aim of the acquisition of scientific knowledge” (Bochenski 2012, 7).

The postmodern critique of Hegelianism is quite illustrative here: the teleological character of dialectics tending towards truth and perfection is hard to perceive in the context of deconstruction. It is the idealistic approach to the possibility of absolute knowledge and truth common to Hegel’s phenomenology that was criticized by deconstructionists and existentialists (e.g. Kierkegaard). Yet, “universal human nature is not a very human thing” (Goffman 1955, 231; emphasis added). My view is supported by the proponents of interactionist, labelist or phenomenological approaches in sociology (also named constructionist as opposed to explanatory or positivistic [Ritzer 2011]). According to Erich Goode, the interactionist approach, which stresses the importance of the social context in defining deviance, represents a threat to conventional moralists and orthodox psychiatrists who want to know with full confidence where deviance is and where it is not. It becomes even more of a threat if positivists have to rely on definitions of deviance that change depending on the person doing the judging (Goode 1978). Value judgments are one thing that is inseparable from the social context or audience that produces them, that is a “conventional” audience. “One carries a dialogue with others in one’s head” says Goode (ibid., 111), implying that neither the “conventional” audience, nor the person whom this audience dubs deviant reside in a social vacuum. Goode’s interactionist perspective highlights the evaluative issue: deviance is not simply some kind of behaviour, or an act that someone does. Such a definition would be an abstract entity, and Goode claims that real life is much more complicated than abstract rules, which can be considered only in general. Deviance, for him, is rather a behaviour that is evaluated in a certain way, and consequently there can be no universal criteria for defining deviance. The only universal things about deviance for Goode are its existence as a
construct as well as its being “condemned by others” (ibid., 23). Such condemnation leads inevitably to the creation of stereotypes and stigmatization, which I will discuss later.

The interactionist approach is in many ways connected to the labelist approach. Goode “separates” given behaviour and the perception of it as deviant, implying that behaviour is not always already deviant but that this meaning or label is attached to it from the outside, that is, artificially or symbolically. Labelists refer to interaction theory, stressing the dynamic character of human behaviour as opposed to the static approach to labelling proposed by the traditional positivistic theories. Thus, Howard Becker mentions that “deviance is not a quality of the act the person commits, but rather a consequence of the application by others of rules and sanctions to an ‘offender’” (1963, 9). John Kitsuse offers a similar opinion: “Forms of behaviour per se do not differentiate deviants from non-deviants; it is the responses of the conventional and conforming members of the society who identify and interpret behaviour as deviant which sociologically transform persons into deviants” (1962, 253). The conclusion presents itself: deviance is non-existent outside of society, as it is a construct which is meaningless outside the discourse that brought it to life.

Foucault writes about the emptiness of rules, while commenting on Nietzsche’s *On the Genealogy of Morals*: “Rules are empty in themselves, violent and unfinalized; they are impersonal and can be bent to any purpose” (1977b, 151). It can also be said that deviance is in the eye of the beholder—a viewpoint that can be easily misunderstood. It does not mean that this study advocates the principle of absolute relativism. Everything is relative and is not at the same time. Like Nietzsche’s philosophy, the statement of total relativism should be well scrutinized. Upon critical consideration the relativity principle in defining deviant behaviour cannot be denied. As Alex Thio puts it, “if it is not related to the norm or to the reaction of other people, a given behaviour is in itself meaningless” (1988, 16). Concerning sociological interpretations of one’s behaviour, Becker speaks of the interaction between two kinds of people: those who commit a deviant act and the rest of society; “one cannot exist without the other” he says (1964, 3). Importantly for the current study, Ken Kesey dwells on the idea of the crucial role of society in his classic novel *One Flew over the Cuckoo’s Nest*: illustrating the notion of therapeutic community, he discusses “how society is what decides who’s sane and who isn’t, so you got to measure up” (1976, 47).

Behaviour is deviant relative to the convention or norm that defines the people’s reaction to it. It might sound like a cliché, and some may find this a common wisdom, but the problem of relativism in the context of post-structuralism has not yet been solved. What is treacherous is that the situation cannot be narrowed to the face-to-face interaction between two people. Behind the “conventionalist” encountering the “deviant” there is a long line of others who react to this encounter and cannot but play their role as a “third party” (Goode 1978, 119) in the
interaction. This observation is crucial for considering the process of labelling. It is not just the “deviant” who is not isolated from the rest of society, as Goode proposed, the person doing the labelling is not isolated either. Our value judgments are more often biased than not, as we tend to judge with regard to how others will, in their turn, judge our own judgment. Ken Plummer also noticed that, according to the interactionist approach, it is not necessary to receive a direct reaction from other people. Labels can stick even in the course of “self-reaction” (1975, 21). As a result, we do not judge our own actions, but rather we judge others’ judgments of our actions. Only in a hypothetical vacuum in which a face-to-face encounter represents the genuinely unbiased experience of each other might one’s opinion be free of stereotypes, that is, made “without television” (Depeche Mode, 1986). Mike Hepworth explains that such an encounter is problematic due to the “tension between inner consciousness and outward conformity” (1980, 81). In other words, your are always expected to behave in one way or another, to conform to the societal expectations that correspond to your given identity, the implication here being that your identity is fixed. Often, to conform one has to “manipulate” the situation and “engage in the arts of impression management” (ibid., 83) in order to conceal something or to pretend you are someone you are not.

One of the things standing in the way of engaging in compassionate and equal interaction is stigma—both self-stigmatization and the stigmatization of others. I use the word “equal” here for a reason: there is a tendency to treat the supposed deviant as inferior to the one who labels. Inferiority, usually accompanied by hostility and fear, applies to any category of deviance one can think of, including mental conditions, which are the focus of this study. It is, however, worth noting that those with a richer, to use Laing’s term, “inner voyage” (1961), that is, inner experience, can also be considered or consider themselves superior to those who are “normal”. It is important to consider personal experiences, to see how such inner voyage is experienced. Each of the fictional or autobiographical works analysed in this study demonstrates the conflict of being either superior or inferior and the ways to overcome this binary. One good example is from The Curious Incident of the Dog in the Night-Time discussed in Chapter 7: Christopher, the protagonist, considers people who refuse to use logic as inferior and it surprises him that “sometimes people want to be stupid and they do not want to know the truth” (Haddon 2003, ch. 139). In that chapter I will show how Christopher’s fresh and sincere outlook accentuates the unsoundness of fixed tacit conventions. Some stereotypes or conventions do not, however, directly evoke hostility toward the deviant. Often, as Goode notes, “groups simply stereotype one another out of sheer ignorance or indifference rather than out of hostility” (1978, 90). Yet, these are different sides of the same coin: ignorance-incited stereotyping is still a direct path to hostility, as one tends to fear what one does not know. To know in this case means to experience or at least be interested in, not indifferent to, the experiences of the other. The role of ignorance concerning mental illness and superficial
representations of mental disorders is important in the case of schizophrenia: for example, the stigmatization of the illness (6.1) and its confusion with split personality (1.2). While the labelling theory under discussion here focuses on the influences that are at work in the course of encounters, personal experiences are the focus of the phenomenological theory concerning definition of deviance.

David Matza, a proponent of the phenomenological approach, prefers an ambiguous definition of deviance to a precise one. “Students of society must tolerate such ambiguity”, he says. “The clear-cut yes or no will be gained only by suppressing, and thus denying, the patent ambiguity of this novel phenomenon and the easily observable tentative, vacillating, and shifting responses to it” (Matza 1969, 11). Matza stresses “man’s causal capacity, his activity, his tendency to reflect on himself and his setting” (ibid., 7) in the same manner that interactionists emphasize the dynamic nature of human identity. To define deviance phenomenologically is to refuse to use an objective approach common to traditional means of defining. It draws attention to the subjective experience, it calls for considering each case separately, and does not apply universal criteria of the normal or the deviant, the moral or the immoral. It takes into account the relativity principle: as in the case of Wolfreys’s opinion that “what is transgressive for one person is not for another” (2008, 9), what is deviant for one person is not for another, as it is always a label defined “at a given time and place” (Thio 1988, 21). In other words, the phenomenological approach varies depending on a range of factors, such as who is doing what, who is judging it and in what kind of a situation. To follow the traditional objective approach and give a solid ultimate definition of deviance would be to ignore these questions of relativity and to follow a single dominant cheat note declaring who is deviant. Yet, if subjective experiences are taken into account, the picture becomes less well-ordered: “There is deviance in miniature in even the most conventional of behaviour” (Goode 1978, 103). Goode, certainly, concludes that the categories are never clear-cut, though he does use the word “conventionals” in an assertive manner. He states that “conventional people […] build character types, moral categories […] to fill in characteristics of people who supposedly fit into deviant roles” (Goode 1978, 51). These two quotations leave one wondering who are, then, these conventionals in Goode’s terms? There can be no pure conventionals, as in someone else’s view they would inevitably become deviants. Let us turn to Jerry Laird Simmons’s article in Social Problems, where he studies the process of stereotyping. Simmons gives an illustrative example of people being surprised by the fact that someone they consider deviant follow more or less same daily activities and must “maintain themselves physically, psychologically, and socially”: he mentions a woman telling him after his lecture: “It never occurred to me before that deviants buy shoes like me” (Simmons 1969, 40-41). He also mentions 252 different kinds of people who are deviant in the general public’s opinion. Among them are Christians as well as atheists, psychiatrists as well as the mentally ill, conservatives and democrats, career women
and girls wearing make-up (Simmons 1965). While criticizing the process of typifying the deviant, however, Goode himself typifies the conventional by naming several characteristics central to “conventionals”. It would perhaps have been useful for Goode to have followed a similar principle to that of referring to “a person with schizophrenia” rather than a “schizophrenic” (see, e.g., Rüsch et al. 2005) to avoid making a person’s mental condition his or her central feature. If a conventionalist or “conventional” is considered as one who adheres to convention, who ignores the dynamic nature of deviance and tends to apply already existing categories to others, who truly believes that some deviant feature dominates the other’s existence and therefore views the other only through the lens of his or her deviant or non-deviant status, then a person considered deviant can at the same time also be a “conventional”—this reflects the ambiguity of binaries and the faltering of attempts to deal with deviance and convention as separate units.

As far as “building character types” is concerned, it is hardly the individual alone who is responsible—the entire practice of normalization can be seen at work there. Thio’s explanation can be used to illustrate my viewpoint. He notes that the traditional approach to defining deviance is interested in the question of “ why are some people deviant while others not”, while labelists or phenomenologists would ask: “How does society, though control agencies, define some people as deviant and carry out its sanctions against them?” (1988, 19-20). Interaction is of great importance here, yet it only serves the goals of a certain means of social control that inspires people to label and categorize: it simplifies “segregating the deviants from the others” so that deviants form a separate smaller group that helps to “keep the rest of society law-abiding” (McIntosh 1968, 183-4). Language can be seen as part of the control: it bears an overwhelming authority since it provides people with the words that may not have direct referents in the actual world, such as the normality or deviance that I discuss here. This mixture of power and ambiguity limits the scope of meaning of those notions. Language is a nuisance in that it misleads and obscures on the one hand, and demands coherence where it is unobtainable and perhaps redundant, on the other. The discussion of the role of social control in dichotomizing society into the deviant and the conventional, the normal and the abnormal, inevitably evokes such Foucauldian terms as disciplinary power and normalization. In Discipline and Punish (1975) Foucault explains his view on how the deviant, or the delinquent, has ceased to be a monster outside the law and become the offender or abnormality within the law (Foucault 1977c). Foucault stresses the inclusion of the deviant or the abnormal in the law, implying that the law always already presupposes the potentiality of its being trespassed (there is a trace of it, to use Derrida’s term). However, the mechanism of this inclusion is similar to that of the authority’s allowing of transgression in the form of carnival. To use Eagleton’s terms, carnival is a “licensed affair” (1981, 148), for it is permitted and used in the interests of the official culture itself as it becomes another form of social control. Similarly, Foucault’s society is a panoptic one; in keeping the deviant within the
law it seeks to exercise its disciplinary power, which is a power of normalization. Kesey mentions that institutional power is aimed at fixing, that is, “installing their filthy machinery when you’re little, and keep on and on till you’re fixed” (1976, 209) making one conform to the idea of normal as it is expected by the general public. Manufacturing, which is meant for inanimate beings rather than humans, is seen in Kesey’s story in the form of electroshock therapy and lobotomy, which the character McMurphy eventually receives.

I mention Kesey’s novel here to draw attention to the important impact of the phenomenological approach. Its interest in individuality and dignity at once discredits the attempts of the traditional view to pinpoint the inferiority of the deviant or to present him or her as less than human. Moreover, it seeks to correct the deviance, to draw it nearer to the norm which is regarded as “natural”. Social constructions are most powerful if considered natural or else “God-given”, that is, not as a human production, because otherwise they would appear artificial (see Goode 1978). The ignorance and indifference that I have mentioned as causes for stereotyping are the backbone of social constructions. One of the faults of the traditional approach to defining deviance is that it does not question the dominant view of norm and deviance, does not doubt its appropriateness. Denying the existence of other viewpoints, the traditional view rests assured that the label exists to reflect objective reality and to reach the ultimate truth, while the phenomenologist would critically reflect on the role of social control and draw attention to the human experience and human worth.

It is worth contemplating before sticking a label that any engaging in a system of labelling is engaging in power relations. In other words, the categories that society operates under are not as ready-made as Duchamp’s or Breton’s art technique. Categories are always interpreted, the question is whether the interpretation one sticks to is one’s own (or at least consciously acquired) or imposed. Accounts of personal experience are crucial for illustrating the constructedness of categories. One of the objectives of this study is to explore personal experience as it is represented in memoirs and fictionalized stories, the analysis of which offers a way of fulfilling the phenomenological aim as stated by David Matza—“to comprehend and to illuminate the subject’s view and to interpret the world as it appears to him” (1969, 15-16; original emphasis). Personal accounts provide at least one thing lacked by the objectifying gaze: they can tell “what a deviant does in his daily round of activity and what he thinks about himself, society, and his activities” (Becker 1963, 166). Considering the other’s experience is a flawed process and takes hard work, whereas stereotyping offers an uncomplicated way of navigating around difference. Some scholars agree, “stereotypes are easy ways of explaining things” because they “give an appearance of order without the difficult work” (Simpson and Yinger 1972, 153). In stereotyping all the difficult work is shifted onto somebody else’s shoulders—in other words, responsibility is abandoned. One is made to believe that, to use Erving Goffman’s example, someone staying at a mental asylum is there
only due to their mental illness. Yet, on reflection, one might realize that the number of people with a mental condition is larger outside the asylum. Thus, says Goffman, contingencies such as socio-economic status and others should always be considered (1961). I would add that this observation was made before the deinstitutionalization movement. Although the majority of people have an experience of encountering mental illness (their own or in the family), it can be a huge challenge for them to admit and analyse their experience due to the stigma that it carries. As Goffman’s sociology has become a cornerstone for many subsequent theorists of total institutions and stigmatization, I will address it separately.

2.4.2 A Constructed Identity

Goffman’s sociology is an important place to turn to as, in his thought, it is crucial to consider how the surroundings shape one’s self and make it a part of the structure that implies the existence of certain rules of interaction. Those rules construct people’s behaviour with reference to the normal or expected. His idea of the ultimate importance of interaction, criticized by a number of scholars, is part and parcel of the above-discussed notion of social control. Goffman argues that the self “is not a property of the person to whom it is attributed, but dwells rather in the pattern of social control” (1961, 168). Social control, in its turn, appears to be established by the interaction of the person with others. This idea is the basis for how the norm of the normalizing society defines normality, because the “others around” constitute one’s self to a certain degree, or, to use Goffman’s term, one’s “official self”. Goffman explains the sustainment of the existing social order by pointing out the self he calls official and its opposite—“all-too-human”. These two selves contradict each other as their aims are radically different. The all-too-human self represents one as a “creature of variable impulse with moods and energies that change from one moment to the next”, while the official, or socialized self, is the one “put on for audience” which therefore “must not be subject to ups and downs” (Goffman 1959, 56). In the course of interaction one resorts to one’s official self, which comprises an amalgamation of features, viewpoints and abilities responsible for presenting a coherent whole—similar to possessing a coherent identity. There would be little wrong with this if it were not only difficult but also a “treacherous” task of wearing an artificial mask behind which there is “a naked unsocialized look” (ibid., 235). In his work Goffman is interested how one actually fails to live up to artificial expectations: the official self appears to be alien to the “naked” human self, as the latter fails to fit into the provided categories. Where there is a certain discrepancy between the selves, there is, according to Goffman, a place for the sense of selfhood, which is different from the sense of personhood and found only due to this ultimate difference: “Our sense of being a person can come from being drawn into a wider social unit; our sense of selfhood can arise through the little ways in
which we resist the pull. Our status is backed by the solid buildings of the world, while our sense of personal identity often resides in the cracks” (1961, 320; emphasis added). Goffman’s idea resides in the fact that the coherency of the self, demanded by the community, can be sought by engaging in social interaction, yet what cannot be sought or can even be lost this way is the sense of selfhood. Above, I quoted Goffman’s words about universal human nature not being a “human thing”. The universal, for Goffman, consists of those very elements of behaviour which “must be built into the person if practical use is to be made of him as interactant”, which make him “a kind of construct”, “a usable participant in any ritually organized system of social activity” (1955, 231). Universal human nature does not take into account a sense of selfhood or lived experience that would constitute the “human thing”. The human thing is not always, or rather is always not, practical or usable. Yet, it is the thing that is responsible for the “extraordinary events” which are there “to open our eyes to what ordinarily occurs” (1953, 360). In this way something unconventional can challenge what has been always considered as taken-for-granted—an idea expressed by Goffman before his best-known works *Stigma* (1953) and *Asylums* (1961) were published.

Goffman’s sociological ideas, despite being crucial for defining social interaction, norm and deviance, the roles of stigma and total institutions, have generated a certain amount of criticism. Some scholars have been critical of Goffman’s scepticism concerning his view of not-that-human social interaction and the issue of pretending and artificiality in encounters. After all, Goffman took the terms dramaturgy and front-and backstage behaviour from the theatre and applied them to human symbolic interactionism. For example, sociologist Anthony Giddens agrees that people are “skilled agents who engage in very complex social interactions” (Tucker 1998, 78) and follow the fragile tacit rules that govern their social life. Agreeing also on the issue of backstage behaviour, Giddens criticizes Goffman’s view of frontstage behaviour. Giddens stresses the role of social interaction in sustaining stability, stating that the “front regions must be more than mere facades” (ibid.) as they should include awareness of the conventions that are part of common or, as Giddens says, mutual knowledge. The process of social integration is viewed by the two sociologists from a clearly different perspective. One of the examples that Giddens gives deals with an instance of unhappy small talk and demonstrates how anxiety can be caused by one of the interactant’s failing to follow the tacit or common-sense rules of interaction (1987, 12-13). For Goffman, I believe, this offers a great opportunity to dwell on how deviance is constructed as a departure from the normative. The idea of common sense is, broadly speaking, a sophisticated one. Common sense is for deconstruction something of a red rag to a bull, as precisely what interests the deconstructionist is to make the familiar strange and render the most self-assured statements uncertain. For example, another critic of Goffman, Franc Cioffi, claims that Goffman did not manage to explain anything considering social life as he did not make any discoveries and everything he
described is “available to us as part of our commonsense cultural knowledge” (Smith 2006, 111). I strongly doubt that Goffman’s work would have become so much quoted had it represented just some common-sense facts. Sociology could be, in fact, obsolete if it did not question “commonsense” facts. As Giddens comments on the objectives of sociology, “what seems obvious, or what ‘everyone knows’, may not only not be obvious at all. It might actually be wrong” (1987, 4). Commonly-held beliefs may not be valid even if they seem obvious, moreover, they “may often take the form of prejudices, and hence contribute to intolerance and discrimination” (ibid.). One of the phenomenologists argues that the positivists tend to give their own constructions a status of common sense and treat it as if these very phenomena actually constituted reality (Douglas 1970), thus supporting one dominant view and abandoning the possibilities of other views. To use Nietzsche’s terminology, master moralists subjectively act outside of the common herd as if they possess the knowledge of truth, while the slave moralists, unable to resist or think otherwise, cannot but follow it as if it were objective.

It cannot be, however, denied that Goffman’s work is original and off the beaten path—the very reason why it is often misunderstood. Misunderstanding is quite common when a scholar moves beyond conventional boundaries both in the content and manner in which they conduct research. Geertz, for example, characterizes Goffman’s manner as incoherent and a “blurred genre” (1980) as it reaches out beyond the conventional area of sociology. Certainly incoherence can be viewed as a shortcoming in academic work, but in Goffman’s case it is a result of using multiple conceptual frameworks that guarantee the possibility of different perspectives—the very thing Goffman advocates for. In this sense, I would argue, the content and design of his work are highly consistent with the idea of rejecting the ultimate truth. In the author’s note to a collection of papers, Goffman mentions that “each paper develops its own perspective starting from conceptual scratch […] there is no pretence at laying down a barrage” (1971)—the strategy true to all Goffman’s work. When Gamson, although paying homage to Goffman’s insightfulness, worries that this is not the right kind of sociology to be taught to students (1975), Goffman explains that to be critical and to develop theory is much more important than to trust it blindly: “If we can’t uncover processes, mechanisms, structures and variables that cause others to see what they hadn’t seen or connect what they hadn’t put together, then we have failed critically” (1981, 4). Goffman himself does not aim at constructing a full coherent theory but rather makes “important contributions in the direction of theory” (Lofland 1980, 33; original emphasis).

It would be, in fact, reckless to claim to structure a full theory if one studies the social order, human interaction and subjective experiences. Even the critics of Goffman agree that he is “an extremely sensitive and acute observer of human interaction” (Sennett 1977, 35). John Lofland, one of his graduate students at Berkeley, believes that he is “not alone in knowing people who have been deeply
moved upon reading Stigma and other of his works”, as Goffman “was articulating some of the most fundamental and painful of human social experiences” (1980, 47). He managed to show that they are not alone with those painful experiences and have a possibility for “personal freedom” as “the social order is after all constructed and can therefore be dealt with like other constructions” (ibid., 48). While Goffman’s idea of face-to-face interaction seems to have no direct relation to the similarly named Levinasian notion, Goffman is interested in the idea of responsiveness, and Lofland associates his name with the existential sociology (ibid., 47). For Goffman, whatever social role one plays one is always engaged in the additional play of the interactants—a play residing in their face-to-face interaction and which results in the collaborative construction of the self (Goffman 1967). Goffman pays attention to both how self is constituted in the process of interaction and how it is tailored by means of total institutions. “The self in this sense is not a property of the person to whom it is attributed, but dwells rather in the pattern of social control that is exerted in connection with the person himself and those around him” (1951, 168).

Goffman uses the notions of control and total institution in his work on asylums (1961) based on his field work at St. Elizabeths Hospital in Washington DC. This work provides another reason why Goffman’s work has attracted mixed comments. On the one hand, Asylums became an important proclamation of the tyranny of the total institutions that supported the views of the anti-psychiatry movement. On the other hand, Goffman’s work was believed to have promoted the idea of deinstitutionalization in the USA and Europe that resulted in the closing down of large asylums in favour of “care in the community” centres (see, e.g., Gronfein 1992). Despite the seemingly positive consequences that this closing down might have had for the involuntary patients, the effects of contracting the number of St. Elizabeths hospital patients from 7,500 to 2,700 in two decades (Smith 2006, 77) can be miscellaneous. It did promote appreciation of the consequences of long-stays in asylums, but the care in the community system works only if stable funding is provided for centres that can provide each out-patient with the therapy he or she needs. Those 5,000 out-patients could not simply dissolve into nowhere. The financial structures have not, however, lived up to expectations:

Federal mental health planners envisioned the flowering of a network of support services to care for deinstitutionalized patients at the community level through stimulus of federal seed money. But 1,300 of the 2,000 community health centres projected for 1980 have failed to materialize and many that did have failed to service this chronically ill population. Deinstitutionalization, an ostensibly humane treatment program, has degenerated into a tragic crisis. (Elshtain 1981, 602)

One good example is a story regarding the NHS mental health service that recently appeared anonymously in The Guardian. The only help that the individual in
question managed to get was from private professionals, whose sessions were very costly, while their GP appointments were useless: “Waiting lists for one-on-one talk therapy are still so long as to be meaningless – a colleague likens the system to offering a pregnant woman a scan in a year’s time. Patients, meanwhile, are left in the care of GPs with eight-minute appointments, sometimes sketchy knowledge of the drugs” (“Living with Grief” 2016). I discuss this issue in more detail in Chapter 5 when analysing Henry’s Demons.

2.4.3 Stigma and Labelling

On the one hand, Goffman’s account of total institutions is perceived as one-sided (Weinstein 1982), as he speaks of all of them as a whole and, as some critics points out, provides a comparison of prisons and schools calling out the negative without pointing out the positive (Caudill 1962, Davies 1989). On the other hand, Goffman had a very noble goal in writing Asylums: “To look into the psychiatric world simply to learn what there could be learned about the general processes of social life” (1957, 201). In other words, Goffman does not limit his enquiry of totalizing and identification issues to mental asylums or prisons, rather he intends to demonstrate how the example of total institutions can illuminate the limitations, stereotypes and stigmas inherent in everyday interaction. Goffman’s contribution to the label theory is significant not only because of his observation of the demand for normality in social interactions: “The notion of the ’normal human being’ may have its source in the medical approach to humanity […] Whatever its origins, it seems to provide the basic imagery through which laymen currently conceive themselves” (Goffman 1986, 17). The notion of normality is always a general notion while, according to Goffman, there are no other human general properties than those responsible for being a successful interactant. General properties that are part of that “universal human nature” have little in common with the human differences often dubbed as deviances. Goffman is sceptical about the notion of deviance as it has ceased to be meaningful as all kinds of human conduct appear to be placed under the deviant label. One famous quote among sociologists succinctly characterizes deviants as “nuts, sluts and perverts” (Liazos 1972), which reflects the reality that we face, considering Simmons’s data mentioned above or Goffman’s observations. In Stigma Goffman writes that “social deviants” constitute the core of what deviance appears to mean and says that the core includes “prostitutes, drug addicts, delinquents, criminals, jazz musicians, bohemian, gypsies […] and the urban unrepentant poor” (1986, 169). He notes how different the groups are both in size and the sort of deviance and concludes that “they differ in many more ways than they are similar” (ibid.), “similar” referring to the sole fact that they are considered deviant in the given society. Difference is not yet deviance, so how can this eclectic group be placed as one and the same under the label deviant? Some scholars including Goffman have tried to find the answer in the strategy of
measuring the degree of deviance to determine whether it is dangerous and to eventually define the deviance. Goode, for example, considers numerical significance in defining whether a behaviour is deviant. Jazz musicians, mentioned by Goffman, can be considered deviants by some people in some cultures, yet the majority would not label them so (whereas, I would suggest, black metal musicians would be considered deviant by the majority due to the complexity and inaccessibility of the music to many, a genre that for protest reasons is often sarcastic about the ‘sacred’ and the taboo). Apart from numbers, Goode takes into account the intensity of the negative reactions that influence the *more deviant* and *less deviant* spectrum. Thus, Goode intends to demonstrate that the definition of norm and deviance is not a polarity but a matter of halftones determined by the audience and the situation (Goode 1978).

What is termed “less serious” in Goode’s work is termed “acceptable” in Lesley Harman’s (1985). Addressing the fact that even non-coffee drinkers can be labelled deviant, she proposes the term to help to differentiate between negative and not-so-negative deviance. David Lodge even uses the term “positive deviance” to refer to talented and gifted people, geniuses or even heroes (1985). In this sense, the unconventional should not be used in a negative sense only—here it acquires positive connotations. Goffman’s term “normal deviant” is perhaps one of the most oxymoronic. Goffman well knows how the status of being deviant influences a person’s psychology, causing them to live up to the given status as the stigmatized “tends to hold the same beliefs about identity” (1986, 16) and “the normal”. The use of the notion “normal deviant” as opposed to “social deviant” (that includes criminals and those collectively denying the social order) demonstrates how common “deviance” is and may help the stigmatized to refer to themselves as normal rather than deviant. The proponent of the label theory, Thomas Scheff, demonstrates in his important work *Being Mentally Ill* (1984) how “beliefs about identity” operate in cases when actions comprehended deviant by society can lead to labelling the actor as mentally ill. On acquiring such a label, Scheff argues, a person tends to conform to expectations of him or her as mentally ill and behaves as if it were true. I am certainly not arguing here that societal reaction and stigmatization are the only reasons for the existence of mental illness, yet hostile labelling attitudes and inconsiderate strict division into normal and deviant, that is, mentally ill, worsens the situation for the one stigmatized as feelings of inferiority and isolation are nurtured. Such a strict division becomes even more nonsensical if one takes into account Goffman’s idea that “the normal and the stigmatized are not persons but rather perspectives” (1986, 162-3). The human nature of the stigmatized person is the same as that of those known as normal: these perspectives or roles cannot determine the nature of a person. One who is stigmatized, Goffman also argues, can exhibit similar prejudices in a different situation, thus taking up the role of the “normal”. As I have mentioned above, the deviant can at the same time be a
“conventional”. This reminds us of Schrödinger’s cat: one is at the same time both normal and stigmatized—only opening the box would reveal the current state.

The notions of stigmatization and labeling carry, as a rule, only negative connotations that lead to snubbing and typification. The notion of deviance, however, does not necessarily imply negativity. When we talk about stereotypical thinking, the interactionist and labelist idea of the primacy of societal reaction (negative in this case) is crucial. When a certain deviance is treated negatively by the general public, “we do not have to agree”, Goode says (1978, 164). But, he continues, “we would be foolish and ignorant if we failed to notice that they actually are condemned” (ibid., 165). I would add that failing to notice their stigmatization equates, in fact, with engaging in stigmatization. It may be reasonable to ask here which particular subgroups of the stigmatized are associated with negative reactions. This could be answered by stating that when considering the general mechanism of stigmatization it does not matter. Simmons’s study (1969) can serve as evidence here: he found that a negative attitude toward such deviant groups as prostitutes, political radicals, the mentally ill and others paralleled an intolerance towards other nationalities. “This means”, Simmons writes, “that the tendency to accept or to discriminate against those who differ seems to be a basic part of a person’s way of looking at the world” (1969, 35). It also demonstrates how differently stereotypes work in different societies and how they can depend on many different factors. It is surprising, for example, how influential the policy of the state, the prime source of social control, can be. In a state where centres for people with autism (though not at all numerous) are being closed down or where accessibility for those with physical or mental conditions is poor, hostile attitudes toward the “unconventional” or “not normal” is high (see, e.g., Golubovsky and Reiter 2011). They are usually kept in isolation and thought of as if they were nonexistent at all—in this way the illusion of a “normal society” is as if sustained. I use the “as ifs” here intentionally: the only thing actually sustained in such a society is lies, employed to maintain appearances in order to avoid stigmatization. The deviant or the mentally ill are indeed undesirable because they are “uncomfortable”: Goffman, for example, does not limit this discomfort to the malfunctioning or, as labelists do, the reaction of the general public. Whether the damage is organic or functional, it results in the interruption of the routine of social interaction based on tacit conventions. Using the example of collapsed small talk, Giddens also states that this shows the pattern of how “social life does look to some of those individuals whom we call mentally ill” (1987, 13). This is a continuation of Foucault’s idea of confining the mad to the outskirts so that they are isolated and therefore invisible. This idea is taken further by Baudrillard who speaks of the social exclusion of the dead and the “culture of death” while characterizing the idea of normality: “Ultimately all these ‘categories’ will be excluded, segregated, exiled in a finally universal society, where the normal and the universal will at last fuse under the sign of the Human”, he writes, “To be dead is an unthinkable anomaly;
nothing else is as offensive as this. Death is a delinquency, and an incurable deviancy” (1998, 126). Being truthful to the idea of simulation, Baudrillard, as well as in the example of Disneyland covering the absurdity of the real world, argues that the absence of cemeteries would disclose that all cities are ghost cities of the dead.

2.4.4 (Non)Normative Conventions and (Im)Morality

All of the abovementioned attempts to provide definitions appear to exist mainly due to the ambiguity of norm and deviance, due to its relativity (no matter whether one fails to admit it or not) and the lack of meaning attached to the terms in authorized encyclopaedias. Real life is more complicated, which is why sociologists often recourse to the creation of new terms, as there is too much confusion and ambiguity among the terms that already exist. The confusion over what is meant by, for example, etiquette conventions or tacit rules of communication, crime or moral behaviour is one of the reasons for, on the one hand, giving the label of deviance to many different groups of people and, on the other hand, for grouping morals, laws and normative behaviour under the single notion of the norm. While it is claimed that deviance is “the violation of a social norm” (Ritzer 2011, 135), norms are characterized as vague:

We must realize that the semantic vagueness surrounding the concept of norm is common to all social constructs. There is no necessary and sufficient condition for being a norm, just a cluster of characteristics that any norm can display to a greater or lesser extent. (Rescorla 2015)

Such words as “more” or “less” and “greater” or “lesser” seem to be an integral part of the definition discussion. This supports the theory of the social nature of conventions (Lewis 1969) and their relativism (Harman 1996). Lewis’s theory demonstrates perfectly well how conventions (or at least what Lewis means by conventions) are confused with social norms. Conventions, for Lewis, are what appear in the course of coordination games or, in everyday life, behaviour that results from common knowledge, etiquette, respect, or the public’s expectations. One drives on the right in France, but on the left in England because it is the law and common sense; one wears a suit at the official reception because it is expected. Yet, one is not ought-bound to wear a suit because a convention, for Lewis, is an agreement made during social interaction, but a non-normative one, which means that one may fail to conform to it. Social norms, in contrast, are normative, which means that if one does not conform to the rule “do not steal”, one will be sanctioned. Lewis’s theory has received a certain amount of criticism (Gilbert 2008), but it is notable that even Lewis himself mentioned that there are cases when we can call a convention “a species of norms” (1969, 98). If there is a convention, Lewis
explains, there should be certain reasons to conform and no reasons not to conform. On the one hand, it is important to consider the normative character of both conventions and social norms, on the other hand it is equally important to differentiate between conventions and norms. This makes perfect sense if we consider social norms as regularities in the context of criminal law and legal acts, while conventions may include issues of behaviour, appearance or mental state—issues that are often subject to stereotyping and stigmatization. I wish to emphasize here how attributing a normative character to such issues can add to the confusion of conventions and norms, thus providing a solid conventional ground for the comprehension of normality.

For Harman, social conventions are relative and the moral truths based on them are similarly relative. It is common for social convention theorists to emphasize how conventions “make certain facts true” even if those facts are not natural or brute (Rescorla 2015). It is therefore important to concede the role of conventions and terms in creating facts, keeping in mind that terms are part of language which is itself the product of the conventional use of signifiers (e.g., Derrida 1997). Harman (1985), for example, admits that there are social conventions that are non-relative, such as property rights. Just as you can be certain that you will not lose ownership of your home if you travel to another country, you can also be certain that if in that country shaking hands with women is not considered appropriate, it is best not to do so. What I wish to emphasize here is the confusion between trespassing criminal law and tacit conventions of behaviour or appearance. While it is hard not to agree that the “use of proper etiquette reflects deliberate decisions to adhere to norms of respect and consideration for others”, the use of the terms “undesirable” concerning using a wheelchair or “non-normative or morally condemned” (Ritzer 2011, 141) concerning unattractiveness, mental disorder or a drinking habit seems to be limiting and confusing.

Morality is one of the most difficult notions to pin down as it is common in society to apply the concept of morals to any act that people consider deviant or to confuse religious commandments with morality. However, it is also one of the important concepts to the present study as it connects directly with the idea of the norm and the stigmatization of deviance. Deviant behaviour causes moral outrage; sociologists often imply immorality when they talk about deviance, as does the general public, which equates deviant with immoral, largely in terms of being violent, corrupt or dangerous (Goode 1978). Moral universalism is also at work here, suggesting that, whether one is aware of it or not, there are objective moral standards that prescribe the goodness or the evilness of one’s behaviour. The problem of morality is in its perpetual reference to a given ultimate truth, which more often than not is beyond human responsibility or power. The givenness or naturalness of morals is, thus, at odds with the social nature of conventionalism. It is surprising how many most unexpected issues can be labelled immoral: homosexual marriage is an issue of severe moral offence in Russia, as is, for
example, visiting a restaurant with a person suffering from autism. I strongly believe that stigmatizing intimate relations or ordering a person with autism to leave a restaurant are highly immoral actions. In this sense, I suggest morality (considered the ultimate universal guide of our actions and judgment) is a cover story. In particular, it is a cover story for the ignorance and indifference that were mentioned above as the sources of hostility toward the other. As there is no neutral knowledge, there are no neutral morals, that is, universal or coming from nowhere. To question where they come from is to face the chaos they are meant to cover. In failing to question them, the dominant means of social control is never questioned. The tendency of the general public to confuse crime and violence with political protest or acts based on a personal standpoint makes the control so much easier. If one refers to the moral code as universal, both crime and individuality will be equally stigmatized. The recent case of Pyotr Pavlensky’s art is characteristic in this sense. He set the door of the Russian Federal Security Service headquarters on fire (Beard, 2016), which is a deviant act of property damage, but not a crime—at least not a moral crime. Pavlensky is considered a threat to the FSB’s policy and therefore confined to asylum to keep him in isolation, even though none of his art installations or actions has ever done any harm to any person’s health (except, perhaps, his own) since they are aimed not at violence but at political protest. Yet the reaction of the general public is striking: as a person who performs deviant acts he is seen by many (without regard for the importance of protest or the lack of actual harm done) as insane and violent, and thus to be isolated from the “sane” or normal. Thus, the moral colouring attached to Pavlensky’s action is quite different to what he actually intends to demonstrate or confront. When Édouard Manet invites Couture to see his painting The Absinthe Drinker, the latter’s reaction is shattering: “Can you create such an abomination? But my poor friend, it is you who are the absinthe drinker, it is you who have lost all moral sense!” (Julius 2002, 165). In the case of the stigmatization of homosexuals, the mentally ill or artists, it can be similarly claimed: it is the one who stigmatizes or judges the other as insane for his protest who has lost their moral standing.

While it is just one example in the history of transgressive political art, the following can be mentioned here to emphasize the notion of harm, which is important in defining (im)moral behaviour. As, in the general public’s opinion, being violent is part and parcel of being deviant, it is no wonder that harmful behaviour is attributed to all eclectic groups of deviants. Chris Jenks writes characterizing Nietzsche’s will to power that “ethical codes […] do not become powerful because they are true, on the contrary, they become true because they are powerful” (2003, 74). In the same manner, the dangerousness of the deviant can be explained: deviants are not stigmatized because they are dangerous, rather they are thought of as dangerous because they are “always already” stigmatized. Being harmful is “the weakest reason of all” for considering those labelled deviant to be dangerous, as “most deviants commit no damage of any kind upon conventional
people, ever” (Goode 1978, 12). Similarly, people with schizophrenia are mistakenly believed to commit more crimes than people not considered mentally ill (see, e.g., Balashov 2009 or Walsh et al. 2002 on destigmatization; Laing 1965). In the chapter on *Henry’s Demons* I will demonstrate that harmful behaviour, if present at all, is aimed rather at the person himself than at others.

The actual danger is done, or perhaps, threat is presented to the order that one believes to be normal and natural. The fear of this challenge explains the inclusion as deviant of such groups as feminists, atheists or political radicals, as well as those who are “mad”, as the unconventionality of their thinking is often perceived as lack of, or as inferior to, comforting rationality. At least one crucial question can be posed here: if one’s “superior” position or order can be so easily challenged that it has to be aggressively protected, it is not unreasonable to assume that such position or order is not, in fact, that solid. Whether we follow the idea of dividing deviance into negative and positive or not, one thing is crucial: deviance is not necessarily negative even if it is not positive, it is “not necessarily antisocial harmful behavior” (Goode 1978, 21). When some form of unconventional behaviour presents a threat to the order, whose maintenance serves the interests of social control or ideology, unconventionality can be smoothly criminalized, whether or not the supposed criminal violation of the norm involved actual harm done to other people. Starting with the fear of shattering one’s symbolic comfort zone, morals acquire the illusionary status of stability guarantors, whereas deviance becomes a heresy or an intolerable paganism within the realm of well-constructed religion. This reminds us of Durkheim’s approach to sociology where he argues for strict binary divisions of sacred and profane (a contrast that is “universal”), good and bad (“two opposed species of the same class, namely morals”, which, for Durkheim, regulate the actions made towards “common Good”) and sickness and health (1965, 53-54).

“Health is the paramount norm and consequently cannot be in any way abnormal”, says Durkheim (1982, 93). The normal is typical, it promotes coherence and solidarity, and thus is good for collectivity, its boundaries are confirmed and obvious. The pathological, on the contrary, is irregular, individualistic and evil as it hampers the acquisition of an ultimate collective consciousness and adds to the disintegration of societal bonds. While the importance of social bonds for humankind is difficult to question, Durkheim’s claimed objectivity is ambiguous. Under the notion of “collective habits” he groups such different issues as “legal or moral rules, popular sayings, or facts of social structure” claiming that “they constitute a fixed object, a constant standard which is always to hand for the observer, and which leaves no room for subjective impressions or personal observations” (ibid., 82). This influences, certainly, the sociologist’s view of morality, while, as I have argued, notions of good or bad, right or wrong are pure absolutist abstractions used by those seeking an ultimate truth, since the referents for those notions are either relative or non-existent.
The notions of good and evil have caused many well-known philosophers to propose their own definitions of them and it is, therefore, no wonder that they often clash with one another. One such example is Schopenhauer who, although sceptical about the primacy of the good before the evil, presented his theory of well-being based on his unique understanding of morality (Schopenhauer 1965) (the concept of *Mitleid* pertaining to Schopenhauer’s idea of morality is important to my discussion of empathy in Filer’s novel conducted in Chapter 6). For Schopenhauer, only those actions that fulfil a desire for the well-being of the other have real moral worth, while a desire for one’s own well-being is egoistic and therefore has no moral value. He concluded that as long as the state system of justice is based on a contract (in other words, conventions) that guards the egoistical interests of every citizen, it is not founded on morality. Schopenhauer uses the notion of *Mitleid* to characterize moral actions: “As soon as their compassion [*Mitleid*] is aroused, the weal and woe of another are nearest to my heart in exactly the same way, although not always in the same degree, as otherwise only my own are. Hence the difference between him and me is no longer absolute” (1965, 144). *Mitleid*, for Schopenhauer, is found when a wish to eliminate evil in seeking well-being for the other acquires the same status as seeking well-being for oneself. The English translation of *Mitleid* is crucial here: while Schopenhauer’s *Mitleid* is best translated as *compassion* because it first and foremost regards the other as equal, *Mitleid* in Nietzsche’s theory of slave morality is rather *pity*. David Cartwright notes that the process of pitying involves the elevation of the pitier as he feels superior when he pities, which is not the case with the act of compassion. In other words, “we do not pity those we respect” (1988, 559). Nietzsche’s answer to Schopenhauer’s theory of morality as compassion is that of a sceptic, as his main critique lies in the fact that compassion can be disguised pity.

There is no universal rule to differentiate between the two, and I gave here a short description of Schopenhauer’s view on morality for a different purpose. The above described difference between pity and compassion and its equivalence to superiority-inferiority versus humanly equal relations illuminates the problem concerning people’s attitudes towards the deviant. I mentioned that deviant actions are perceived as a threat because they challenge or even attack the habitual, seemingly solid order. A feeling of superiority that haunts those who are normal, conventional or, in short, non-deviant, can be thus characterized not just as pity but also as a protective response. Why has it come to be protective? Pity and superiority, in this case, are fear in disguise, fear born of knowing that no one is immune to being labelled as a deviant. Moreover, if an individual is labelled deviant, do they suddenly become immoral? This non-immunity can be seen as a part of that definition of morality that gives primacy to compassion. There seems to be a certain paradox: if moral action is before everything else other-regarding, and compassion draws attention to the fact that deviance and stigma are rather
perspectives than certain groups of people, why is deviant a synonym for immoral for many sociologists and in the public mindset?

If there is any answer at all, or if one is needed at all, one of the propositions concerns the naturalization of norms and conventions. If a convention acquires normative character, it starts to serve as natural, absolute and dogmatic, in other words, if a convention is seen as absolute it encourages dogmatic thinking and discourages difference. I do not claim that conventions are to be avoided and considered worthless—what is important is to see how these constructs acquire characteristics of the given primordial order. One crucial issue that promotes such naturalization is language. Its ambiguity is clearly seen when a definition of such a notion as convention should be given. Goodman and Elgin observe that, on the one hand, “the conventional is the ordinary, the usual, the traditional, the orthodox as against the novel, the deviant, the unexpected, the heterodox”, but on the other hand, “the conventional is the artificial, the invented, the optional, as against the natural, the fundamental, the mandatory” (1989, 80). The two explanations apparently contradict each other, which, perhaps, raises the question of the (non)normative character of conventions as opposed to norms, which are, in their turn, confused with conventions.

Different scholars have elaborated on the question of how some issues acquire a natural character. For instance, Foucault speaks in his Discipline and Punish how the system of punishment has come to be regarded as “altogether natural, self-evident, and indispensable”. When participating in an interview that became part of a biographical film, Derrida was asked to speak on the origins of deconstruction. “One of the gestures of deconstruction”, he said, “is not to naturalize what isn’t natural—to not assume that what is conditioned by history, institutions, or society is natural” (Dick and Kofman 2005, 64-65). Bakhtin, in his turn, questions the absolute nature of moral oughtness and ethics: “There are no moral norms that are determinate and valid in themselves as moral norms, but there is a moral subjectum with a determinate structure [...] and it is upon him that we have to rely” (1993, 6; emphasis in original). Pure ethics, for Bakhtin, is a legacy of rationalism or theoretism that is disconnected from human action (from the responsibility of the subject) and presents, instead, an abstract set of rules.

Thus, the world is split into a sterile ethical world based on abstract generalized norms and another world based on spontaneous irregular forces. For Bakhtin, it is lack of personal responsibility that has allowed oughtness and universality to form the perception of morality. The “actual obligatoriness” of a norm is “evaluated not from the standpoint of its sense content, but from the standpoint of the actual authoritativeness of its source”, (ibid., 24) namely law or religion. Bakhtin claims that the rules created by those sources are theoretical, but it is “blindly” accepted that there is an “inherent” oughtness in their content and thus they become norms (ibid., 23). Norms are, thus, confused with religious commandments and associated with the paradoxical logic circle of “one is ought, because he is ought, because he is
ought”. Universality, that is, the possibility of applying the ought/norm to anyone, is a second flaw of given ethics resulting from the first. According to Bakhtin, “since the content of norms is adopted from a scientifically valid judgment, and the form is illegitimately appropriated from law or from commandments, the universality of norms is completely inevitable” (ibid., 25). Like Schopenhauer, Bakhtin is sceptical about Kant’s ethical imperative and instead provides a theory of dialogue, empathy and human unfinalizability—which has been discussed in the subsection on alterity (2.2.2).

One of the most important ideas of Bakhtin is crucial for understanding the objectives of this study: the difference he emphasized between the repeatable, solid, natural set of “moral” rules (solid because repeatable) and unrepeatable lived experience, which resists being finalized. When the other’s outsidedness, otherness or alterity is not respected, it is reduced; as Goode explains: “We build mental cartoons of other people”, he writes, “These cartoons are simplified, streamlines, unidimensional” (1978, 89). The reason for such reduction is quite understandable, for as long as there are some given categories, people tend to believe they know perfectly well what kind of a person they are dealing with and also that they can predict how he or she will behave. There is no need even to mention that such dehumanizing prediction results in the stereotyping, finalizing and mannequining of people, while Bakhtin is certain that “the ultimate word of the world and about the world has not yet been spoken, the world is open and free” (1984, 166).

Bakhtin’s view of the universality and the unquestionable character of morals is crucial to his quest to give primacy to personal responsibility and not to “finalize” individuals or “destroy countless uniquely valuable personal worlds” (ibid., 46). A ghost of Nietzsche’s genealogy of morals that I will discuss later is clearly lurking in Bakhtin’s “unquestioning” of the given morals and norms—remember Nietzsche’s claim that “in things in which no tradition commands, there is no morality” (1997a, 10), and Foucault’s view that self-transformation is reminiscent of the idea of unfinalizability. Nietzsche also hints at the notion of responsibility: “The free human being is immoral because in all things he is determined to depend upon himself and not upon a tradition” (ibid.; original emphasis). “It is an unfortunate misunderstanding” for Bakhtin that “the truth [istina] that is composed of universal moments; that the truth of a situation is precisely that which is repeatable and constant in it” (1993, 37). The “repetitiveness” of the truth is opposed to the never-repeatable character of the unique lived experience. I will return to Bakhtin’s idea of unfinalizability in Chapter 7 that will deal with Haddon’s novel and the normative attitude applied to it by reviewers.

When I argue for taking responsibility when encountering the other, I imply that it is a responsibility of interpretation. Such interpretation is inevitable: there is no pure absolute knowledge of the other—even merging with the other, or Bakhtin’s pure empathy, is not the way to know the other. Knowing the other is mediated, and interpretation, too, is mediated. What is important is the slight difference in the
nature of the interpretation: either conscious personal interpretation is in question (it is inevitably mediated yet not imposed—there is no shame in the sole fact that one should not bite off more than one can chew) or it is an interpretation borrowed in the process of interacting with one’s identification group. Even though the matter can be further worsened by the fact that sometimes one is not sure whether one’s interpretation is personal and critical or imposed, it is important to be aware that identification with a certain system of values is a way of engaging in power relations. No such system is ever neutral; indeed the perspective dominant in a group is often authoritative and silencing. Although the Nietzschean ideal of companionship seems to be complicatedly estranged, it points directly to the constructedness of systems of values and morals. Nietzsche’s companionship is similar to Derrida’s minimal consensus. “I have never accepted saying”, Derrida notes, “or encouraging others to say, just anything at all” (1988b, 144-5). There exists a certain context, he says, which serves the minimal requirements of proper communication. Crucially, outside of such a context there is nothing absolute or certain—there is nothing at all—as the famous and often misunderstood modified deconstructionist slogan says. As contexts are extremely various, various also are the interpretations—one of the main interests of deconstruction is to open this space to critique and see how the dominant interpretations tend to fit themselves into a given context, thus pushing all others aside.

The abovementioned interactionist, labelist and phenomenological attempts to define the relationship between deviance and convention emphasize the importance of contextualizing these terms. Analysis of their definitions demonstrates that the most crucial thing is to remain cognizant of the impossibility of a single universal and unbiased definition. It is amusing that Derrida was accused of coining definitions yet, upon closer inspection, it appears that everyone does the same. There is a solid reason for this; the given definitions are not sufficient to the task of philosophy or sociology, nor to the circumstances we face in everyday life. I have quoted Derrida stating that Bataille’s terms are all Hegelian, yet the context of the terms is completely different. Thereupon, we are faced with “minimal consensus”, “less deviant”, “acceptable deviance”, “vzhivanie”—the latter demonstrating, in addition, the lost-in-translation problem, which was also evident in the case of Mitleid.

In sum, the problem of defining features is, in a sense, a primary one—the notion of a stable identity arises from the need to define and to identify and, therefore, to conform. When a definition of the norm is set up, the idea of universality occurs. As I have shown, it rejects the subjectiveness of the lived experience and attempts to measure and squeeze it into the given structure of norm or, if it fails, into the category of deviance. Accordingly, identity should thus always be coherent, so that it is clear that one speaks as a representative of one’s culture, religion, gender, and so on. When the norm is understood in this way it is not human and hardly moral: as Julius notes, taboos are often “broken in the name of
the humanist affirmation” for the method of the taboo is at work when “men who are fearful of their own impulses will always seek to restrict the freedom of others” (2002, 150). Such restriction acquires as a rule the status of a natural rule, a norm that is not constructed artificially but given a priori and part of the status quo. As long as Artaud belongs to the “rupture” of our language, as Foucault claims, it is an objective, not yet a reality, that “neuroses will be placed among the forms that are constitutive of (and not deviant from) our society” (Foucault 2006, 541) and that transgression could be characterized not only as “not negative”, as I have argued, but even as positive.

In the next chapter, I will discuss how the examined notions of identity, coherence and morality are viewed in the context of narrating one’s self. The questions that will be tackled are: Is there such a thing as self-transparency and is it a necessary condition for constructing a coherent narrative? Is constructing a coherent narrative the only way to produce a worthy (and also morally appropriate) identity in a narrative? Should the lack of self-transparency and coherent memories of experience prevent a person from narrating it? Can there be an unbiased and unconditional narration of one’s experience and of mental illness in particular?
3 IDENTITY AND WRITING

“If this is all that I remember, can I even trust myself”

Dark Tranquility

When Jacques Derrida’s students Kirby Dick and Amy Ziering Kofman decided to make a documentary based on their mentor’s life and philosophy, they came to his house to do some interviews. Knowing that they would come with some recording devices, Derrida met them all dressed up: “Everything is false. Almost, almost everything. I’m not really like this. First of all, I don’t usually dress like this”, he said filling his pipe, “No, you must know that when I stay at home alone in the daytime, I don’t get dressed. I stay in my pajamas and a bathrobe” (Dick and Kofman 2005, 67). I mention this story as an example illustrating that the idea that we can grasp the other au naturel, either in a documentary, or in a literary text, or by means of exchanging stories, is wishful thinking. When someone comes to see us, even if they come to our own home—we get dressed; we have to use language in order to communicate with those who come. We have not learned to diegetically exchange our experiences without resorting to language—it is as impossible as division by zero in ordinary mathematics. The dream of a perfect immediate language has haunted philosophy and literature for centuries (consider, for example, Rousseau’s account on the origin of language (Essay on the Origin of Languages [1781]) and Derrida’s deconstruction of it in Of Grammatology [1967]), yet it remains an omnipresent mediator, an indispensable nuisance.

Literary and narrative studies are fraught with controversy concerning the problem of the self per se and its construction through language. Therefore, when we speak about the limits of expressing the self in storytelling, we apparently speak about the limits of language; moreover, speaking about the limits of language implies considering the limits of social constructedness. Therefore, in this chapter I will address the challenges of language and how clearly they are seen in the narratives of mental illness. In the second section, I will discuss the confusion concerning mental disorders that language may entail—I use the examples of schizophrenia and depression to demonstrate how language misrepresentation of the disorders may lead to their stigmatization. I will also discuss at length Antonin Artaud’s experiments with language. In many philosophical works (among which are Foucault’s and Deleuze’s texts) Artaud is seen as an embodiment of a challenge to a fixed and limited system of language. I also refer to Artaud’s texts and letters as those that follow Nietzsche’s call not to seek for “clarity and coherence” but rather find “agony and sweetness” in the “inexpressible and nameless” (ibid., 36).
The last section is dedicated to the discussion of the idea of “truth” and the possibility of presenting a narrative that is absolutely true to one’s self and one’s memories. I will examine the problem of the self and language in narrative studies, as well as that of self-transparency and how these are complicated by post-structuralists. Human existence is saturated with cultural narratives (e.g. Meretoja 2014), and their influence upon the storyteller and the latter’s confusion are based on the need to distinguish between imposed constructions and his or her own interpretation. What is important is that these constructions may take the form of tacit assumptions that affect the contents of the story, the way it is told and the way it is perceived by both the teller and the reader. It is a tedious (if at all possible) task to keep a so-called critical distance (Jameson 1991) when telling or interpreting; for a person telling about the experience of mental illness the task of finding the right kind of language while at the same time keeping a critical distance becomes all the more challenging.

In light of the fact that any experience is “fictionalized” to a certain extent, whether speaking about autobiography or fiction, I will clarify the approach to textual “truthfulness” that I have applied in the current study. The first section of this chapter is therefore dedicated to defining the notion of a “story” that is used throughout and that can be applied to both fictional and autobiographical narratives.

3.1 FICTION AND AUTOBIOGRAPHY: STORIES

I would like to start by clarifying the notion of story or storytelling and to justify my use of both fictional and autobiographical texts in this work. There is a certain (again, tacit) assumption that autobiography is “about” the truth. As Eakin puts it, “we readily accept the presence of autobiographical elements in fiction” but “the presence of fiction in autobiography tends to make us uneasy, […] we want autobiography to be true” (1985, 9). The word “true” cannot but be questioned here. Does it imply that the autobiographical work should exhibit some facts that can be verified, or does it produce a different impression solely because it is said to refer to the events that took place in reality? In other words, what should it be true about? As Nietzsche writes, there is no wonder “that we should finally become suspicious” and ask “what in us really wants ‘truth’” (2000, 289).

The reason I prefer to use the notion of a story throughout this study instead of underlining whether the texts I analyse are fictional or autobiographical is that “the self that is the center of all autobiographical narrative is necessarily a fictive structure” (Eakin 1985, 3). When Rousseau says, “I have displayed myself as I was” (1953, 17), the reader should be a little suspicious. Neither an autobiography nor a fictionalized story reveals the “truth”, whether the reader likes it or not. There are a lot of issues at work: accounts are not unmediated, experiences are not immediate but rather memorized, which leads to allowing a certain amount of fiction and
imagination in those accounts; experiences are not shared in isolation or into a blank void. In other words, the problem of the reciprocal influence of the writers' and readers' assumptions, intentions and expectations concerning the concept of the self remains in question. Whether it is an autobiography or fiction, the self is constructed: Mary McCarthy, a memoirist, has noted that she “arranges actual events so as to make ‘a good story’” (1957, 164-5). Sidonie Smith writes that certain autobiographical and novelistic aspects and techniques have coincided in the historical perspective so as to confuse the generic boundaries (1990). The French term autofiction in part describes the idea of a novelized form of autobiography: as Serge Doubrovsky, the author of the term, claims, “I am a fictional being”, echoing Barthes’s statement concerning his self-portrait: “All this must be considered as spoken by a character in a novel” (Gratton 2001, 86). If we pay attention to the word “spoken” in the quote above, then the word “story” can be used ambiguously in this sense—as something told, whether it is true or not, notwithstanding that the word true has discredited itself. The word “good”, that McCarthy mentions, can refer to what Peter Goldie calls “emplotment”: a process in which an autobiographical narrative emerges and that gives the raw material of the experience an impression of coherence, meaningfulness and emotional import (2004, 157-160).

When Nathan Filer tells about Matthew and his deceased brother in The Shock of the Fall, it is a story, one that allows various readings ranging from an illness narrative to a narrative of confession. Billy Milligan, who was known to possess twenty-four different personalities, is himself a story, but it is thanks to Daniel Keyes who took up the responsibility to put Milligan’s story into writing, a novelized biography, that the general public is now aware of it at all: the newspaper story of the rape is now long forgotten but the story of multiple identity disorder is alive and kicking, with the book (The Minds of Billy Milligan) having been translated into many languages. Even more interesting is the case of Mark Haddon’s The Curious Incident. Haddon’s is a fictional story that has invoked solid cultural representations. Although Haddon never mentioned the word “autism” and opposed the popular reception of the novel as being about autism, the general public as well as the actual autistic community took Christopher’s image close to heart. Even though the novel resists medical reading, as I argue in Chapter 7 of this thesis, its readers perceived it as “true” in the sense that it conformed to their expectations and assumptions of what an autistic person is like (in the notorious manner that favours labelling, namely that the autistic is “this and not that”). Moreover, the community protested against the allistic cast of the corresponding stage production and demanded that an autistic lead should play Christopher (Connor 2015). Thus, the story has produced an image that laid hold on a certain place in the mind of the general public: it should be admitted that they trust the story and therefore base their judgment upon this very story.
It can also be argued that “real” stories are more frightening than ones made up, the former being less comforting for the sole reason that they depict events that anyone can encounter in real life. On the other hand, one might complain about a fictional story being repulsive and ask why anyone would even imagine such horrible things and write them down, yet at the same time feel safe and reassured because the provoking story is just a fiction. Yet, fictionalized stories do not come from nowhere, which is another challenge towards the true or real. When Matthew makes an ant farm in his bedroom and the ants break free from their glass jars and spread all over the carpet, his grandmother is terror-struck but the reader knows it is fiction. When Matthew tries to connect with his deceased brother he is asked: “You said your brother was in the moon, you said you could hear him in the wind?” (Filer 2013, sharp scratch) and Matthew answers positively, which is closely reminiscent of Henry (Henry’s Demons), who believed he could hear the voices of the trees and bushes and had encountered the golden Buddha in the sky. Another commonality is that one reads about Matthew as a stranger to the reader in the same manner as one reads about Henry, even though Henry’s story is autobiographical and Matthew’s is fictional. Both of them, however, become less of strangers to the reader if their narratives, whether fictional or non-fictional, “manage to diminish the sense of distance that readers feel” (Sklar 2013, 21). In this sense, the “verifiability” of the facts in the story fades into the background, and what prevails is the way the reader responds to the story.

The interrelation between fact and fiction, truth and falsity, fiction and non-fiction still presents a controversial issue in the field of narrative studies. Even though it is clear that fictionality “is ubiquitous in our culture” (Nielsen et al. 2015, 62), as in the case with norm and deviance, scholars tirelessly keep on coining new definitions of fiction, such as “nonreferential narrative” (Cohn 1999, 15) as opposed to non-fiction. This opposition implies that historical works and autobiographies are subject to judgments of truth and falsity, whereas novels are “immune to such judgments” (ibid.). This claim is proved to be problematic in Chapter 5 of this thesis in which a collaborative narrative is analysed, and especially in Chapter 7, which criticizes the urge to apply a “real” diagnosis to a fictional character, which shows that fiction is not immune to the judgments of truth. Moreover, fictionality “can be subordinate to nonfictive purposes” (Nielsen et al. 2015, 67). It is “a fictive discourse” that is “a strategy for generating a fresh perspective” (ibid., 63). The case of Christopher, for example, offers a fresh perspective on difference. Fictional stories are often considered hierarchically inferior to non-fiction. However, their impact and importance is not less crucial: fictive discourse is not “lying”, it is not “cut off from the actual world” and it is not “a framed or second-order imitation of non-fictive discourse” (ibid.).

Although controversial, the consideration of fiction and non-fiction side by side is a key element of the deconstructionist and post-structural approaches. As the novelist E. L. Doctorow says in an interview, he believes that everything in his
historical novel Ragtime (1975) is true (Nieman Storyboard 2015, n.p.) even though it demonstrates both fictional and non-fictional characters acting in a historical context. “There is really no fiction or non-fiction; there is only narrative”, he adds, “there are obviously ways to distinguish between the two—fiction and non-fiction—but certainly not in terms of verifiable truth”, since journalists, historians and politicians tend to make history up and their works “entwine some degree of fiction with truth” (ibid.).

Thus, my approach to the chosen stories follows the logic of demonstrating the “continuity” between fiction and non-fiction, which aims at emphasizing the “fictionality in both domains” (Nielsen et al. 2015, 71). It is important to note that while fiction is not separated from the actual world, fictional characters are not strangers to real humans and readers. This is crucial to all of the practical chapters in the thesis, and the challenging interrelation of fact and fiction, regarding both characters and the events, is emphasized throughout the study. Apparently, fact and fiction are not the only things that concern readers: as Nielsen and others insightfully note, human beings are concerned with possibilities to imagine “what is not the case and could never be the case, with what is not the case but could be the case, with what should have been the case” (2015, 64).

3.2 CHALLENGES OF LANGUAGE

Having stated the fictive nature of the self presented in a narrative, I will now turn to a discussion of the link between such fictionalizing and the challenges that language presents as a mediator. Let us begin with the two notions—that of a stable self-image arising from one’s “natural” coherent identity, and a perfect language of immediacy. These two do not exactly contradict each other, but are apparently complicated by the inconsistencies of each other.

I will start with an amusing story told by Fania Pascal in her memoir of Wittgenstein: once, when Wittgenstein telephoned her when she was in hospital after an operation, she told him that she felt “just like a dog that has been run over”. Wittgenstein was not caught unaware and answered in dead earnest: “You don’t know what a dog that has been run over feels like” (Pascal 1981, 28-29). Indeed, we can barely manage to express even our own past feelings, let alone those of a dog. There is no immediate grasp or seeing of thoughts, otherwise one would have “no further need to speak”, as Artaud writes (Artaud 1976b, 87). What follows from this is that language does not always allow a person (the more so a person with a mental illness) to express their experience in an appropriate way, either because there are no corresponding words or because the words that do correspond have acquired other meanings that can be found outside of the medical discourse.

The former problem of finding no corresponding words is concerned with language and alterity (which includes the non-transparency of the other as well as of oneself), which do not let one immediately express and the other absolutely
grasp the experience, whether it belongs to a dog or another person. Kafka, for example, admits that he tries to “convey something which cannot be conveyed”, to tell what he feels in his bones and “which can only be experienced in these same bones” (1990, 219). To do justice to Kafka’s writing, it should be noted that his manner of orientation in the world of the absurd, whether his letters or novels are concerned, more distinctly hints at the human experience than a stiffly structured narrative. Schenk notes in Unholy Ghost that he hoped for a “fluid, full, direct communication in therapy”, wished to “plug a probe” from his brain to the doctor’s, but the need for mediation always came up and he often chose to keep silent, because if he did speak it was with “stumbles and stammers” (Casey 2002, 248) but, though the words “unhappy” or “anxious” did not actually express the condition and were not even close to perfect mediation, they were better than silence.

I would like to draw an example from Artaud’s writings to illustrate the idea of the “non-articulatedness” of experience. Foucault, for example, also turns to Artaud when speaking about limit-experience since, as he says, “to express this experience requires, not scholarship, and certainly not rational argument (which would rob limit-experience of its tragic power) but rather artistry—the fury of a poet like Artaud” (Miller 1993, 107). There is much in Artaud’s letters, poems and essays that helps us recognize the idea of mediation and the (un)translatability that stems from it. Once, in the Rodez asylum, Artaud was asked to translate Carroll’s “Jabberwocky” as a means of therapy, yet what he produced could hardly be called a translation per se. A disruptive sort of translation was produced, intentionally: Artaud wrote to Henri Parisot that he tried to translate it but it “bored” him as he liked “spontaneous poems, not artificial languages” (Artaud 1976c, 448). Carroll’s language is that of a surface for Artaud as, even though Carroll invents language with certain extra-grammatical meaning in mind, it has no depth value that, in Artaud’s thinking, comes from suffering, anger and poisoning and can be found in, e.g., Baudelaire, Poe or Nietzsche. In a sense, it is this suspiciousness towards Carroll that leads Artaud to embody the “language without articulation” (Deleuze 1990, 89) in his “translation”: while Carroll aims at creating nonsense using well-structured grammar in order to “articulate” and still be understood though pretending to speak nonsense, Artaud not only uses incomprehensible syllabic utterances but also disrupts grammar. Artaud’s experiments may be viewed as those coming out of madness, yet it is more essential to consider their importance to the analysis of mediation.

In a letter from Rodez, Artaud writes that he has written a book, the language of which opposes the “sugar-coated” plagiarism he has found in Carroll. What is peculiar about the language is that it is not French, but one “which everyone in the world could read”, sounding like “ataratatarana” (Artaud 1976c, 450-1). Could it be that these experiments are reminiscent of attempts to find a universal language of immediacy and that the only possible language to be found is the one he
demonstrated? It eradicates all the inconsistencies of communicability and translatability as it is untranslatable as long as it does not need to be translated. In a sense, this language carries one beyond “the subterfuges of the mind”, as Artaud writes about Van Gogh’s artworks and Nietzsche’s writing (ibid., 509). Van Gogh, he adds, was “bloody well right” thinking that “one must know how to deduce myth from the most ordinary things of life”, one example of such a demythologizing being Van Gogh’s painting “Wheatfield with Crows”, which carries a “sensation of occult strangeness” (ibid., 491, 500). While the notion of myth carries a multitude of meanings within itself (with the meaning Barthes attached to it being paramount in the context of the current study), Artaud points to its generalizing and symbolic nature. It apparently has certain features in common with Artaud’s notion of the “body without organs” as it is opposed to the well-maintained organism with its imposed “forms, functions, bonds, dominant and hierarchized organizations” (Deleuze and Guattari 1987, 159). The task of deducing myth is a sophisticated one, whether we are dealing with Van Gogh’s art or narratives of mental illness. I cannot but refer here to the question of mediation and construction of narratives, since “occult strangeness” is what is supposed to remain and produce effect when all superimposed constructions are removed.

The latter problem (of the corresponding words having acquired certain meanings unrelated to the actual clinical picture of some disorders) has a lot to add to the above discussed myth mentioned by Artaud. The opinions and judgments of the general public are often formed by certain superficial representations of different disorders. It is remarkable that such representations operate both ways: some disorders are demonized to the extent that people are pictured as most hostile others, while the names of other disorders enter our everyday small talk and thus depart from their actual clinical picture. One of the most popular clinical diagnoses that has departed from its clinical essence in being used in idle talk on an everyday basis is depression. The word itself has come to be used outside of a medical context to designate practically any experience of feeling down for one reason or another. There would have been no problem at all regarding this more general use of the word if the general or lay use had not dominated and completely disguised the medical one. In his memoir Darkness Visible (also published as an extract in the Unholy Ghost collection), William Styron argues that “depression” has replaced “melancholia” and compares “depression” to a slug, saying that it pretends to be non-malevolent and prevents any general awareness of its own horrible intensity (Casey 2002, 115). In stark contrast, schizophrenia, among the most demonized of disorders, has been situated firmly in the realm of fear and the unknown. Being unknown, “othered”, the experience of schizophrenia becomes even “morally condemned” as deviant (see my discussion of deviance, norm and morality in 2.4.4). When Henry Cockburn was deinstitutionalized, he managed to

18 Some of the following reflections on ignorance have been previously published online (Prosandeeva 2016).
resume his art studies that he had started before being diagnosed with schizophrenia. Henry told some of his new fellow students that he had schizophrenia and the response he received was hilarious: “Oh, do you have a split personality?” (Cockburn 2012, n.p.). It is noteworthy that Henry experienced similar confusion himself when he first encountered the word at school: “Somebody had done a series of good drawings. The teacher said they ‘looked like the paintings of a schizophrenic.’ I had an idea at the time that schizophrenia meant a split personality” (Cockburn 2011, 31). It is, however, not clear from the quote whether the teacher intended to use the word metaphorically or was actually familiar with the peculiarities of schizophrenic drawing. Moreover, Lori Schiller’s mother, Nancy, remembers a similar impression of her first encounter with the diagnosis: “Schizophrenia meant split personality, didn’t it? [...] To me schizophrenia was The Three Faces of Eve, the film starring Joanne Woodward about a woman who had three different personalities” (Schiller 1996, ch. 8). As for the fellow students and Henry as a child, it is likely that the young people confused schizophrenia with a multiple or dissociative identity disorder, as pictured by Daniel Keyes (The Minds of Billy Milligan), or else, shaped by a stereotype and a familiar word combination that they had happened to overhear somewhere. Nancy Schiller is mistaken as well: the film she mentions pictures a woman with a multiple personality disorder, not schizophrenia. In her memoir, Elyn Saks speaks a lot about “disorganized thinking”, losing the holding centre, disintegration, incoherence—all those feelings that are also familiar to Henry and to Matthew (The Shock of the Fall) as well: “In any case”, she claims, “whatever schizophrenia is, it’s not “split personality”, although the two are often confused by the public; the schizophrenic mind is not split, but shattered” (Saks 2008, ch. 24).

Looking up schizophrenia in an etymology dictionary gives the literal translation from the Greek—“a splitting of mind”. It is, therefore, fairly easy to confuse with multiple identity disorder if one fails to get to the “splitting of psychic functioning” that Bleuler implied when coining the word schizophrenia (1911). Or else, if one fails to look through, say, the Cockburns’ Henry’s Demons or Daniel Keyes’ The Minds of Billy Milligan. Upon reading these stories it becomes fairly hard to confuse Henry Cockburn and Billy Milligan. The etymology of depression is similarly ambiguous with its seme of being “pressed down” or “weighed down”. The structure of the word and the inaccurate representation of the diagnosis scarcely give a full picture of clinical depression. Generally speaking, stereotypes produce distorted representations of some conditions and further contaminate the labels produced by the “always already” unreliable language that has its own limits. The stereotypes are apparently a result of a voluntary ignorance. There is a tendency among the general public to consider narratives of mental illness a highly specialized sort of reading. Such an attitude solidifies the us/them binary: people deny what seems irrelevant to them, claiming (or rather assuring themselves) that it is none of their concern. This is a vicious circle: on the one hand, the entire issue of
ignorance arises precisely from people’s lack of desire to be concerned and, on the other hand, their refusal to be concerned is a direct consequence of their being ignorant. The outcome is an attitude of “non-involvement” that is limiting in many ways, the crucial result of which is the sustainment of the category of the unknown. In his book on the deaf, Oliver Sacks notes that one might consider the study of sign language to be of limited interest or value to the majority. This is by no means the case, he says, as “the considerations that arise” from this study are “of the widest and deepest importance” as they show that “what is distinctively human in us […] do not develop automatically” (Sacks 1990, 13). I would similarly approach the study of illness narratives, which, apart from being stories of experience, demonstrate the ambiguities of language, its limits and its direct bearing on the social assumptions concerning deviance, identity, authenticity and, ultimately, humanity.

The challenges of language discussed above, whether it is fragmentariness, lack of appropriate terms or ambiguity, are all concerned with the act of deducing myth which, in its own turn, is concerned with what may be called despectacularization. A Debordian use of the notion of spectacle involves the idea of social relationships being mediated by images of what one is ought to have. The use of the term in a more general context of critical theory can be important for my argument: narratives do not reproduce the common images of the mentally ill—those are created by stereotypes and contribute to the ignorance of the spectators as superficial representations, triggering the othering rather than helping to eliminate it. While it is utopian to contemplate the possibility of the myth being completely deduced from narratives (assuming that the narrators’ experience is also mediated and conditioned by their being a part of society), it is fair to suppose that such narratives can help the readers separate a mental condition from its spectacle image, that is, distinguish the lived from the represented.

3.3 NARRATIVE IDENTITY AND THE MYTH OF SELF-TRANSPARENCY

The conditioning of the narrator’s experience is mentioned in the previous section as the relation of the narrator’s self to language is in no way univocal. This section will examine the challenges of forming an identity in a narrative and is divided into several subsections. The first tackles the question of the link between a self and a narrative: can there be a self that precedes narration, that is, “before language”, or is the self created in a process of constructing a narrative? My aim is to demonstrate that such a dichotomizing approach to self and narrative is futile, since self can be both the cause and effect of a narrative. The following subsections deal with a question of bias that one’s self might carry upon itself. The bias, on the one hand, prevents a person from being self-transparent and formulating his or her own experience, and, on the other hand, demands that a person must possess a self-
transparent identity in order to be able to construct a coherent narrative. The biases that other people impose might include, for example, a bias of memory, social regulation, or interpretation. In this sense, I refer to Derrida who claims that we never write alone. Lastly, I will turn to the concept of morality and how it influences a person’s way of articulating and conceiving their own identity as either coherent or as unstable and, therefore, inappropriate. I have already discussed the concept of morals underlying the common understanding of norms and conventions in society and will refer to this once again in the context of conventions that concern the formation of a narrative identity.

3.3.1 Self “Before Language”

The possibility of an autonomous self existing “before language” is a stumbling block for researchers in narrative, phenomenological and post-structuralist contexts. Olney, for instance, argues in favour of language as means of self-definition and self-knowledge, for it systematizes the inner self and reflects the structural order (“hierarchical imitations of the prevailing harmony”) of the outer universe (1980a, 368; 1972). The idea of hierarchical order certainly stands in contrast to the post-structural thinking that Olney criticizes as one that “dissolves self into a text and then out of the text into thin air” (1980b, 22). The slightly dismissive tone of this statement does not come as a surprise. The history of deconstruction has witnessed quite a number of critical statements arising from a distorted notion of its objectives. The most prominent of these belong to Habermas and, perhaps, Searle, who insisted on giving Derrida the label of “obscurantisme terroriste” (Postrel and Feser, 2000). As for Olney, it is clear that he refers to the “nothing outside the text” statement, to which he ascribes the nihilistic attitude that surprises Derrida as a declaration of one’s being imprisoned in language, whereas his own critique of logocentrism is “saying the exact opposite”: it emphasizes the need to search for the “other of language” (Derrida 2004, 154). He explains the difference by contrasting the common assumption that deconstruction is “an enclosure in nothingness” to his idea of it as “an openness towards the other” (ibid., 155). Olney also says that the self is “dissolved”, echoing the frequent critique of deconstruction for having dispensed with the self or the subject. It lies on the surface that the subject is a logocentric concept, yet, in spite of the critique of logocentrism, Derrida does not deny the subject or allow the possibility of a “simple exteriority” (1985a, 16). Derrida is not simplistic or naïve: we cannot eliminate the subject, yet “it should be deconstructed”, where deconstruction does not mean denial of its existence or total destruction (2004, 156), rather it means that it is quite deceptive to suppose that “the subject is what it says it is” for the subject is not “some pure cogito of self-presence” (ibid.). There is no dispensing with the subject, Derrida states that quite clearly, but there is a certain interrogation of institutionalized ways of dealing with the subject.
With this in mind, the words “bravura of the ‘French’ denial”, mentioned by Eakin (2004, 182) in line with Olney’s criticism, seem quite unfounded as questioning is mistaken for denial. Does language present a pure, transparent picture of the self, or is it not transparent enough to present an undistorted picture? The latter is what Derrida says about the act of confession: when I confess, “something remains secret within me” and, what is crucial, this is the very reason why “no one can confess in my place” (2000, 30). This adds another aspect to the discussion of the subject: although or rather due to the fact, that there is a hiddenness or alterity within the self that conditions the lack of one’s transparency directly to oneself, substitution is impossible, as no one would have access to that alterity. This is in line with Artaud’s thinking when he writes that “a man possesses himself in flashes, and even when he possesses himself, he does not reach himself completely”, and then adds: “Nevertheless, this man exists” (Artaud 1976a, 43). This takes us back to Artaud’s idea that even if one is able to present only fragments of oneself, one should not be condemned to silence.

In general, the binary scheme to which the different approaches to self are reduced can be called an utter simplification. By different approaches I refer to Eakin’s assigning a cause-and-effect relationship to self and language (1985, 190) (though in a later essay Eakin admits that the myth of the individual self has misled his thinking [1999, 51]) or Varner Gunn’s discussions on whether self displays or distorts itself by language, and whether language is just the surface or whether it offers a clue to “what operates behind or beneath” (Varner Gunn 1982, 10). There are a number of apparent problems with these statements—one being their either-or oversimplification. It is needless to choose whether the self is a cause or an effect of language or, in other words, whether the self precedes language or follows it. The self is neither the cause, nor the effect alone, for it can only be both. It seems to be a cause of language because one feels a need to communicate one’s experience or to tell a story even if it does not conform to the common representation of a story as a coherent narrative. Therewith, the self appears to be an effect of language, for there is no other way to tell your story and to explain oneself to others; at the same time, though, one realizes that language serves a medium and, in this sense, the self cannot but be shaped by the medium and is, therefore, dependent on it. In this case it is possible to understand the effect of language as the “result” and deal with the question of language displaying or distorting the self within this context. As with the cause-effect binary, the question of displaying-distorting is not properly put: the language is needed to “display”, yet as a medium it is likely to “distort” the self, though both words quite remotely and crudely describe the relation of language to the self. This is because the cause-effect and display-distort binaries involve a further complication of what it might mean to call the self an effect of language—the concept of the self per se. If we understand effect as a “consequence”, then we question the transcendent status of the self and suppose that the self is entirely a language produced fiction that exists solely within the sphere of narration.
Therefore, the question would be whether there is actually anything to display or distort? Varner Gunn’s line of thinking implies that there is something operating “behind or beneath”. This is the idea of the whole self behind language, which is supposed to be the clue to the former. Even when Eakin writes that language “fashions selfhood”, the same presupposition remains, though his claim that such fashioning is “life-sustaining” (1985, 191) greatly applies to illness narratives. Sidonie Smith’s idea fits here, as she claims that “there is no essential, original, coherent autobiographical self before the moment of self-narrating” (1995, 17). This self-narrating as “self invention” does not presuppose the transcendent self but implies the process of narrating and, therefore, the process of the self’s coming to be.

3.3.2 Bias and Interpretations

“We must come to terms
Admit we are defeated
We must come to terms
Of bias and deception
Stand up and be counted
In uniformity”
Dark Tranquillity

I mentioned earlier that experiences are memorized and, therefore, their “truth” is mediated not solely by language but also by the constructedness and discontinuity of the teller’s identity through time. Previous identity states are no longer available or reinhabitable, as Strawson argues, but the more we recall and narrate, the further we are “moving away from accurate self-understanding, from the truth of your being” (2004, 447). Not only the writer, but also the reader becomes estranged from the person he or she was to the extent of uncanniness. Remarkably, while one cannot reinhabit one’s previous states, one is inhabited with interpretations—the latter being the presumable explanation for the former. This inhabitedness with interpretations further complicates the idea of moving from the “truth”, affecting not just the retrospective view but also the immediate grasp of one’s identity. As a result, the word “immediate” does not presuppose the connotation of transparency, self-transparency or flawless realization. In an interview, Derrida mentions that such “truth” is to be made in the manner of Saint Augustine, whom he quotes speaking of “making the truth”, which is the opposite of the truth of “adequation or revelation” (1995a, 347). It is opposite because it carries within itself everything one has ever encountered and internalized—voices coming “from another context, permeated with the interpretations of others”, social, ideological, power implications (Bakhtin 1984, 202). Pointing to the idea of one’s self being framed by imposed interpretations, Bakhtin’s theory of dialogue does not presuppose self-
adequation or transparency as a dialogue includes subjects whose “true” self or identity cannot be defined. On the one hand, dialogue is socially regulated, on the other hand, when the participants in a dialogue speak, they do not speak from a point of isolation. As Derrida notes, “once I speak I am never and no longer myself, alone and unique” (1995b, 50) as the “I” is always already being traced.

There is a concept of a “sustainable self-image” that is supposed to win social confirmation of one’s identity (Gullestad 2004, 218). This sort of image is meant to represent what a person is supposed to consider as their true nature in a nice wrapping of coherence and unity, that is, you by no means stay in just your “pajamas and a bathrobe”. This can be illustrated by a good example taken from the correspondence between Antonin Artaud and Jacques Riviere. When Artaud sent Riviere his poems for publication, Riviere wrote back to him in 1923 saying that Artaud “did not usually succeed in creating a sufficient unity of impression” and that “with a little patience” he “would succeed in writing poems that are perfectly coherent and harmonious” (Artaud 1976a, 33). It is predictable that Artaud behaved in this situation in a strictly Artaudian manner: he asked Riviere to return his letters and manuscripts and wrote that the “collapse of the soul” made it impossible “for these verses to be any different” (ibid., 34-35). The situation is quite similar in mental illness narratives: one is more often than not demanded to tell a story of a recovery and to tell it as “a good story”. Or else, there need not be any story at all apart from a dry hospital record (in Lori Schiller’s memoir, for example, these records are intermingled with her and her parents’ accounts). Mary Wood clearly states that once diagnosed, a person remained deprived of the right to have their voice heard, or, as Boevink notes, “after all, with a disorder you cannot speak” (qtd. in Wood 2013, 104), implying that an incoherent or seemingly meaningless narrative is ignored more often than not. Artaud told Riviere that the latter hardly attached any significance to the fragmentary nature of his poetry and wondered whether one should “be condemned to oblivion simply because he can give only fragments of himself?” (Artaud 1976a, 43). Such fragmentation is excluded from the list of features inherent in the notion of identity, sustainable self-image or normality. Joshua Wolf Schenk writes in his essay in Unholy Ghost that he had to wrap himself “in a skin of normalcy” (Casey 2002, 248), although, realizing the inconsistency of this image of self or identity, likened it to that of a machine or an automaton.

However, what is remarkable is the subject’s apparent or disguised unawareness of being involved in social regulation, arising presumably from a lack of critical distance; even more paradoxical is the fact that the subject voluntarily follows the route socially assigned to them. Self-stigmatization is an example of this regulation that significantly affects the narratives people construct. For example, Gullestad (2004) has studied how ethnic minorities construct their identities in contemporary Norway and how their images are constructed in the media. She finds that while some people are displeased with the focus on their descent (given
that they were born in Norway), others choose to highlight their ethnic culture, to joke and “play the stereotype” (Gullestad 2004). I would apply similar reasoning in approaching Lori Schiller’s memoir of schizophrenia (*The Quiet Room*), relevant to the current study. After being released from hospital and regaining some control over her auditory hallucinations, Lori has a hard time encountering new people, still feeling “paranoid, fearful of people, down on [herself] for [her] perceived failures” (Schiller 1996). Occupied by the feeling of inferiority to others and by the common assumption that hearing voices and schizophrenia in general isolate her from the surrounding world, Lori begins to think about herself as a schizophrenic in the first place, and the illness, thus, becomes the determinant of her identity. It leads her to behave similarly to Hannah, who greets anyone she meets with the words “I am Hannah and I am a Negro!” (Gullenstad 2004, 233).

Such an urge to determine the main characteristics of one’s identity may be a result of the demand to reveal one’s “true” identity, which appears to be saturated with imposed interpretations. This is not to say that Lori, for example, is not affected by her having to live through schizophrenia or that she has no identity. The important thing is that she is all the more affected by the meanings and stereotypes that schizophrenia as a determinant of her identity carries with itself. When Derridara was asked whether he did not want to have an identity, he answered that he did, but each time “this identity announced itself” something cried: “Look out for the trap, you’re caught” (1995a, 340). The notion of true identity is an enclosed space that drives out possibilities and can entrap one within its refined interpretations. This entrappedness significantly affects the way narratives are constructed and perceived: is being autistic the “true” Christopher’s identity? Or does the language of the story become so saturated with given meanings that once the described characteristics have fallen onto the breeding ground of labelling, autism is the first thing to come up? A number of other narratives are constructed as if looking out for the constructions against which the stories are going to be perceived. Meri Danquah, for example, tells her story in the *Unholy Ghost* collection of essays with regard to racial stereotypes: she wonders why it is regarded common among “white Jewish women from Boston” to suffer from depression, while the issue of black women and depression generates such reactions as “that is not a luxury we can afford” (Casey 2002, 173, 178).

When Derridara says, as quoted above, that he is no longer himself and alone when he speaks because the “I” is traced, it is traced not only in terms of social regulation that urges identity to be defined. The self cannot be isolated for yet another reason, that of being haunted by the others who speak. The speaking subject, he writes in *Writing and Difference* (1967), is no longer the person alone, therefore “the speaking subject discovers his irreducible secondarity” as “the origin is always already eluded” in the “organized field of speech” (2005, 223-224). This organized field of speech predetermines the signifier that “says more than I believe that I mean to say” (ibid.) and the absence of a determined self as, according to
Derrida, it is “given by writing, by the other” (1995a, 347). Thus, when Derrida says that he is not alone when he speaks, he implies that the subject as well as his body is a point of transference, meaning that “there is always someone else” (ibid., 353)—thus undermining the privacy or autonomy of one’s story. “Someone else” for Derrida is Plato, Socrates, Hegel, Genet or Saint Augustine—his transferential figures: “I am very fond of everything that I deconstruct in my own manner”, he says (Derrida 1985b, 87). What self is given by writing to those who write the narratives discussed in the current study, narrators that are real and fictional, alive and dead? Lori Schiller’s main “response” is, perhaps, Sylvia Plath, as Lori does not write in isolation, since she had read The Bell Jar before she realized her own illness. Matthew’s response in The Shock of the Fall is definitely Simon, who is a dead fictional character and who cannot precisely respond, although he does respond in Matthew (in this manner Derrida speaks of, for example, Levinas in Adieu [1999a]). In Henry’s case it could be Virginia Woolf or Jackson Pollock; in Christopher’s case the response could be Sherlock Holmes (a real response for a fictional character) as he tries to fashion his narrative as a smart detective story.

Drawing on the Levinasian ethics of responsibility, Derrida claims that these other figures call for his response—an idea also closely related to Bakhtin’s theory of the dialogic nature of language, literature and thought. The closure of dialectics is put aside by the dialogic approach—Derrida does not try to “conclude” the texts he deconstructs or to “reduce” those who call for his response (“He [de Man] will always interest me more”, Derrida writes, “than those who are in a hurry to judge, thinking they know, and who […] have concluded in advance” [1988a, 650]). Among the latter are, for example, Levinas himself and Paul de Man. Derrida writes his memoir for Paul de Man in response to what he finds a controversial event: de Man’s being accused of publishing anti-Jewish articles in pro-Nazi journals. Derrida writes that from a friend came an “obligation to tell a story”, though he could never have imagined that “the experience of such a wound would have to include responding for Paul de Man”; yet, the responsibility is apparent: with no intention of judging or approving Derrida speaks “of-him-for-him” as “he is no longer there to speak in his own name” (ibid., 596). A hurry to judge serves a part of the dialectical approach and leads to closure, whereas Derrida’s understanding of a response is that of a dialogue, of a non-closure, of not reducing one or one’s actions so as to make a “good” or a “headline” story. Derrida refers to Levinas when he speaks of death in his Adieu as an interruption, decomposition, without-response (Derrida 1999a); in so doing, he takes up the idea that there is no response or possibility to respond in death, and this can be similarly applied to the notion of identity: there is no further possibility in a strictly defined identity or a call to define one’s identity. “Identity presupposes alterity”, Derrida says, implying that the “notions of property, appropriation, and self-presence” aim at domesticating (2004, 148-149), yet all those traces of alterity (the social, cultural and those of others who speak) resist being domesticated. It is in this sense that Derrida
speaks of deconstruction as an “affirmation” (ibid.), as that which calls for response and non-closure, where closure would mean an attempt to deny the knowledge already gained. In an interview, Derrida mentions his affection for Andre Gide’s works and how the idea of Proteus influenced him: “I identified naively with him who identifies, if that’s possible, with Proteus” (1995a, 342). Derrida actually speaks about Gide’s The Counterfeiters (1925) and refers to the quote from the novel in which Edouard is likened to Proteus: “He is never the same for long together. [...] He is perpetually forming, unforming, re-forming himself. One thinks one has grasped him...Proteus! He takes the shape of what he loves” (Gide 2012, 202). It is quite reasonable for Derrida to take up a Greek sea god as something that has affected his thought, as something that implies a protean nature of self and identity.

3.3.3 Narrative Identity and Morality

Some narrative scholars claim that it is important for the narrator to be oriented in a moral space, yet “moral”, while apparently implying aspects of truth, goodness, meaning, nature and authenticity, seems to be an underdefined term (e.g. Parker 2004). The notions of moral space and authenticity are directly connected with the self-language debate. Parker, for example, in a rather phenomenological manner, speaks about the responsibility of “the narrated ‘I’” to “take his stand in moral space”, which means to “attend to the claims of [his] own inner nature” (2004, 65). The inner nature, in this reading, is opposed to a “universal human template” (ibid.) and is apparently thought to be autonomous. Such an approach is reminiscent of Husserl’s phenomenological reductions and the overall focus on the essential nature of consciousness. The idea of “taking a stand” is a bold one, yet when connected to a “moral space” it receives a flavour of closure. Moreover, the idea does not take into account the possibility of the very “inner nature” being constructed according to the “template”, let alone the questioning of the essentialism and the existence of the “inner nature” before narration in the first place. The essentialism of the inner nature and of experience is immediately concerned with Wittgenstein’s anecdote about a dog. Can there be an essential experience of being a dog, or, more specific to the current study, an essential experience of mental illness, and could this serve foundational knowledge, an undistorted description bracketing any possibility of contingency? From the point of view of personal experience, Derrida’s understanding of deconstruction is far more concerned with the human experience, uncertain or fragmented as it is, and selfhood, unessential and narrated by a person him- or herself. If there should be any morality in deconstruction, it is surely connected with Derrida’s view on response and, hence, responsibility to the other. What is important here is that this view does not only challenge classical phenomenology and the metaphysics of presence (as the possibility of an exact internal adequation with oneself [Derrida 1973, 66-8]), but that it contributes to a new understanding of phenomenological
capacities through the prism of the post-structuralist ideas. One cannot presuppose a self-transparent or self-adequate transparency anymore, but rather one seeks to explore the dimensions of the experience contextualized by hesitation, incredulity, incalculability. It is noteworthy that Derrida “never renounced the discipline and methodological rigor of phenomenology” but suspiciousness towards Husserlian “presence” and Nietzsche’s genealogy helped him move towards a more radical questioning of language and metaphysics (Derrida 2004, 141).

Artaud writes that “what is difficult is to find one’s place [or, in a different translation: “The difficult part is to find out exactly where one is” (1971, 72)] and to reestablish communication with one’s self” (Artaud 1976b, 82). “We must begin wherever we are”, Derrida answers, as “the thought of the trace”, “the departure from the closure of a self-evidence, the putting into doubt of a system of oppositions” have all showed us that it is “impossible to justify a point of departure absolutely” (1976, 162). Is there a point of departure or a point of reference beyond the discursive practices, or is there a possibility of their transformation? Where Derrida opposes the idea of being trapped in language and claims instead the need to find the other of language or of philosophy, Foucault expresses a similar view regarding power relations; he refuses the word “trapped” in favour of “struggle” and the dynamic process of dealing with power: “We cannot jump outside the situation, and there is no point where you are free from all power relations. But you can always change it” (1997a, 167). By “changing” Foucault implies resistance and its creative aspect, which he discusses in the interview. This creativity could be viewed in the context of the kind of transgression that does not simply reverse the system of binary oppositions but wonders whether there should be a binary at all, or else, whether what we are speaking of should be a binary and not something else. The creativity can also be understood in the context of performativity (in Butler’s understanding of the term). The social and cultural constructions cannot be viewed as disconnected from the individual acts: the constructions are constituted and reproduced through those acts, while the acts are in a reciprocal manner informed by the already constituted constructions. With this in mind, the focus of this study, stories of mental illness, are certainly a part of that creativity, a resistance always already embedded in the power; individual acts enclosed in a social and cultural context, influencing and being influenced by the latter.

It is often demanded that one should “find where one is”, construct one’s identity and know how to orientate in the “moral space”. To put it bluntly, a standing in the moral space or territory, or universe presupposes the absolute self-transparency of a person, their knowing the powers at work, or rather believing that he or she keeps a distance from those powers. Is it for this reason that, for example, Foucault strikes one “as completely amoral”,¹⁹ or that the narrators of

¹⁹ Foucault’s understanding of experience has always been at odds with the phenomenologists’ idea of the essential human nature. The main issue that the phenomenologists have had with Foucault is that he is being completely “amoral” when talking of discourse of power, sexuality, madness, and, of course,
experiences of mental illness suffer from a lack of transparency, coherence and knowing where they are? It is probable that a process of disambiguation is the most welcomed one in the context of closure and identification. Yet, the impasse for disambiguation is the idea that the “points of departure” and arrival cannot be absolute; when Nietzsche wonders why we always want truth, he continues: “Suppose we want truth: why not rather untruth? and uncertainty?” (2000, 289). If stories of any genre contain an element of fiction and the notions of identity and selfhood are compromised as discussed above, then Nietzsche’s question is pertinent: the “truth” would be about a fictionalized story of a fictitious, unstable or non-existent selfhood.

It is noteworthy that the illusion of self-transparency and the idea that one is what one says one is can hinder understanding of the other. It can even be harmful if one utterly ignores the issue of mediation and the bias it might involve. One example concerning Henry Cockburn’s story can be as follows: one may ask how Henry’s inclination towards art has influenced the course of his illness? The question may seem unexpected but it highlights the idea of the interrelatedness of our selves and their narrative expression. It is important to take into account Henry’s interest in the interrelation of madness and genius in Woolf and Pollock. Henry writes in the memoir that he ran into his friend and they “talked about Virginia Woolf and how she had gone mad, and he [his friend] said the line was thin between creative genius and insanity” (Cockburn 2011, 107). The friend also called Henry a prophet for the way he dressed. What Henry learned and remembered about Pollock is that his circular painting resulted from his being “possessed by daemons” (ibid., 54). As Henry felt he was following in the footsteps of his heroes, he claimed madness and genius. This is not to claim that Henry’s interest in art was the reason for his developing schizophrenia. However, the art discourse that often cherishes mental illness as a prerequisite of genius may have influenced Henry’s attitude to himself and his illness: at least, in that he refused to take medicine for a long time, believing that medicine hinders his talent and his ability to see the other side of the world. Patrick also discusses the problem concerned with the way of living informed by the art discourse and common for an art student: he supposes that any “stress-free work might have been better adapted

limit-experience. One example of Foucault’s confrontation with the humanists is his discussion with Noam Chomsky. Giving an interview in 1990, Chomsky still remembers his participation in the debate with Foucault in 1971: “He struck me as completely amoral, I’d never met anyone who was so totally amoral” (Miller 1993, 201). This very debate was about the notion of the human nature. As a humanist, Chomsky stands for the enduring values which are believed to be truly fundamental (justice or creativity are among them): “A fundamental element of human nature is the need for creative work […] a decent society should maximize the possibilities for this fundamental human characteristic to be realized”, “We must act as sensitive and responsible human beings” (Chomsky and Foucault 2006, 38; 50). What Foucault sets against it is his idea of those values being socially constructed—justice is presented as a construct that makes sense only in a class-structured society. The fact that Chomsky was deeply affected by Foucault’s ideas was evident, and the moral territory of the philosopher’s flow of thought was apparently foreign to him: “It’s as if he was from a different species, or something” (Miller 1993, 203).
to Henry’s state of mental health than a reintroduction into the unstructured bohemian world of an art student” (ibid., 95).

The notion of artistry and its link to madness is ingeniously touched upon by Gilles Deleuze in his work Logic of Sense (1969). Deleuze speaks of the artists’ transgressive experiences and highlights their “incorporeal metaphysical crack”, the “bottom of schizophrenia” and their always taking a risk in following their own labyrinths: “Are we to speak always about Bousquet’s wound, about Fitzgerald’s and Lowry’s alcoholism, Nietzsche’s and Artaud’s madness while remaining on the shore?” (1990, 157). The art discourse is, on the other hand, concerned with the interrelation of society and the social control associated with it and the madmen of genius. Artaud, for example, writes about a number of artists “suicided by society”, his narrative on Van Gogh being one of the most prominent. His essay reads that society strangles the madmen of genius in its asylums for it desires to protect itself from those who resist following its lines and from those who “utter certain intolerable truths” (Artaud 1976d, 485). It is likely that Henry, before realizing the necessity of taking the medicine to cure himself from “polka-dot days” and the experience of horror associated with them, was influenced by the idea of being locked up only because of his being able to see the truths. The connection of creativity and psychopathology has been studied on a scientific level, for example, in the works of Hartmann (1991) and Nelson (2010). Nelson writes that the presence of some “schizotypal features” is associated with “heightened creativity”, whereas in more severe disorders along the schizophrenia spectrum and in schizophrenia per se, the relationship between disorder and the creative powers is “attenuated” (2010, 389). Nelson writes about the “openness to experience” that he explains using Hartmann’s notion of thin “mental boundaries”: these refer to such traits as “being open, sensitive, vulnerable, artistic, trusting, defenseless, and fluid” (ibid.) that condition the “openness”. The present research adds to Sass’s idea that the seemingly uncanny manner of schizophrenic thinking should not be treated in terms of regression, but rather as unconventional: “It is one of the great ironies of modern thought that the madness of patients like Schreber should so often have been viewed as a regression to wildness” (1994, 165), he writes. While the overall impact of the art discourse on Henry’s condition is a controversial issue, it is still significant that Henry saw his illness as a revelatory gift. In an interview, Patrick says that his delusion was in some ways “exasperating” but “the fact that Henry sees this as a valuable experience is protective” (Mitchison 2011).

The accounts of mental illness studied in the current thesis do not promise truth or even an absolutely unbiased narrative, but they provide a perspective, recognition and critical reflection upon the shaping stereotype. Their incoherence and diversity reflect the very nature of the experience. The unity and coherence of one’s selfhood and its expression are a widespread illusion that discourages a lot of people from sharing their stories by evoking a feeling of shame and inconsistency. Telling can be threatening because the teller realizes that what they write or say is
not even close to what they experience. Some choose not to speak at all in such a situation, believing that the accounts of others are always coherent and that lack of coherence is their problem alone. In his notebooks, Albert Camus writes that we tend to express a “nostalgia for the life of others. This is because, seen from the outside, another’s life forms a unity. Whereas ours, seen from the inside, seems broken up. We are still chasing after an illusion of unity” (2010, 27). The idea of a perfect language that would immediately and naturally convey our thoughts and experience might, for some, be an intriguing fantasy. Instead we need to come to terms with the imperfect language that we have and, consequently, pay more attention to incoherent accounts. As Schenk writes, “a pale metaphor is better than suicide” (Casey 2002, 250), implying that we are inarticulate without language, which prevents us from being isolated. Despite the limits of language, interpretation and social construction, a story (in its broad meaning explained in the current study) is what makes understanding possible and what can really reduce ignorance about the human condition. Jacques Derrida, using Heidegger’s technique, places words under erasure: the word is not accurate, he says, and we cross it out, yet it remains visible because we cannot do without it (Derrida 1997). Although such words as schizophrenia, depression, and anxiety are inaccurate and even etymologically misleading, and although our stories are mediated by language, they do, however, convey and share the experience, showing that it is not incomprehensible or ungraspable.

All in all, stories prove to have an obvious advantage over the impersonal dryness of a case book or doctor’s notes and hospital records: they tell the experience “from inside” and can convey a different sort of information—different from objectivized records. Reading the stories, on the one hand, leads to enlightenment—readers often come across symptoms similar to theirs and can therefore relate; moreover, reading leads the reader to question the normalizing discourse; writing or storytelling, on the other hand, may have a therapeutic effect for the narrator, alongside the overall worth of the attempt to “translate” the authenticity of the subjective experience into words. Before turning to the autobiographical narrative of schizophrenia in Chapter 5, I will discuss the concept of schizophrenia as it is employed in postmodern theory. For that purpose, I will turn to such philosophers as Friedrich Jameson, Gilles Deleuze and Felix Guattari, and Jean Baudrillard.
"My idea of fun
is killing everyone"
Iggy Pop

The ignorance about mental illness concerns not only the clinical and lay usages of the notion of schizophrenia, but also its philosophical applications. Above, I have referred to how the notion of schizophrenia, as well as that of depression, has acquired a distinct being beyond the realm of its clinical usage. It is curious how some words appear to receive distinct meanings, including metaphorical ones. A so-called schizophrenic language has become a little apple of discord between those who study narratives of people diagnosed with schizophrenia and those interested in the postmodern condition. The metaphor of schizophrenia is reflected in postmodern literature and philosophy. The apparent gulf between the message of postmodern philosophical reflections and the message of mental illness narratives provides sharp evidence of the importance of defining terms properly. This is especially urgent because the metaphor of schizophrenia has, in turn, acquired different dimensions in Jameson’s (more Marxist and informed by the critique of the logic of capitalism), Baudrillard’s (informed by his theory of disappearance) and Deleuze and Guattari’s (more post-structuralist and informed by Lacan and the critique of language) theories.

In this chapter I analyse how the notion of schizophrenia has come to signify a metaphorical condition, how it is expressed in a postmodern novel and a novella by Will Self, and how the metaphor is different from, as well as similar to, schizophrenia as a clinical diagnosis.

Known for his turbulent youth and unconventional character, British writer Will Self has always brought relevant and topical issues close and up front in his novels and short stories. Gender issues in Cock and Bull, decadence and pastiche in Dorian (2002), and addiction and mental health in Umbrella (2012), The Sweet Smell of Psychosis (1996) and My Idea of Fun (1993) are among the most memorable examples. Today, Self is a public persona who regularly contributes to BBC Radio, TV panel shows and publications such as The Guardian, The New York Times, and The New Statesman. As Rennison writes, Self is “sometimes presented as a bad-boy outsider, writing, like the Americans Williams Burroughs or Hubert Selby Jnr, about sex, drugs and violence in a very direct way. […] Yet he is […] an Oxford-educated,
middle-class metropolitan” (2005, 150). To a great extent, Will Self’s literary talent manifests itself in his depiction of schizophrenic conditions that can be viewed from various perspectives, including those of Jameson and Deleuze, discussed above. In this chapter I analyse Self’s two comparatively early works, namely the novella *The Sweet Smell of Psychosis* and the novel *My Idea of Fun*. Both of them produce an impression of ambiguity, as the nature of the events taking place remains obscure for the reader. The reader is left to consider at least two possibilities—whether Richard and Ian, the protagonists of the novella and the novel correspondingly, descend into schizophrenia themselves and the reader deals with the accounts of their going mad, or whether the books present a metaphorical depiction of schizophrenic postmodern society and its obsession with surveillance, alienation and paranoia. One of the obvious strengths of the two texts analysed here, and Self’s writing in general, is that the writer does not provide any disambiguation for the reader at the end. As Sarup writes, “metaphors are not reducible to truth” (1988, 50). His fiction, and the many ways it can be interpreted, thus presents a spectacular example of Derridean undecidability, which is particularly apparent in the way Self deals with clinical diagnoses.

Golomb writes in her chapter in the edited collection *Contemporary British Fiction* (2003) that Self is considered a master storyteller because he knows the key to a good story—it should “be presented as true, no matter how absurd it is” (2003, 74). Absurdity serves the cause of Self’s ambiguity. In an interview, Self mentions that it was due to someone else’s good advice that he began to “allow himself the luxury of doubt” (Taylor 2007). Impressed by the idea, Self has utilized it not only for creating his psychedelic fictional worlds but also for formulating his own understanding of satire. Self is not the kind of author who would assume that he is “convinced of the underlying truth” and have to bring it to the reader in a “form of pontificating” (ibid.). Therefore, both the author and the reader are involved in the game of doubt and “moral relativism” that the new idea of satire entails; as a sign of this, Self claims that the role of the current idea of satire is to “make the audience think for themselves” and his role as the producer of such satire is to be a “provocateur” (ibid.).

Self’s doubt in the possibility of arriving at a single truth is one example of the postmodern incredulity, undecidability and lack of verifiable knowledge, and his idea of satire is the undecidability put into practice. Self’s following claim serves as a summary of his philosophical and critical conceptions of living in the unstable world: “All my books are fantastical because I don’t believe in the real” (Moir 1996, 5). Moreover, elsewhere Self directly speaks of his intention to show that “certain categories” are unstable and to “disturb the reader’s fundamental assumptions” (Glover 1997, 15). In this sense, Self’s position converges with the post-structural idea of the lack of absolute knowledge and the concept of transgression as presented in Foucault’s or Bataille’s thinking (see Chapter 2). When Self speaks of satire and “moral relativism” some transgression of common norms and
expectations is certainly implied. The transgression concerns both the narrative form, its ambiguity and the absence of closure, and the thematic level that provides unconventional insights into gender and social transgression as well as the concepts of identity, selfhood and their autonomy, or rather, their lack of autonomy.

Self’s transgression of the “truth” in the two texts can be claimed to be one of the manifestations of the Deleuzian idea of metaphorical schizophrenia, while his depiction of the authoritative surveillant society and references to capitalist production can be analysed through Jameson’s representation of schizophrenia. Both of these theories are discussed along with Baudrillard’s model of schizophrenia in the following sections.

4.1 THE POSTMODERN AND SCHIZOPHRENIA

When discussing Artaud, I mentioned Deleuze’s expression a “language without articulation” that he uses in Logic of Sense. Deleuze’s theory of schizophrenia is better understood through the prism of language and its liberation (in this sense Deleuze’s approach to schizophrenia can very crudely be called more positive than that of Jameson or Baudrillard). The discussion of Artaud’s translation of Carroll’s poem and his overall negligent attitude to the famous writer and logician as a master of surfaces informs Deleuze’s metaphorical understanding of schizophrenia. Deleuze writes that when Artaud confronts Carroll we find ourselves in “an entirely different language” and realize with horror that “it is the language of schizophrenia” (Deleuze 1990, 84). This language, one of depth, is countered with the language of surface that Carroll uses to construct his neat examples of nonsense. The depth of the language is determined by “the schizophrenic problem of suffering, of death, and of life” (ibid., 83) ungraspable for Carroll, but available to Artaud as he speaks of himself: “I am a man who has suffered much from the mind, and as such I have the right to speak” (Artaud 1976a, 36). It is not surprising then that Artaud treats Carroll as an “affected little girl, protected from all deep problems” (aiming, perhaps, at Carroll’s picturing of Alice), whereas his own writing is informed by suffering and, thus, an example of “absolute depth in literature” (1990, 93); as Deleuze writes, “we might have thought to be still among little girls and children, but we are already in an irreversible madness” (ibid., 82). The reference to Carroll in general and to Alice in particular discussed here gains further relevance to the current chapter in the following section, in which I provide an analysis of space and time in My Idea of Fun, which is paralleled with Carrollian space. Moreover, the time-space model in Sylvie and Bruno appears to correspond to that in My Idea of Fun more than the model in Alice in Wonderland. Artaud’s statement raises a crucial issue of having the right to speak, which is also important for this study. The interrelation of fiction with madness or mental illness and with life writing also concern the right to speak issue, among other things, and may be
paralleled with the discussion of the authenticity and fictional nature of the writing self, constructed in the process of narration.

How does the language of depth appear? In the schizophrenic situation, Deleuze explains, the surface splits open, thus leaving no frontier between the surface and depth and, thus, no need for the differentiation at all (“...the entire body is no longer anything but depth” [ibid., 87]). With the language of depth, Deleuze associates Artaud’s notion of the “body without organs”: if the language of depth is the “language without articulation” then the body without organs is the “disarticulation”, the process of doing away with the organism. The organism is a strong metaphor for Artaud and Deleuze. “The body is the body, it is alone, [...] the body is never an organism, organisms are the enemies of bodies” (1977, 38), writes Artaud, and Deleuze echoes this claiming that, although their model is called the body without organs, “the organs are not its enemies. The enemy is the organism. The BwO is opposed not to the organs but to that organization of the organs called the organism” (1987, 158). Deleuze writes of the organism as one of the strata that binds a person and makes him or her “organized”: “you will be an organism, you will articulate your body—otherwise you’re just depraved. You will be signifier and signified, interpreter and interpreted—otherwise you’re just a deviant” (ibid., 159; emphasis added). To the idea of proper organization Deleuze poses his theory of rhizomatic structure. A rhizome is a territory of fluid identity and multiple random connections, a dynamic structure with no clear-cut boundaries as opposed to a hierarchical organization focused on categorizing. Deleuze’s rhizome, as well as a body without organs, is made of plateaus. Deleuze’s and Guattari’s manner of writing in A Thousand Plateaus is their own example of how a rhizomatic structure is given life: they explain a plateau as “any multiplicity connected to other multiplicities by superficial underground stems in such a way as to form or extend a rhizome. [...] Each plateau can be read starting anywhere and can be related to any other plateau” (1987, 21-22). The structure “is given a life” since Deleuze and Guattari emphasize the “making of” or “finding” a body without organs, thus highlighting that it is not a pre-given or inherent model of being. The idea of disarticulating can, thus, be understood as dismantling, i.e., the dismantling of the structures that prevent one from being open to that multiplicity of connections, presupposed by a rhizome. Deleuze and Guattari make a significant remark concerning the dismantling: it does not imply destruction or “destratifying” or “emptying” oneself of one’s organs (ibid., 161), but always refers to the dismantling of the organization and setting it against itself. In a sense, this discussion is reminiscent of Heidegger’s critique of Husserl’s phenomenological reductions. Paying attention to the non-transparency of an individual subject, Heidegger implies that a total “bracketing of the factual world in phenomenology must be a crucial mistake” as the world presents “the context in which we encounter beings and ourselves” and this encounter “determines what they are for our understanding” (Frede 1993, 56). Deleuze says that the body without organs is “what remains when
you take everything away” (1987, 151), that is, what remains when the organism is dismantled. The idea of the multitude of connections between plateaus within and outside of the body without organs and its liberation from the “organized transcendences” (ibid., 159) hardly coincides with the phenomenological idea of pure essences. In order to turn the organism and all the strata against their own systems and challenge the dominant structures, the body without organs still needs to retain its organs as their total annihilation would resist the making of connections and the challenging in general.

Thus, the metaphor of schizophrenia, according to Deleuze, is concerned with language. Through language, it is further concerned with the idea of the body without organs and the resistance that this carries with itself. Interestingly, Jacques-Alain Miller, commenting on Lacan’s idea of the schizophrenic, writes about the “infernal irony of the schizophrenic”, which is his weapon against any social relation: quoting Lacan’s article in French, Miller defines the schizophrenic as “the subject who specifies himself or herself by not being caught up in any discourse, in any social link”, since there is no need for the schizophrenic to defend him- or herself from the real by the language of the symbolic (2002, n.p.). In this sense, one of the main features of the metaphor becomes its emphasis on the questions of the forms of social control, power and social organization. Needless to say, Deleuze and Guattari are not the only theorists who have used schizophrenia as a metaphor: one well-known intellectual event played an important part in influencing its ever-growing use—the 1975 “Schizo Culture” conference at Columbia University. Its contents were published as a separate book by Semiotext(e) and the editors include major contributions from Deleuze, Foucault, Lyotard, David Cooper, William S. Burroughs, etc. The contributions deal with the notions of total social and ideological control, the diffused nature of hegemony and continuous surveillance. In his contribution (The Limits of Control), Burroughs recognizes various forms of control and refers to words as the “principal instruments of control” along with the technocratic control apparatus (1978, 38). In an interview in Schizo-Culture Burroughs explains the idea of the schizo-culture and the connection of schizophrenia to the discussion of social control: the term does not refer to clinical schizophrenia but to the fact that “some of the old lines are breaking down” and that “this is a healthy sign”. The idea of schizophrenia as a healthy sign is characteristic of the metaphoric understanding of the term and is in line with Deleuze’s thinking: schizophrenia opposes the hierarchy (unlike carnival), recognizes the power and questions the pre-given nature of constructions. In the preface to Anti-Oedipus Foucault praises Deleuze and Guattari’s book for opposing its major strategic enemy, that is, fascism, “the fascism in us all, in our heads and in our everyday behaviour, the fascism that causes us to love power, to desire the very thing that dominates and exploits us” (1983, 13). By fascism in our heads Foucault implies the internalized form of control that is overcome by schizophrenia, an
overcoming that causes one not to love the power but to prefer “difference over uniformity, flows over unities, mobile arrangements over systems” (ibid.).

The revolutionary potential of schizophrenia is concerned with deterritorialization, according to Deleuze. Schizophrenia as a deterritorialization is differentiated from schizophrenia as a clinical diagnosis which simultaneously affects the corresponding narratives and defines their goals and principal aspects, that is, postmodern schizophrenic narratives and fictional-autobiographical narratives of mental illness. These narratives can be said to have one aspect of schizophrenia in common—Artaud’s idea of seeing “certain intolerable truths”. Louis Sass provides an analysis of this in his *Madness and Modernism*. He writes that “often enough schizophrenics feel not farther from but closer to truth and illumination” but at the same time “schizophrenics can, in fact, be persons of considerable intelligence and mental complexity” and possess an “enhanced ability to perceive nonobvious similarities, unconventionality” (Sass 1994, 6-7, 126). This applies well to Henry’s story concerning his spiritual revelation and the art discourse that in part triggers his idea of the revelation. It also applies to Deleuze’s metaphorical understanding of a schizophrenic. Sass points to the “pathological freedom of schizophrenic thinking” (ibid., 127), which takes us again to the idea of the body without organs. Deleuze explains that when he calls schizophrenia a characteristic malady of the era he does not mean that life just drives people mad. He refers, instead, to the capitalist mode of production and demonstrates how it tries to repress the schizophrenic flows it itself has produced but fails to reach them as they “act as capitalism’s limit” (1983, 34). A metaphorically schizophrenic person wanders about and “scrambles all the codes” (ibid., 35), thus being a part of deterritorialization, which also shatters the traditional understanding of one’s identity as a unified and well-defined object. The absolute utopian form of deterritorialization is the demolition of formal institutions: in a sense, it is reminiscent of the idea of absolute transgression opposed to the idea of carnival (discussed in Chapter 2) that removes the hierarchy only for the time being and, as soon as the carnival ends, the hegemony is enforced with a vengeance. *The Sweet Smell of Psychosis* provides a good example of the difference between schizophrenia and carnival: in my reading of the novella in subsection 4.1.2, Richard’s alien perspective (alien with regard to the perspective of his colleagues) helps to reveal the actual nature of the carnival as the event that helps to sustain hegemony.

This scrambling of codes served for Deleuze and Guattari as the explanation of the faults of psychoanalysis in its treatment of schizophrenics (at least in a metaphorical sense). “Freud doesn’t like schizophrenics”, they write, “he doesn’t like their resistance to being oedipalized” (ibid., 23). They see psychoanalysis as a form of terrorism as it tries to limit all sorts of desires to one—that of the Oedipal desire—and, in this sense, serves as a capitalist instrument of control. Schizophrenia is seen as “the process of the production of desire” (ibid., 24), which once again explains its revolutionary nature and freedom from formal structures.
For Deleuze, the schizophrenic is not disconnected from the world (“He does not speak of another world, he is not from another world” [ibid., 131]) but rather able to acknowledge the deep forms of lived experience unavailable to others. Thus, Deleuze and Guattari favour the schizophrenic model over a neurotic one (“A schizophrenic out for a walk is a better model than a neurotic lying on the analyst’s couch. A breath of fresh air, a relationship with the outside world” [ibid., 2]) and, moreover, schizophrenic experience to paranoia. The latter differentiation is central to how capitalist society operates in the context of Deleuze’s theory. Holland writes that “paranoia represents what is archaic in capitalism, […] whereas schizophrenia designates capitalism’s positive potential: freedom, ingenuity, permanent revolution” (2002, 3). Elsewhere, Holland clearly states what “archaic in capitalism” means; in paranoia everything is coded, he writes, and everything means the same thing—“whatever the terrifying god or despot says it means” (1998, 66). Clearly, then, a schizophrenic model has no room for a despot serving as the primary source of codes or meanings. However, the clinical picture of schizophrenia may often contain elements of paranoia, as Sass notes: “Schizophrenic individuals often believe or sense that they are being watched” and “devices like videocameras are often felt to be everywhere and nowhere, existing only as unspecifiable, almost atmospheric presences” (1994, 237; 287). Such a realization of being under surveillance is common in both life writing on schizophrenia and postmodern narratives (see my discussion of The Sweet Smell of Psychosis in 4.1.2).

When Artaud speaks about the artists “suicided by society” from his own position of suffering, he wants to show how the scrambling of the codes is resisted by society and how it strikes back (in terms of Van Gogh, for example). Defining an “authentic madman”, Artaud writes that “it is a man who preferred to become mad” (Artaud 1976d, 485) and Deleuze claims that it is a man who in his overcoming barriers and codes “has simply ceased being afraid of becoming mad” (1983, 131). The idea of “becoming” is similar to Deleuze’s idea of “making” oneself the body without organs. This idea is also productive for the discussion of My Idea of Fun. The nature of Ian’s madness is, once again, undecidable: it is not unequivocal whether Ian is a marionette or the one in control. Has he become “mad” by being affected by external forces, or has he been blissfully “becoming mad” (even though attributing the power to the external forces)?—the possibility of a definite answer is unlikely.

Artaud and Deleuze highlight the idea characteristic of metaphoric schizophrenia—that of choosing to become mad and, thus, liberated, free to make one’s own code and connections. Clinical schizophrenia, however, can hardly be called a matter of free choice. Deleuze refers to his metaphoric model in terms of what Laing says about madness: “Madness need not be all breakdown. It may also be breakthrough. It is potential liberation and renewal” (1967, 109). However, those criticizing Deleuze’s approach overlook three important issues. First, Deleuze speaks about a metaphorical breakthrough. Second, both Deleuze and Guattari do
not support all of the ideas of anti-psychiatry (for example, in an interview Guattari discusses the complicated story of Mary Barnes who spent years in Kingsley Hall with Laing and other anti-psychiatrists and “took quite literally Laing’s recommendation of a ‘journey’ into madness” as well as the challenges of community mental care in general [1984b]). Third, critics often forget to continue Laing’s quote about madness and breakthrough: “as well as enslavement and existential death” (1967, 110). The metaphorical model certainly speaks of the opposite of enslavement, as Sass writes, “as if the schizophrenic could be viewed as some kind of postmodernist hero, […] generally able to enjoy a state of unanchoredness and isolation” (1994, 352). A clinical schizophrenic can hardly call his condition celebratory or want to reinhabit it: one classic example is Sechehaye’s schizophrenia patient Renee (Autobiography of a Schizophrenic Girl [1951]) who rejoiced at returning to her everyday routine and “looked back on the Land of Madness” as a place “of utter misery and dereliction” (Sass 1994, 353); another example is Lori Schiller who was happy to find a suitable medicine and fight back the voices (although she notes that at some point she missed them).

Certainly, there are other kinds of criticisms of Deleuze and Guattari’s model, particularly those of their romanticizing the image of a schizophrenic and neglecting the deep suffering of real patients (e.g. Glass 1993). However, it is important to note that Deleuze and Guattari unquestionably differentiate between their metaphoric usage of the diagnosis and its clinical application. Guattari worked in a French psychiatric clinic from the 1950s until his death in 1992 and, as already mentioned, was suspicious of anti-psychiatric idealizations of mental illness.

In general, there is no single way of judging Deleuze and Guattari’s metaphor. Yes, the metaphoric use of schizophrenia might contribute to the general confusion about the condition, but it can also add to the idea of the social constructedness of mental illness. Deleuze’s use of Laing’s “not a breakdown but a breakthrough” model can be used to criticize society’s overall attitude towards the mentally ill, the stigmatization they face, and the negligence of the narratives they produce. Even the metaphors of Anti-Oedipus point at the instances of suffering of a mentally ill person within the social norms, conventions and assumptions of a given society. Thus, the suffering of a person with schizophrenia depends, certainly among other causes, on the social constructions that they find themselves in, whereas a metaphorical schizophrenic is one who questions the codes of those constructions and through his or her disarticulation finds him- or herself beyond the constructions. Bogue, as one of the advocates of Deleuze and Guattari’s work, emphasizes that, although “many assumed that Deleuze and Guattari were summoning everyone to ‘go schizo’’, they actually “stressed in Anti-Oedipus that the ‘schizo’ they saw as a promising possibility was not the same as the ‘schizo’ in the psychiatric hospital” (2007, 138). However, they both saw that schizophrenic ability of an alternative vision, of a sophisticated mode of thought and translated it
into revolutionary potential in the socio-political context. Moreover, the art discourse confirms the fact that madness (read transgression, difference, mental illness) and genius can be linked: it can lead to a breakthrough, but it might lead to enslavement and utter misery, as well, or even at the same time. It is noteworthy that Mitchell and Snyder, when writing about the “materiality of metaphor”, use the lameness of Oedipus as a reason for his mastery in solving the Sphinx’s riddles: he succeeded because he had the experience of “inhabiting an alien body” (2001, 61). Thus, on the one hand, Oedipus’s disability as well as, for example, Henry’s schizophrenia proves to be the source of their insights while, on the other hand, their disabilities become saturated with multiple “symbolic associations” (ibid.). It is important that while Oedipus’s lameness becomes a metaphor for a person’s inability to escape their fate, Christopher and Oskar, whose stories are analysed in Chapter 7, also become, in some interpretations, metaphors, and their “difference” is claimed to be what Mitchell and Snyder call “a deterministic vehicle of characterization” (ibid., 50).

Jameson’s model of a metaphorical schizophrenic differs significantly from that of Deleuze and Guattari. In general, Jameson does not cherish schizophrenic experience as revolutionary, quite the opposite: while Deleuze and Guattari write about the undermining of the capitalist order and the difference of the schizophrenic and capitalist flows, Jameson argues that schizophrenia is part of the capitalist flow, that is, of the logic of capitalism. In his essay, Jameson highlights the lack of personal identity in a schizophrenic, “since our feeling of identity depends on our sense of the persistence of the ‘I’ and the ‘me’ over time” (1983, 119). Jameson utilizes Lacan’s theory of schizophrenia when explaining his idea of schizophrenic time. For Lacan the experience of temporality is an effect of language, but the schizophrenic does not possess language in the form of sentences that have connection to the past, present and future (Sarup 1988, 147). Therefore, the schizophrenic lacks the ability to experience continuity and thus lives in a perpetual present moment, determined by a rapid succession of events, images and information that disorients the subject. However, even though the past and the future are not articulated, the schizophrenic has “a more intense experience of any given present” (ibid). This idea is crucial to my interpretation of Self’s My Idea of Fun, which explains both the fragmented temporality of Ian’s experiences and his ability to attain eidetic vision.

Jameson is particularly critical of the postmodern habit of consuming anything and reproducing it: the postmodern lack of critical distance and revolutionary potential is induced by its destroying the hierarchy of high and mass art and by incorporating the elements of the logic of capitalist mass culture: “Modernism was oppositional art” but “postmodernism is closely related” to late capitalism as it “replicates” “reproduces” and “reinforces the logic of consumer capitalism” (ibid., 125). A postmodern schizophrenic is also separated from history, since from the postmodern point of view all history is constructed and the nostalgia mode
depends not on the events of the historical past, but on the cultural representations of it (Jameson 1991).

Jameson’s treatment of schizophrenia as part of the capitalist order and denial of its ability to resist the logic of capitalism (although he prefers to leave this question open at the end of his essay) is clearly at odds with Deleuze’s view. He and Guattari write that “it would be a serious error to consider the capitalist flows and the schizophrenic flows as identical, under the general theme of a decoding of the flows of desire”; if it was so, why would society “confine its madmen and madwomen instead of seeing in them its own heroes and heroines” (1983, 245; original emphasis). It could be argued, however, that they are not made heroes in Jameson’s model because his concept of schizophrenia (as part of the logic) emphasizes those aspects of capitalist logic of production that rather discredit this logic than cherish it. The variety of approaches add to the multiplicity of meanings that the notion of schizophrenia may carry (even solely within the metaphorical context), though it is likely that both Jameson and Deleuze imply the same “enemy” represented by social constructions, norms, and the capitalist power discourse, yet use different aspects of the notion.

Baudrillard’s model of schizophrenia is even more critical in its attitude to capitalist production, as the philosopher sees a schizophrenic as an embodiment of his theory of disappearance of the subject and total exposure of the surfaces without depth (cf. Deleuze’s body without organs). The idea that schizophrenia means something other than itself is implicitly criticized in Chapter 5, in reference to Patrick’s non-metaphorical treatment of schizophrenia, and in Chapter 7 in reference to Christopher and Oskar. However, even though Baudrillard intentionally uses the term schizophrenia, he does it with no reference to a specific clinical application of the diagnosis. Yet, the use is not incidental and Baudrillard differentiates it from his metaphoric understanding of hysteria or paranoia: hysteria is a “theatrical conversion of the body”, paranoia is a “pathological” organization of a “rigid” world, but “we are now in a new form of schizophrenia, […] a state of terror, […] too great a proximity everything” that penetrates “with no resistance” (2002, 153). Baudrillard speaks of the ecstasy of communication that does not imply having any secret any more, of the overexposure when “all becomes transparence and immediate visibility”, always available and readable (ibid., 151). This overexposure is not a celebrated experience for Baudrillard, it is an ultimate confusion and “the whole surrounding universe become a control screen” (ibid., 146).

In discussing schizophrenia Baudrillard pulls his favourite trick and writes: “In a certain way all this still exists, and yet in other aspects it is all disappearing” (ibid., 145). Thus, Baudrillard’s idea of the availability of information and constant communication acquires new meaning: if everything becomes visible and immediately graspable, how does it affect the notion of one’s transparent or non-transparent self? If availability is coupled with disappearance, does it mean that
Baudrillard’s theory complicates and worsens the illusion of the possibility of immediate understanding and graspable otherness? If everything is surface, transparency and availability, there is no place left for hiddenness. If Baudrillard’s theory of simulacra and simulation is applied, is it possible that transparency and availability are simulacra that disguise that there is no otherness beneath, or rather, as simulacra proper, they pretend to disguise that there is no otherness but actually disguise the fact that immediate availability and the total transparency of the other is an illusion that is enforced by capitalist logic and the ecstasy of communication. In other words, the disappearance coupled with the transparency of communication, as Baudrillard presents the idea, serves as a cover story for the ignorance and the unwillingness to consider the other’s alterity.

Yet another aspect of Baudrillard’s ecstasy of communication is the multiplicity of voices that create pressure “from all who want to make themselves heard” (ibid., 152). The availability of quick communication has produced infinite amounts of information that confuses Baudrillardian schizophrenic self: “Speech is free perhaps, but I am less free than before: I no longer succeed in knowing what I want, the space is so saturated” (ibid.). Baudrillard’s confusion is in a way connected to what may be called a Heideggerian nightmare; Baudrillard writes: “I pick up my telephone and it’s all there” (ibid.) as if echoing Heidegger’s fear of the eradication of time and space, of the difference between what is near and what is far away. The main aspect of such a fear is that if there is nothing that can be called distant anymore (due to the technology and the availability of information), then there is nothing pronouncedly near as well. Like Baudrillard, Heidegger speaks about the loss of ability to locate oneself in that saturated space where one does not know what he or she wants or finds, or whose voices he or she hears. Heidegger writes that when “everything is equally far and equally near, […] everything gets lumped into uniform distancelessness”, but, crucially, “despite all conquest of distances the nearness of things remains absent” (1971, 164). Similarly to Baudrillard’s simulacra of transparency that hardly makes oneself or the other actually “grasped”, distancelessness does not presuppose nearness.

Thus, in a sense, hearing voices, as is common in clinical schizophrenia, can also be applied metaphorically as one aspect of the postmodern “ecstasy of communication”. The conditions for hearing voices clinically and metaphorically are certainly different, yet some common aspects of both experiences include confusion, terror and perplexity in the face of clashing powers of all of those “who want to make themselves heard”. Hearing voices is part of Henry’s diagnosis of schizophrenia, though scholars claim that the symptom is characteristic not only of schizophrenia: some argue that about 15% of the general public (not registered as mentally ill) report hearing voices (Beavan et al. 2011), others write that it may also be a symptom of a non-psychotic disorder (Sass et al. 2013). The former study is echoed by Patrick in the memoir: “As many as one in ten people hear voices not dissimilar from those Henry heard urging him on his barefoot journeys through the
countryside. People fear that if they are too forthcoming about voices or exotic fears and suspicions, they will be seen as mad” (Cockburn 2011, 123). The latter study shows that, although depersonalization disorder is outside the schizophrenia spectrum, it is quite common that depersonalized patients perceive thoughts as foreign or experience them as “shouted” at them in an unpleasant voice (ibid., 434). Voice hearing during worship and other religious practices is also well documented (e.g. Woods 2013) and it has been argued that people of different cultures experience hearing voices in different ways. For example, Luhrmann (2011) argues that hallucinations are shaped by culture and learning. I would add that attitudes toward hearing voices vary not only across cultures but also within cultures. In an interview, Henry notes that “you can say you hear the voice of God and be considered sane, but if you say you hear the voices of dogs or trees they question your mental health” (Mitchison 2011, n.p.). Moreover, Henry also perceived his illness as a spiritual awakening (“I thought there was another side to the world I hadn’t seen before” [Cockburn 2011, 48]) and Nelson writes that the sense of mystical revelation experienced in psychosis stems from the perception of self and world as two undifferentiated entities (2010). Jameson names such a non-distinction among the characteristic features of postmodern metaphoric schizophrenia (1991).

Considerable research has been carried out into the nature of the sources of the voices that people with schizophrenia hear, but the mechanisms still remain a mystery in many ways. Lakeman writes that the mechanics of voice hearing can be certainly traced to certain biochemical factors (excess of dopamine), but argues that the biological predisposition may be “secondary to a bias towards misattributing internal events to external sources” (2001, 526). Thus, elements of the thought process and the monitoring of inner speech may explain some aspects of schizophrenic voice hearing: if there is a malfunction of speech regulation then thought may be perceived as speech and the illusion of an unfamiliar ‘voice’ in the head created (e.g. Kreinin 2013). Echoing the scholars’ reasoning, Patrick mentions that “people with schizophrenia really do hear voices, but “such speech is made up of verbalized but unexpressed thoughts, imaginary conversations and arguments, bits of dialogue which are never spoken” (Cockburn 2011, 122). Patrick knows that Henry “was drawn to run away by the voices of trees and bushes” and he supposes that what the voices told him “reflected his own rebellious spirit and hatred for being confined” (ibid., 180). It is not possible, then, to see these voices as illogical or meaningless, just as when the narratives of people with schizophrenia are neglected: the voices mentioned in the stories give the reader insight the narrator’s fears, desires and overall distress. While feelings of ‘illumination’ and being ‘closer to truth’ (Sass 1994) are characteristic of people with schizophrenia, Henry’s trust in his own experiences and his first-hand testimony make his narrative authentic and important for our comprehending of the nature of voices. It is not that his experiences are all delusions: they remain real because they are personal and reflect his emotions and state of mind.
Lakeman notes that some people who hear voices adapt to hearing the voices, while others experience them to be “nightmarish and debilitating” irrespective of whether or not they are diagnosed with a mental illness (2001, 524). For Henry, most of the voices were authoritative and issued commands, and he obeyed their orders. However, some voices were threatening (those that appeared during his “polka-dot days” (“I get this feeling of inner torment that I am a sinner and that I will die or be physically tortured” [Cockburn 2011, 187]), while others were comforting (“There is a tree I sit under in the garden in Lewisham which speaks to me and gives me hope” [ibid., 222]). Thus, voices served both as a means of protection and comfort for Henry, and as a means of threatening and shaming himself, for example for feeling guilty for staying in hospital while his fellow students continue their studies and succeed in their personal lives. In this sense, there is little that is irrational about the content of what the voices are saying—guilt is a common emotion, as are the need for comfort and guidance, even for orders. A certain paradox may be found in how Henry seeks freedom in his desire to see another side of the world, yet he obediently follows the orders of the voices, often perceiving the authority of the voices as more comforting than threatening. Junginger confirms that obeying the authority and the power of the voice is not uncommon in schizophrenic patients and that patients who experience command hallucinations are themselves at risk from their behaviour (1995). This describes Henry’s regular escapes from the asylums: the only person at risk during his escapades is himself, as he could freeze and ultimately die. Another important aspect of Henry’s schizophrenic voices is that the boundary between his hearing and feeling the voices was blurred. He often uses the word feel instead of hear, which may indicate the peculiar nature of the perceived voices: “I felt brambles, trees, and wild animals all urging me on” (2011, 31). Renee, in Autobiography of a Schizophrenic Girl, also expresses a similar experience, saying that she “heard” voices “without hearing them” and “recognized that they arose within” her (Sechehaye 1970, 59).

Against this theoretical backdrop of voice hearing in clinical schizophrenia at least one important feature common to both the metaphorical and clinical pictures clearly emerges—that of authority and control. It is not important whether one takes Deleuze’s or Jameson’s position concerning the terms. The important thing is that the confusion, the conditioning and the constructedness of one’s actions and desires by means of sociocultural constructions in the metaphorical use of the term schizophrenia correspond to the authoritative role of the threatening voices in clinical schizophrenia. While Deleuze and Guattari point to the schizophrenic as liberated from those bonds, Jameson underlines their dominating role in a schizophrenic’s self-determination. Baudrillard is critical of the metaphoric voices, too: he writes of the terror of the voices experienced when picking up the phone or turning on the radio—the voices order and seem to control how one locates oneself (a sense of location being essential in order to claim identity).
With regard to the outside imposition of authority and control, the question of being under control, that is, being affected and even addicted to such a control, should be discussed. In his well-known book on Self’s oeuvre, Hayes uses the concept of addiction while speaking about stories and provides a thorough analysis of drug addiction. He writes about drugs “as another commodity” for “convenient consumption” (Hayes 2007, 109). Such an approach is well justified, as in several interviews Self refers to his overcoming addiction during his juvenile years. He says that the reason for his having written “so much about decadence and drugs is because that is the way [he has] lived” (Taylor 2007). Yet both My Idea of Fun and The Sweet Smell of Psychosis move beyond the drug addiction plot to point to the more general idea of addiction involving the loss of control and agency and, therefore, autonomy. Addiction thus becomes a broad notion encompassing the social sphere and one’s dependency on the others’ opinion, authority and supervision as well as on the cultural sphere and reproduction of the same superficial models of behaviour adopted from the authorities that be. Moreover, scholars write that hallucinations are an integral part of postmodern fiction and can appear “without the accompanying use of psychotropic substances”; some authors ironically challenge the notion of the “correct altered state of consciousness” and wonder “who decides what is real and unreal?” (Baker et al. 2010, 172).

In the preface to Anti-Oedipus Foucault writes, apologizing to the authors, that this is “a book of ethics, the first book of ethics to be written in France in quite a long time” (1983, 13). It may be said to be a principal challenge to the definition of morals or ethics concerned with the essential humanism discussed above. Foucault certainly uses the term ethics on purpose—this is a humane book in that it stands in opposition to fascism as Foucault understands it—the fascism of one’s imposing power and the other’s internalizing it, of demanding to conform to the idea of an “essential” human nature, to construct a well-defined identity and express it by means of reason. If the definition of ethics was inspired by this reasoning, Foucault can hardly be called “another species” and it would be ridiculous to insist on calling Derrida’s philosophy “obscurantisme terroriste” (a “terrorism of obscurantism”) and to dub Deleuze and Guattari’s theory an arrogant utopia. Moreover, it is unfair to accuse Derrida of coining new words and “obscuring” the language and the field of philosophy in general as well as to accuse Deleuze of employing the already existing words in a metaphorical sense. As long as we use language as means of communicating experience, or as long as the other of the language or of philosophy is not found (the task of deconstruction, according to Derrida) there is always ambiguity and a need for a proper definition of terms or new ones to be coined.

The main objective of the following sections dealing with Self’s novel and novella is to demonstrate and justify the possibilities of two potential ways of reading Self’s texts. First, they can be read as postmodern narratives of addiction and surveillance (involving the metaphorical idea of schizophrenia). Second, they
can be conceived as postmodern illness narratives where the cause of the illness is not known for certain and where the narrator may have been mad from the very outset or affected by social circumstances and surroundings later in life. Neither of these readings can, however, be dealt with in isolation, as they are evidently interrelated: as Frosh writes of the postmodernist critique, “individuality is so permeated by sociality that there is no way of resisting on an individual level at all” (1991, 22).

4.1.1 *My Idea of Fun*: Suppression of Outrage

*My Idea of Fun* is in many ways a novel of transgression. One of the most obvious manifestations of its transgressivity is the way it was received by critics and reviewers upon its publication in 1993. Among the most explicit negative claims is, on the one hand, Self’s use of a sophisticated vocabulary. As Julian Evans complains, “Self leaves no adjective unsaid, no metaphor unturned, […] no synonym unexplored, no tiring digression unpursued” (1993, 12). On the other hand, Self’s choice of topics and the impressive opening of the novel, where the main character thinks about tearing the head off a person on the Tube as his best idea of fun, led one critic from the *Evening Standard* to call the novel “the most loathsome book [he has] ever read” (Barnes 1994, n.p.). However, Martin Amis praised it as the novel of “a very cruel writer—thrillingly heartless, terrifyingly brainy” (Heller 1993, n.p.). The word “cruel” here acquires a positive connotation certainly in Amis’s thinking, but also in the context of postmodern writing in general.

Self is a writer whose shocking images may certainly astonish readers but the astonishment they cause is of an ambivalent nature. By shocking, it brings home a variety of socially and culturally important issues. Self’s being an “Oxford-educated” metropolitan, as Rennison puts it, may be a reason for the multilayered nature of his novels. *My Idea of Fun* can be called sophisticated not only due to Self’s word choice but also due to his choice of epigraphs from Proust or Wittgenstein, the intertextual references to Thomas de Quincey and Freud, and his explicit critique of the psychiatric discourse. In *Junk Mail*, a 1995 collection of Self’s counter-culture essays and articles published in different periodicals, he writes that *My Idea of Fun* represents “an attempt to examine what is happening to the belief systems of individuals in an age when our relentless practice of applied psychology has kicked the legs out from under our social ethic” (1995, 221). Yet in a recent essay in *The Guardian* Self writes that “our era is replete with the mental illnesses occasioned by technologies” and he thinks that “our obsession with viewing violent and horrific imagery is some sort of collective post-traumatic stress disorder” (2016).

*My Idea of Fun* lucidly demonstrates what happens to the “belief systems” of Ian, the protagonist, and how he unconsciously becomes the one who produces that “violent and horrific imagery”. The novel consists of two books, one written in the
first person and the second in the third person, signalling the transformation of Ian and his gradual loss of autonomy. The prologue represents a confessional speech of a person who feels lost and terrified and directly addresses the reader. Ian says that he does not need to justify himself, but only wants to be understood and he “cries for understanding” as “he has none of his own” (13; emphasis added). Self’s intention to make the reader doubt and contemplate different variants is evident already in the prologue where Ian is portrayed as an unreliable narrator. Ian challenges the reader by saying; “There’s nothing more comforting for you than saying, ‘This is either this, or it’s that.’ You do it all the time, it’s as primary as breathing for you”, and he adds that he provides the reader “with another opportunity to exercise [his] fine discrimination” (13-14). The reader is thus unable to make any definite claims about Ian’s situation, all the more so because Ian does not understand the situation himself. However, he at once introduces the reader to those who, as he thinks, have brought him to such a state of uncertainty: The Fat Controller, Dr Gyggle, a psychiatrist, and Ian’s mother.

Ian comes across The Fat Controller at his mother’s caravan while still at school. From this moment on, Ian will always feel his presence, though in different disguises: first as Mr. Broadhurst, a marketeer who did some business with Ian’s father (whom Ian has never known), then, later, when Ian took up business studies at university and became a marketing assistant himself, Samuel Northcliffe, an international financier appears. Ian becomes more suspicious when the omnipresence of The Fat Controller is further dramatized by his appearance in a book that Ian reads. The book is De Quincey’s *Confessions of an English Opium-Eater* (1821) and the text appears to be slightly modified to suit Self’s purposes. Ian opens the book and reads the passage where the writer is awakened from his narcotic slumbers by a knocking at his cottage door. The text reads that “there were a ‘sort of demon’ downstairs […] he was excessively fat and had a sinister and aggressive impression. Altho’ his physiognomy was European, he was clad in the turban and loose trousers of a Malay” (153). The narrator claims he is not sure whether the man’s complex look and a great need of opium is a mere chance or “a deep expression of [his] own pain” (154). Neither is Ian sure, but the man’s strange slang and odd habits make him convinced that books have become The Fat Controller’s alternative method of surveilling him. Self’s choice of De Quincey’s book is not accidental. Chapter 10 of the novel is introduced by the epigraph from de Quincey’s essay “The English Mail Coach”. In it, De Quincey speculates on the experiences of a dreamer who finds “some horrid alien nature” “housed within himself” (qtd. in Self 2011, 345). De Quincey writes about the challenged autonomy and “sanctuary” of oneself that is violated by several “alien natures”—an idea that is echoed in *My Idea of Fun*. Moreover, in the novel Self develops the addiction plot as delineated in *Confessions*.

Ian’s own mental condition starts worrying him even more when, in another book he takes off the shelf, he reads about Newton who linked his own psychotic
breakdown to his meeting a beast of a man called Mr. Broadhurst (150). This is the point when Ian agrees to his teacher’s suggestion of meeting the student counsellor, psychiatrist Dr. Gyggle, which is also the point when the illness narrative perspective starts to evolve (the chapter can be read in two ways, neither superior to the other, but this study mainly focuses on the reading that regards difference). Ian realizes that Mr. Broadhurst and Samuel Northcliffe appear to be the same person, though he cannot prove it. This makes him wonder whether he has become a “victim of an extended delusion, which was perhaps the function of an overheated adolescence” (149) and whether his personality suffers from the lack of a father and the “chronic lack of a proper role model” (150). In Book One, Gyggle confirms his suspicion by calling Ian’s condition “a complex example of hysteria” (177) or refers to it in another context as “a borderline personality, with pronounced schizoid tendencies” (168). Gyggle hints at Ian’s lack of a father figure and asks whether Ian understands who “this man, Mr. Broadhurst, who [he] transformed into [his] ‘Fat Controller’, [his] personified id” (177) really is. Ian cannot say that he entirely understands this but Gyggle apparently hints at considering The Fat Controller’s personality the Big Other for Ian. By taking the place of Ian’s missing father, he thus appropriates all of the phallic functions that are ascribed to the Big Other, a term that for Lacan “designates radical alterity, an other-ness which transcends the illusory otherness of the imaginary because it cannot be assimilated through identification” (Evans 2006, 136). It is remarkable that The Fat Controller strongly insists that Ian should always think of his name as written in capital letters. According to Lacan’s theory, the Big Other can be found in the symbolic order together with law and language: language is beyond one’s control as it comes from the outside and “the Other must first of all be considered a locus, the locus in which speech is constituted”, writes Lacan (1993, 274). The symbolic order is the place for the Name of the Father, which points out the role of father as imposer of the law. Thus, being in need of a supervising phallic figure, Ian chooses to create one for himself: in Lacanian theory, the Name of the Father is a “fundamental signifier” that guarantees the “normal” inclusion of the subject into the symbolic order; however, if such a signifier is “foreclosed”, the subject is led to psychosis (Evans 2006, 122), a significant issue in the context of Ian’s story. Ian’s act may be regarded as a metaphor of Ian’s being under control but having no possibility and no desire to escape it as the Big Other should be obediently followed. Following Gyggle’s hints, Ian attempts to convince himself that he has not actually encountered a mage and was not his “plaything”, but was “only a seriously neurotic person in need of help” (150).

However, the end of the novel shatters Ian’s illusion of The Fat Controller’s non-existence, at least for Ian himself, though not for the reader. Just when Ian begins to think the Gyggle’s words about The Fat Controller’s non-existence could be true, he meets his persecutor, who eventually tells him: “Hieronymus Gyggle is a trusted confrere of mine and I was hardly likely to leave you unsupervised while I was
away” (320). The role of the psychiatrist is put in question here: Self does not give the reader any answer as to whether Gyggle’s co-partnership with The Fat Controller is a metaphor of psychiatric diagnoses being a means of social control, or whether it is a consequence of Ian’s paranoid disorder. The image of the psychiatrist as a “confreere” of a supervising power is a strong image, both in an illness narrative or a postmodern narrative of surveillance. There is a point in the novel where Ian feels that he is Gyggle’s “Anna O”, that he is interested in those patients’ cases that can facilitate his career. Moreover, the dream sleep that he prescribes Ian hardly helps him to combat the image of The Fat Controller.

The illness narrative plot acquires a new aspect when both Gyggle and The Fat Controller tell Ian that he is “chronically ill equipped in the self-control department” (323), thus trying to make Ian consider himself ill. Yet, according to them, he is ill not because of his imagining some non-existent Big Other figures but because of suppressing his own memories of crimes: “We didn’t want you to suffer the torment of your own behaviour, Ian, because you had no option. […] All your adult life you have been committing these little ‘outrages.’ It has been Samuel’s—and latterly my own—responsibility to cover things up, to clear up the mess” (322). The outrages they speak of are crimes that Ian has attributed to The Fat Controller: the woman who was killed with a poisoned umbrella when they went together to the theatre, or June, Ian’s former girlfriend, who was “sexually assaulted” (ibid.), as The Fat Controller puts it. Ian remembers a different version of the truth with The Fat Controller intruding on every occasion:

‘When I wish to kill—I kill.’ The voice was lubricious, polite but insistent. […] The woman in front—the woman who was to die—guffawed loudly at an on-stage incident, distracting me. When I looked down once more I saw, gleaming in the darkness, a long pin or needle that projected from the cane’s tip. […] What happened next was hazy. […] I thought I heard a definite mechanical ‘click’, but when the stage lights came up again, nothing had happened. The Fat Controller was sitting Ciceronian amongst the mob […].

‘The woman who insulted you, the woman sitting in front of us—’
‘The one who I said I was going to kill?’
‘Yes.’
‘Well, I have done so.’ He fell silent as if this was of little or no account.
‘But… but, I didn’t see anything. How did you do it?’
‘Curare.’ (103-104)

Ian admits that he has become a “Demiurge of Dissociation” (354), “an effectively divided personality”, though he cannot be sure what the truth is: “The events of my formerly fearful life were delightfully different from this perspective. It was I who had made all the running in our relationship, I who had persuaded him to initiate me into the darker arts” (351). Acknowledging the latter possibility, Ian, however,
hardly feels any remorse and holds himself “to be beyond all morality” (353) and pretends to hardly care: “The outrages had been good fun. [...] Why need I feel ashamed of my peccadilloes when wanton suffering is foisted on the world all the time” (354). While Ian realizes that he might have become one of the superior transgressive figures, he is still terrified since he does not actually have any control over the actions and is constantly monitored by other authoritative figures.

The change from the first person narration in the first book to the third person in the second book is noteworthy as it points to Ian’s loss of autonomy. His narration, confessional in the prologue, becomes more detached in the second half of the novel. Being able to successfully and wilfully suppress some of the memories, he appears to be missing some aspects of his own identity and therefore becomes more addicted to the controlling powers. If this is seen from the point of view of an illness narrative, the novel inherits much from postmodern fiction that “depathologises madness” as it points at the “inevitability of disintegration, fragmentation, and disorder” (Baker et al. 2010). The psychiatrist’s diagnosis is, thus, evidently challenged, and the source of Ian’s hallucinations and outrages cannot be clearly recognized. As a result, My Idea of Fun demonstrates the unreliability of labelling and classificatory diagnoses and value judgments as to norm and deviance. In addition, self-incoherence is in focus here, as the self is considered to be a construct rather than its classic form, a definite notion implying determinacy and integrity. In this sense, My Idea of Fun, when seen as an illness narrative, intermingles that narrative with its status as a postmodern novel of metaphoric surveillance. The postmodern novel implies such features as “fragmentation of linear or coherent narrative, unreliable narration, multiple and at times undifferentiated perspectives” as well as themes of “paranoia, conspiracy, and control, the individual’s position within powerful networks controlled by external agencies, and his/her experiences of real and imaginary” (ibid.), where the categories of the real and the imaginary cease to be differentiated.

Ian’s thoughts and actions are manipulated until the end of the novel, as he is addicted to the crimes and in part frightened of “what might be about to emerge” (355). The Fat Controller directs the above-mentioned controlling powers. The nickname is chosen by no mere chance, being a direct reference to character’s namesake in Wilbert Audrey’s Thomas the Tank Engine series of children’s stories. The Fat Controller is the director of the railway in the series, known for his ability to control that world. Self makes The Fat Controller a slightly more grotesque figure in attributing him with long archaic utterances—where Self’s talent of using sophisticated vocabulary turns out to be useful—and old-fashioned clothes that make him look, as some reviewers note, similar to a character in contemporary sitcoms (MacCabe 2010). However, the main features of ubiquity and omniscience also predominate his character in the novel. He introduces himself to Ian as follows: “I am The Fat Controller, [...] I control all the automata on the island of Britain, all those machines that bask in the dream that they have a soul. I am also the Great
White Spirit that resides in the fifth dimension, everything is connected to my fingertips – by wires” (89). Ian certainly feels his omnipresence: even when he vanishes for several years, Ian is sure he is not entirely rid of him: “He continued to dog me. He was a black penumbra in the corner of my visual field, [...] my inability to unbelieve in him hung on to me by the jaws” (177). It is also mentioned that “all over London The Fat Controller’s creatures, his confreres and familiars, his agents and accomplices, his licentiates and legates, were stirring” (263). The entire image of The Fat Controller is a product of postmodern culture, not only because his nature remains completely obscure, but also due to the grotesque features ascribed to him, such as his archaic nature, obesity, unapprehensiveness. Shabot, for example, describes grotesque philosophy as part of “a distinctly postmodern picture of reality”, as it is “opposed to any system of ontological thought that configures reality as unchangeable, static, well-ordered and highly defined, or that calls for homogeneity” and instead “embraces fluidity, change, heterogeneity and disorder” (2007, 58). Likewise, the grotesque subject is “unpresentable and unknowable”, it “exceeds all attempts at framing” (ibid.). With his excessive features and elusive nature, The Fat Controller embodies the idea of the postmodern grotesque subject; at the same time, the impossibility to capture and unscramble the “true” events in the novel with rational tools and by means of binary oppositions embodies Self’s idea of a new satire.

I have demonstrated, thus, the ambivalent character of transgressivity in Self’s novel: described as Ian’s “outrages”, the violent scenes in the novel do not yield to a single interpretation, since even Ian himself is not sure whether he is responsible for committing crimes or whether The Fat Controller has arranged them. Moreover, Ian is not sure whether The Fat Controller is existent at all. I have used Lacanian theory to present a possible interpretation of Ian’s need to create an authoritative figure who would monitor his acts and behaviour. Thus, the possibility of knowing the “truth” is challenged in my reading of the novel as is the medical discourse with its classificatory diagnoses.

While the notions of fluidity and heterogeneity are successfully applied to the grotesque figure of The Fat Controller, they are also relevant to the permeable boundaries of the fictional worlds Self creates. As a successor to the satirical tradition, Self inherits some of Swift’s and Carroll’s classical techniques of organizing space and time, and utilizes them to outline the obsolescence of the clear-cut boundaries. One of those techniques is the use of the Moebius-strip metaphor in order to construct space. The notion of the Moebius strip originated in the field of mathematics with August Moebius’s discovery of it in the mid-19th century. The most prominent feature of the strip, which is also important to my reading of Self’s novel, is its being non-orientable, which means it has only one continuous side instead of the habitual two sides and, thus, subverts the idea of the Euclidean space. Today, the notion of the Moebius strip is used in different fields ranging from electricity to music. It is noteworthy that Lacan used the notion of the
Moebius strip to problematize such binary oppositions in psychoanalysis as
signifier and signified, conscious and unconscious, seeing them not as discrete but
as continuous entities (Evans 2006, 119).

In My Idea of Fun, Ian mentions that “time turned itself inside out, the loop
became a Moebius strip and [he] was condemned forever to a life of living on two
sides that were one” (64), thus affirming that there is no right entrance or exit and
no visible borderline between the real and dream world, right or wrong perception.
On the one hand, Ian calls his childhood “a place that is not a place and a time that
is not a time” and “a wild primeval place, a realm of the id, where the very
manifold of your identity can easily be gashed open, sundered, so that all the little
reflex actions that you call your ‘self’ will spill out” (20, 17). On the other hand,
when Gyggle prescribes Ian the dream sleep, Ian finds himself in The Land of
Children’s Jokes, Self’s allusion to the Dead Baby Jokes (see Dundes 1979). Reality
and dream are represented as slipping into one another smoothly and
inconspicuously, and the space in general appears to be seamless. The Moebius
strip metaphor appears to be a version of the rhizomatic structure, as Ian does not
really need any external aid in order to visit The Land of Children’s Jokes: he can
freely go from one world to the other, and the inhabitants of the dream world can
occasionally be met in the seemingly real world. There are no points of hierarchy
between the real and the imaginary: as Self writes, “his experiences in the Land of
Children’s Jokes remained with him, coherent and narratively intact, in a way that
dreams just shouldn’t” (243). Thus, the borderlines (or frames) appear to be non-
existent and unrequired as the entire world becomes undifferentiated. Rospide
juxtaposes Self’s space to that created by Carroll in Alice in Wonderland (1865):
“Contrary to Alice who closes the parenthesis when she awakes, sealing off the
entry to the oniric world, Ian never wakes up; he simply walks from the Land of
Children’s Jokes to the world of reality” (2007, 187-8).

However, it might be more rewarding to juxtapose Self’s space in My Idea of Fun
to the space in another novel by Carroll, Sylvie and Bruno (1889), where Carroll not
only incorporates all the spaces into one but also brings into contact several series
of parallel events and doppelgangers: Sylvie and Lady Muriel, Bruno and Arthur.
While in Sylvie and Bruno Lady Muriel encounters Mein Herr, who resembles the
Professor, and comes from the Outland, Jane in My Idea of Fun encounters a
character who comes from the Land of Children’s Jokes. Thus, the absence of
frames in My Idea of Fun points not only to the convergence and interpenetration of
the worlds but also to the overwhelmedness of the control that The Fat Controller
exercises. It is Mein Herr who teaches Lady Muriel to make a special purse in Sylvie
and Bruno Concluded (1893). The form of this purse reflects the way space is
organized in Carroll’s and Self’s novels. As Mein Herr says, “whatever is inside that
Purse, is outside it; and whatever is outside it, is inside it. So you have all the
wealth of the world in that leetle Purse!” (1893, ch. 7). The corners of the
handkerchief are sewn wrongly, causing it to form a Moebius strip, the outer
surface of which is continuous with its inner surface. This is precisely the way in which the system of the double series works in Carroll’s novel. It is also apparent in Self’s novel when Ian admits to “living on two sides that were one” (64). The Moebius strip can be turned inside out at any point—similarly, the exchange of spaces can occur anywhere.

Another Carrollian technique is muddled time perception. In *Sylvie and Bruno*, the Professor demonstrates the so-called Outlandish Watch that possesses “the peculiar property that, instead of its going with the time, the time goes with it. [...] Time has no effect upon it” (1889, ch. 21). In *My Idea of Fun*, Self presents the reader with a new dimension to the flow of time in an approach reminiscent of Lewis Carroll. Ian says that he always finds himself in “a time that was never some time but always Now” (20). The idea of the perpetual present is common to schizophrenic postmodern thinking. According to Jameson, the individual in the postmodern world is schizophrenic as he or she is unable to locate him- or herself in time and being appears to be reduced to “an experience of pure material signifiers, or, in other words, a series of pure and unrelated presents in time” (1991, 26). Thus, the schizophrenic perpetual present becomes a habitual state for the postmodern individual that originates from, and may serve as the source of, a lack of epistemological coherence. Being unable to perceive the passage of time any longer, Ian feels alienated from the surrounding world, saying that he “always had a sense of being in the now, of a kind of alienation from history itself” (182). Kovel describes alienation as one of the essential features of schizophrenia and ranks it together with Marxian alienation or late capitalist society alienation (1987, 335). The way of perceiving time as “always now” is characterized by Deleuze in his work *The Logic of Sense*, where he differentiates between two measuring methods: the perpetual present and the non-existence of present (if the past and the future “subdivide each present ad infinitum” [1990, 62]). Deleuze writes about the former: “Sometimes it will be said that only the present exists; that it absorbs or contracts in itself the past and the future, [...] it reaches the limits of the entire Universe and becomes a living cosmic present” (ibid., 61). Together with the intermingling of spaces, the distortion of time makes Ian present anywhere and at any time, but his perception actually narrows down to a single present moment and a seamless space: “I was inside my own representation and that representation had become the world” (55). As Deleuze adds, “the time of the present is always a limited but infinite time; infinite because cyclical, animating a physical eternal return of the Same” (ibid.).

When the habitual division of time into past, present and future ceases to exist for Ian, he realizes his gift of eidetic vision. Ian says he has “an exceptionally accurate visual memory”, “able to recall perfectly quite long sequences of words” that he saw for “twenty milliseconds” (162). For example, Ian tells Gyggle that he might be “suffering from excess of imagination” (159), which complicates the issue of the nature of his outrages—did they actually take place or were they just too
realistic products of his imagination? Eidetism creates an illusion for Ian that he is in control of everything; when in love, he considers “incorporating” the girl “into the mass grave of [his] fantasy world” for a simple reason: “Once she had been tarnished by my imagination, she would cease to have any power over me” (116). Scholars claim that eidetic imagery implies the ability to “see an image that is an exact copy of the original sensory experience” (Kagan and Havemann 1972, 588). It might be considered that such an ability would provide a perfect expression of experience—the unattainable goal of illness narratives. Ian, however, remains an unreliable storyteller and confessant. His eidetic abilities lead him to confusion and feelings of grandeur rather than an absolute knowledge of where he is. In this sense, Ian has a delusion similar that which a person with schizophrenia might have. Sass writes that “the loss of ego boundaries separating self from the world”, “self’s limitless powers” and delusions of “cosmic” character are common in schizophrenia—“certain grandiose, nihilistic, or religious delusions that focus on highly general or universal issues rather than on more personalized or worldly concerns” (1994, 270). He quotes one patient who says: “I was a part of everything, and the whole world, sometimes the whole universe, was in a sense a part of me” while another patient assigned himself the beginning and the end of the world (ibid., 271). The schizophrenic delusion of world catastrophe is in part connected with the loss of the self—the self is dispersed and destruction or rejection of the world seems to be a way to regain the self (see also Kovel 1987): this makes Ian’s lack of remorse lucid. Kovel calls “annihilation” the centre of schizophrenia, implying that the person may seem to be present but the subject is, in fact, “in the process of disintegrating” (ibid., 336).

Gyggle uses Ian’s eidetism as a tool for assuring Ian of his being mentally ill and suffering from a delusion: “There is nothing behind the cartoon sofa and if you find anything it’s because you yourself have put it there. There can be no picture of the world in your head that exists independently of your assertions and beliefs about it” (167). Gyggle appears to regard Ian as a valuable patient due to Ian’s belief in his eidetic visions and makes the diagnosis more certain by testing Ian. However, the possibility of eidetic imagery and memory remains a controversial issue in psychological and neuroscientific research, as the studied cases (see, for example, Parker et al. 2006) usually point to exceptional autobiographical yet not eidetic memory. In her memoir, Jill Price, for example, writes that her “recall is so vivid and true to life that it’s as though [she’s] actually reliving the days, for good and for bad” (2008, 14), where “bad” apparently stands for a lack of defence mechanisms to suppress traumatic memories. As Nietzsche notes, “it will be immediately obvious how there could be no happiness, no cheerfulness, no hope, no pride, no present, without forgetfulness” since the apparatus of repression is damaged (1989, 58). As for Ian, he is able to suppress them because his eidetic images are not necessarily part of his memory but often a variety of hallucinatory visions.
Another interesting case of eidetism is presented in Jorge Luis Borges’s short story “Funes the Memorious” (1942). It is likely that Self consciously or unconsciously alludes to it. After having fallen from a horse, Funes recovers to find the present “almost intolerable” as “it was so rich and bright” (Borges 1994, 112). Like Ian’s, Funes’s recollections of the past appear to be uncommon: “Each visual image was linked to muscular sensations, thermal sensations, etc. He could reconstruct all his dreams, all his fancies” (ibid.). However, as well as in Ian’s case, the ability does not provide Funes with great “capability of thought”; as the narrator says, “To think is to forget a difference, to generalize, to abstract” (ibid., 115). Funes “was disturbed by the fact that a dog at three-fourteen (seen in profile) should have the same name as the dog at three-fifteen (seen from the front)” (ibid., 114). He develops a system of enumeration that uses a different symbol for any number: “In place of seven thousand thirteen, he would say (for example) Mdximo Perez” (ibid., 113). In his inability to generalize, Funes approaches a radical ambiguity, finding himself, similar to Ian, in the “always now” as any moment introduces changes and nothing is what it was a moment ago. Although knowing everything of history, they appear to be alienated from it. The images of Funes and Ian are a perfect metaphor for the lack of reference points characteristic of the state of postmodern incredulity. However, cases like that of Funes are not just abstract metaphors or fictional stories. It is likely that the story about Funes could be based on Alexander Luria’s study (Verberne 1976) described in The Mind of a Mnemonist: A Little Book about a Vast Memory (1968). Luria writes that, apart from anything else, the mnemonist experienced trouble with generalizations and abstract concepts, that is, the fact that different words can refer to the same thing (Luria 1968). Thus, Ian’s condition proves to be ambiguous, relating both to the clinical and metaphorical picture.

In many ways the metaphorical plot of surveillance depends on Ian’s eidetic abilities and his socializing in marketing circles. Due to Ian’s feeling of alienation from time and history, his memories of outrage are suppressed and, as he confesses, he can wilfully make the knowledge of them vanish and then restore them only by means of so-called retroscendence. The Fat Controller teaches Ian this technique in order to extend his eidetic capability (130). With the skill, Ian can unpack the history of any product, and, on becoming a marketeer, he considers using it: “How it might be possible to enter into the very history of a product, any product, the Porsche or the crisp packet, and flow down its evolutionary folkways, zoom back to the point where it was as yet undifferentiated, unpositioned, unintentional, and therefore not about anything” (255). Self is critical in depicting the marketplace and the ways it manipulates one’s life in the manner of The Fat Controller. The sell-buy relationships become as ubiquitous as the image of The Fat Controller: “He was in the lino, he was in the soap, he was in the Toilet Duck. He stared out from the windows of the branded monads. […] It was as if exchange had replaced language as a primary form of communication, and people were selling to
one another in order get a hold of some words” (256, 258). As Ian feels the presence of his persecutor, the world of products that seemed so familiar to him uncovers another “howling force” that underlies it: “If Samuel Northcliffe was involved, money couldn’t be far behind” (256). Self describes drug addiction as a “sinister hand” that was forcing him “in directions [he] didn’t like” (Taylor 2003) and the marketing addiction appears to be no less viral. Hayes notes that “Ian’s transformation from a relative innocent into a callous murderer, torturer, and rapist [...] coincides with his education and professional growth as a marketing executive” (2007, 65). Such a coincidence may indicate that the nature of his condition can be socially and culturally induced. For example, in American Psycho, already discussed in the literature review, this coincidence is obvious as well: the transgressive qualities of the novel and of Patrick Bateman’s behaviour and his being a successful investment banker are intertwined with his and the entire background that is part and parcel of the consumerist culture. Frosh writes that “the conditions for the construction of selfhood are always fragile” but the “focus on production and consumption” make them more so (1991, 146). As Holland, quoted in the introduction, speaks of paranoia as of “what is archaic in capitalism” (2002, 3), Frosh writes that paranoia is “the element in psychosis that is emblematic of contemporary society” as “we are part of some global network which is incomprehensible to us all” (1991, 132). The notion of psychosis is “identified loosely with the clinical syndrome of schizophrenia” and includes “difficulties people have in establishing an integrated selfhood, the apparent breakdown of rationality and personal autonomy” (ibid., 128) and the fear of being controlled. It applies equally to Jameson’s approach to schizophrenia, as a part of the logic of capitalism discussed in the introduction. Levin calls the self-other split “pathogenic”, noting that “paranoid fantasies of panoptical and acoustic surveillance, thought control and attacks of demonic possession should not be immediately dismissed as symptoms of private madness” (1987, 526). Such an approach denies the binary logic of norm as rational and madness as irrational, it puts psychosis in line with ordinary experiences, for “to be human is to be able to experience madness” (Baker et al. 2010). Moreover, postmodern writers other than Will Self often emphasize the idea of one’s losing autonomy and being controlled by some global authoritative power. Among them are Pynchon, Burroughs, Kathy Acker and others.

Certainly Ian’s alienation from history and his transgressions and outrages may be viewed in terms of a “total refusal”, “an heroic act of repudiation of contemporary oppression that results in a complete estrangement from reality” (Frosh 1991, 137). Such a view refers to the Deleuzian theory of schizophrenia that regards it as an absolute limit directed at dismantling the codes: schizoanalysis celebrates the breakdown of selfhood focusing on it as a transgressive freedom rather than as the loss of autonomy. If Ian can be called a schizophrenic hero, his transgressivity would be connected with his lacking moral reference points. Ian’s
behaviour may also be explained by the Laingian idea of madness as a response to circumstances (where The Fat Controller would stand for the controlling society), implying freedom, rather than being controlled. As Kovel writes, delusions of persecution in schizophrenia may help to “people the inner world” as that is thought to be better than to appear non-existent (336). Kovel, however, does not see the revolutionary potential of schizophrenia as different from capitalism: he rather sees them going hand in hand, bringing together Jameson’s and Deleuzian views: “There is an amazing uncodable flow to the schizophrenic’s inner world—but it occurs at the price of desociation, and all the ‘schizzoanalysis’ in the world won’t put Humpty Dumpty together again” (1987, 343).

Kovel expresses one particular idea that can be developed to sum up the two readings presented in this chapter: that of Ian’s illness narrative and that of his being caught in a metaphoric schizophrenic society. He says, on the one hand, that a system that is “dominated by the logic of commodity” is a “peculiarly bad place to have schizophrenic experience” (1987, 341). On the other hand, he also states a reason for the place being “bad”: it “conspires to predispose, precipitate, and maintain the condition in its most malignant form” (ibid.). Thus, the characteristics of the society, complicated by the fact that Ian works in the marketing sphere, appear to deepen the dissolution of the self, no matter whether Ian has been predisposed to mental illness or not. The broad concept of addiction discussed in the chapter can also be viewed upon as a response to circumstances: as Becker and Murphy write, “people often become addicted precisely because they are unhappy”, yet “they would be even more unhappy if they were prevented from consuming the addictive goods” (1988, 691). This idea sheds new light on Ian’s relationship with The Fat Controller and Gyggle: they tell him that it was their responsibility to “clear up the mess” (322). Whether Ian’s outrages are real or not, or whether The Fat Controller and Gyggle are real or Ian’s hallucinations, he is addicted to their authority and patronage. Although Ian may seem to fear the “presence”, it is likely that he is not ready to be “prevented” from being exposed to it.

4.1.2 The Sweet Smell of Psychosis: Schizophrenia and the Media

When Kovel writes about schizophrenia, he places it within what he calls a “technocratic society”, the constituents of which appear to be surveillance techniques and omniscient technology. The technocratic discourse is seen as dominant or privileged and it refuses to comprehend the language of schizophrenic delusions that “often refers to nuclear weapons, nerve gas, persecution by the CIA” (Kovel 1987, 333). Likewise, Self refers to new technologies in his article, admitting that it is a delusion to assign only benevolent objectives to them as they apparently facilitate “the killing of people at a distance” (2016). A lot is implied by “killing” here: troubling one’s sense of time and space, one’s ability to read and narrate
stories (the main concern of his essay), and, implicitly perhaps, the ability to be autonomous. Self’s novella *The Sweet Smell of Psychosis* published in 1996 provides a remarkable example of how individuality bends to submission before the ubiquitous authority and falls into uniformity. It is noteworthy that the recent Bloomsbury edition is supplemented with drawings by Rowson, a cartoonist who has not only published a graphic parody of *The Waste Land* with references to the most famous modernist writers, but is also engaged with political satire. However, in the same vein as *My Idea of Fun*, *The Sweet Smell* is ambiguous in its depiction of the nature of Richard’s hallucinations concerning Bell. As Graham Matthews notes in his recent book *Will Self and Contemporary British Society* (2016): “Self’s fiction achieves the uncanny task of making the world simultaneously familiar and unfamiliar” by seeming “externally consistent” but being, in fact, “internally inconsistent” since it incorporates “unreliable narrators, framing narratives, metafictional and auto-fictional devices” (2016, 4).

Richard, the protagonist of the story, moves to London from a provincial northern town in search of a new job: he used to work for a small newspaper but upon moving to London becomes a journalist for a fashionable magazine. Hayes characterizes *The Sweet Smell* as a part of Self’s “London noir” trilogy and ranks it together with the first and last stories from *Tough, Tough Toys for Tough, Tough Boys* collection (2007, 100) and thus focuses mainly on the role of the city. Hayes uses Bentham’s metaphor of Panopticon to illustrate it: Richard seems to regard London as a city of possibilities and extensive personal freedom, yet he is “incarcerated in a culture ripe with decadent hedonism and superficiality” (ibid., 101). However, the prison-like nature of London may serve as a broader metaphor for the pervasive influence of the media establishment. Richard refers to his fellow journalists as hacks, meaning that at the bar they frequent they do not discuss “the Balkan crisis” or the “Neo-Keynesian implications of the Treasury’s management” (11)20. He describes these hacks as “transmitters of trivia, broadcasters of banality, and disseminators of drek” who “wrote articles about articles, made television programmes about television programmes, and commented on what others had said” (ibid.). Such an approach to journalism, highly demanded in the world of the novella, apparently lacks any originality of opinion and thus reflects a highly pessimistic view of the postmodern. Richard critically contemplates his own work of “reducing some forthcoming event still further than it reduced itself” (25), implying that he has to fit into “a hundred and fifty words” all the themes of a novel or a play. Journalism is shown to be superficial as it substitutes the real, authentic and creative for repetition. In other words, such superficiality “is revealed to constitute a barrier to authentic political engagement and genuine investigative journalism” (Matthews 2016, 128). In the postmodern context, original work is often overshadowed by interpretations or copies and is thus lost in the mass of

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20 All quotes are from the e-Pub version of the novella.
information. Self is ironic in making Richard say that in his “humble opinion” he is dealing with the “subject matter, the themes, better than the original” (ibid.). Such a representation of the media influence is, in a sense, similar to Self’s attitude to postmodernism, which he expresses in the foreword to The End of Everything: Postmodernism and the Vanishing of the Human (2003). Self dwells on the idea of the unoriginality of postmodern reflections, writing that they are reminiscent of “a cut-and-paste job on the human condition” and present “a mirage of a mirage, a complex set of interactions between convection (hot air) and reflection (unoriginality)” (Self 2003, v-vi).

Richard finds himself in a strictly hierarchical society where hacks write about media celebrities in order to become in-demand journalists and make the celebrities the talk of the town. The bar where they meet is pictured as a citadel of hypocrisy, “that premier preening place, that atelier of arrogance” (13). It is clear from the novella who the most authoritative person is—it is the one most widely broadcast, the one who writes the most read column. This person is Bell who has a “weekly television programme” at peak time on Friday, a column in both The Standard and The Mail, and a phone-in show; all of this broadcasting brings Bell an audience of more than twenty-five million people and makes Richard think that there must be people in Britain “who did nothing else but listen to Bell’s voice, watch Bell’s face, or read his words, for every waking hour of their lives” (14). It can be assumed that the figure of Bell is based on J. J. Hunsecker, a character in Ernest Lehman’s short story turned into a classic noir film Sweet Smell of Success (1957). Hunsecker is also an influential columnist who has many important contacts that he employs for his own benefit and that make him powerful. Finney writes that Bell represents “an image more than a character” (2001, n.p.). This seems to be a fair observation as Bell is not pictured as possessing an independent identity but rather a collective image of the Big Other figure. Concerning the fluidity of his image and the ambiguity of his identity, he is a postmodern grotesque figure similar to The Fat Controller. While The Fat Controller claims that there are wires attached to his fingers, Bell is likened to a spider sat in the middle of the web, where “invisible filaments wreathed him, garbed him, filaments of gossip and speculation, of opinion and dissent” (14). It is important to emphasize the grotesque nature of the two figures and place them in the context of Self’s satirical project. As Matthews notes, Self’s satire “deconstructs contemporary myths by portraying them at their most grotesque and degenerate extremes” (2016, 12). Moreover, Bell appears to be more than human, and this can be interpreted in at least two different ways. On the one hand, his powers are pictured as ubiquitous and overwhelming—thus, Bell’s being beyond humanity is synonymous with his possessing superpowers. On the other hand, Bell appears to be beyond humanity to the point of becoming inhuman: if we see Bell as the embodiment of the market, the inhumanity of the market enters the foreground since “it is concerned only with profit at the expense of ethics and compassion” (Matthews 2016, 132). The lack of the latter becomes evident already
in the beginning of the novella that opens with Bell and his people playing a trick on a man who might have been their colleague. Even though Richard himself participates in the bet, he is not yet integrated into this society, which is new for him, and feels ashamed: “Richard remembered the man’s face, myopic, hurting, as the red had suffused from his neck, up through the sparse roots of his sparse hair. And Richard felt the shame he had provoked” (19). Moreover, Richard becomes a victim of Bell’s jokes, too. It is evident that the “universally desirable” (10) Ursula who lures Richard is one of Bell’s instruments for bringing Richard into submission. He knows that Ursula’s writing abilities are limited: she writes about her “amorous adventures” in

*the most embarrassingly awful column Richard had ever read, but he made enormous allowances for her, allowances the size of Third World debts. He wanted her. She was not simply beautiful, but beautiful in a way that was so vastly improbable.* (13)

Yet, she is an indispensable and quite natural part of the society of media trivia. By employing Ursula, Bell seems to form a desire in Richard but never actually fulfil it. Matthews links such actions to the way the media operates—it “manipulates desire in its audience by constantly promising yet denying pleasure” (2016, 128). It is interesting that in case the desire is formed, it is imposed externally. Similarly in *My Idea of Fun*, Ian’s idea of fun as being linked with violence and outrage is intertwined with his entry into the world of global capital. Is it Ian’s authentic desire or is he being manipulated? Is Ursula really desirable for Ian? It is important to see desire as culturally and socially constructed: whatever the source of Richard’s paranoia and desire is, it is constructed on the basis of the social relationships he forms. In a way it reflects the Laingian view that psychosis is socially constructed. Richard’s description of Ursula as “universally desirable” is important here since it demonstrates that her desirableness is taken for granted, that is, not questioned. As Mr Broadhurst claims in *My Idea of Fun*, “they imagine that they perceive what is really there but they don’t. Instead their minds are constricted by a million million common little assumptions, […] and these they take for granted!” (73). Interestingly, Richard notes that Ursula’s good looks can be a professional façade:

*She was still pristine, even at this late hour. Richard could see no reddening of her blue eyes, or lankening of her thick, chestnut swathe of hair. […] How could she witness cruel jokes like the one they’d played on the trench-coated man, without somehow becoming corrupted in her very essence?* (20-21)

However, infatuated (and already *addicted*), Richard does not give his observations a second thought—the idea that Ursula could be corrupt does not enter his mind. Billboards, radio and TV programmes and newspapers are commonly depicted as agents of surveillance in postmodern fiction. A recent edited collection of essays
Spaces of Surveillance: States and Selves (2017) tackles the issue of surveillance as it is presented in literature, art and film and explains how surveillance operates in politics. One of the chapters (Pignagnoli 2017) addresses the negative consequences of the power of the Internet and social media in three contemporary postmodern novels, namely Super Sad True Love Story (2010) by Gary Shteyngart, The Circle (2013) by Dave Eggers, and Purity (2015) by Jonathan Franzen. The novels address the attack on privacy that digital surveillance entails. In Empire of Conspiracy (2000), Timothy Melley addresses novels by Thomas Pynchon, William Burroughs and Kathy Acker and explores the culture of paranoia and its connection to technological advancement. While technologies can acquire such human qualities as agency and motive, humans themselves gradually lose agency and become addicted to commodities, images and control. In The Sweet Smell of Psychosis, when Richard catches sight of some copies of the Radio Times, he sees Bell but in a multiplied form: “It wasn’t a face, it was faces. Bell’s faces, serried ranks of Bells, a tintinnabulation of them resounding in Richard’s head” (30). Self’s use of the transmogrification technique amplifies the paranoid effect that the surveillance entails. Self deals with the extraordinary nature of scale, which he mentions in an interview and which appears to be one of the transmogrification forms: “Swift’s notion of using the very large and very small as conceptual can-openers to open up the conundrums of the world is something that I think is inherent in our vision: that kind of scale vision” (McCarthy 2001). A “scale vision” derived from Jonathan Swift and Lewis Carroll is applied in the short story collection Grey Area (1994) and My Idea of Fun to highlight the all-mightiness of the supervising powers and absolute insecurity of those supervised. In the novel Ian suspects in a paranoid manner that his son is not his “remotely”: “The Fat Controller, that is – his powers are so indiscriminate. He might have intervened at any stage. He could have miniaturised himself and crawled down my urethra” (9). In The Sweet Smell it is Bell who is transmogrifying. At the bar, Richard heads to the cards room and sees four of his colleagues, only with identical features: “Each of them had the same thick-set neck, the same jutting jaw, the same high, white forehead, the same red lips and broad-bridged nose. It was a group of Bells – a belfry” (32). The nature of the event is as undecidable for Richard as it is for the reader: he does not know whether there are four Bells in the room or whether he is hallucinating. However, on the one hand, “Bell’s ubiquity was undeniable” and, on the other hand, Richard is apparently obsessed with him.

What makes Richard feel even more perplexed is the fact that no one else around him seems to notice Bell’s oppressing ubiquity or question his authority. Richard claims that hardly anyone seems to notice “the prognathous, not to say primitive, cast of that face” and even find him “surprisingly pretty” (15). This makes Richard’s condition stand out: although he gradually descends into addiction to Bell, he tries to resist. What he does not realize is that Bell makes him captive by different means—not only through the hallucinations, but also by means
of Richard’s addiction to Ursula. The love affair is demystified only in the epic end of the novella when Ursula transforms into Bell while having sex with Richard. The last words of the novella belong to Bell who hugs Richard and keeps him tightly: “‘It’s good to have you on board,’ said the big man; ‘I thought you were never really going to join – become one of us’” (61). Finney notes that Bell’s last transformation points to the transgression in the novella—that “of the limits of gendered subjectivity” (2001) concerned with the story’s satire on accepted norms. The confusion of genders seems to be another way of picturing the methods of surveillance employed by Bell, yet it is also important to mention that Bell’s intrusion into Richard’s highly private affair with the girl reflects what Gottschalk notes about the private matters in his essay in the edited collection *Pathology and the Postmodern* (2000): “Within the postmodern”, he says, “constant surveillance and the circulation of information about private matters have become normalized and predictable” (2000, 32). Thus, the autonomy and privacy of Richard’s life prove to be parts of Baudrillard’s “ecstasy of communication” while what he has thought to be his private affairs appear to be exposed and not to belong to himself anymore. The end of the novella illustrates Frosh’s view of paranoia as “the normal state of affairs in the postmodern world” because “nothing and no-one can be trusted” as “they may know us better than we know ourselves” (1991, 132).

It is emphasized on several occasions in the novella that Richard’s paranoia is concerned with his working in the media and Bell’s authoritative figure being present everywhere within that media. For instance, Richard recognizes Bell’s features even in his colleagues who are talking on the phone:

*The hand that grasped receiver against ear even had Bell’s signet ring on its fourth finger. Richard said ‘Hiyah!’ brightly, but somewhere between the ‘Hi’ and the ‘yah’ the figure on the phone turned, and as the face came into view there was an instant when two sets of features were revealed to Richard simultaneously: those of Bell, and those of someone else. Then the Bell features dissolved and he was looking straight into Trellet’s face. The venal thespian expostulated, ‘What the fuck are you doing? Grabbing hold of me like that – get off!’ Richard reeled away, back into the street. His head pounded. He wasn’t so much humiliated as painfully disoriented, perplexed. (49; emphasis added)*

Moreover, Richard contemplates his father living far from London and his non-involvement in the media sphere as a possibility to get a breath of fresh air: “His father would turn out to have hidden reserves of wisdom concerning people like Bell and the things that they did, […] he would feel it bringing with it a more real, more tangible world than the febrile machinations of Bell and the clique” (52). However, Richard never goes to visit his father and remains on the line of least resistance in his becoming “one of them”. In a way, the manipulative nature of the media can be likened to that of addiction—whether it is an addiction to drugs or
authority. When Ursula transforms into Bell at the end of the novella Richard feels the smell of her perfume again, but since the spell is broken the smell ceases to be pleasant and shows its real nature: “And as he [Bell] pulled Richard down on top of him, the scent of Jicki came into the back of Richard’s throat. But it was no longer sweet, it was bitter, bitter as cocaine” (60). As I mentioned earlier, the desire has been formed in Richard but is never fulfilled: being manipulated and thinking he is deeply in love he does not notice that he has already been trapped. It can be suggested that being manipulated or being under submission is the price he needs to pay to become a part of the media community that produces addiction and manipulation.

Self’s use of scent is highly meaningful since the power of smell is undeniable and has been widely studied. Cretien van Campen (2014), for example, refers to the odour memory, which is certainly important for such authors as Marcel Proust and Charles Baudelaire. He claims that scent is important since it “evokes memories of a loved one” (Campen 2014, 21). The smells of perfume and human body are apparently interconnected: Patrick Süskind’s *Perfume: A Story of a Murderer* (1985) is one example of such a connection. Interestingly, in Self’s novella, Richard focuses on the smell of Ursula’s perfume, not the smell of her personally. Perhaps this is why he is deceived when Ursula turns out to be Bell at the end of the novella. The scent of the perfume stands for Richard’s addiction as a whole, while Ursula, as bait, appears to possess no smell of her own—at least, it is not mentioned in the text. The perfume is addictive for Richard since it is associated with Ursula who he sees as “universally desirable”—therefore, in his mind the smell is associated with sex: “The fulsome aroma of Jicki was thick in the enclosed atmosphere. If there had been a Magic Tree car air-freshener that distilled the odour of Ursula, it would have been called ‘Fuck Fragrance’” (36). Moreover, the smell appears to be ubiquitous, it accompanies all of Richard’s hallucinations concerned with Bell: “Whenever Richard ran into any of the clique members off guard, in the brasserie, the restaurant, the table-football room or either of the bars, he would see them first as Bell and only latterly as themselves. And always there was the smell of Jicki, the smell of Ursula” (50). Thus, even the smell appears to be superficial in the novella, that is, it is a perfume that any person can wear and pretend to be whoever he or she wants. It is noteworthy that Richard recognizes that the perfume is made by Guerlain in 1889, so that it can be seen as a classic and available scent for women.

Self demonstrates a personality with a dissolved identity that results in absolute uncertainty and inconsistency, on the one hand, and the emergence of such grotesque ubiquitous personae as Bell, on the other (or The Fat Controller in the novel discussed above). It is clear that such grotesque figures appear at the same time with the experience of ambiguity resulting, as Shabot writes, from one’s being “in the world” but “not the world” as it exceeds one and threatens the “well-defined and protected presence in the world” (2007, 65; emphasis added). Such a state of a “fragmented and disoriented consciousness” (Gottschalk 2000, 27)
displays similarities with schizophrenia. Sass writes that schizophrenia is concerned with experiencing the world as fragmentary and devoid of authenticity: one may “feel his actions, sensations, or emotions as being imposed upon him from without” (1994, 231). He also mentions that a person with schizophrenia may often believe that he or she is being watched and “devices like videocameras are often felt to be everywhere and nowhere” (ibid., 287). Perhaps, it is those “videocameras” that are accountable for the “apophanous mood”—feeling a connection to everything that happens (ibid., 50-53). Indeed, Richard’s addiction to Bell gradually acquires an overwhelming character: it starts to fill his thoughts and penetrate his daily routine, finally assuming cosmic significance for him. Richard’s story is a great example of postmodern paranoia with its delicately outlined details of a personal yet massive psychosis.

Whereas it is possible to approach Ian as a Deleuzian schizophrenic hero as far as his “outrages” (wilful or not but, apparently, wilfully suppressed) are concerned, this is hardly possible in the case of Richard. Self writes that “many of [his] works fall into the category of ‘Zeitgeist novels’”, meaning that he tries to make his “colourful characters” “representative men of their time” (2007). Baudrillard captures the massive character of the postmodern psychosis and its technological origins by juxtaposing it with biological pollution: “When you think about the incredible neurotic complexity of millions of scattered individuals and the exponential sum of all these problems, you are aware that the psychical pollution of the planet is far greater than the biological or technological pollution” (1997, 36). The main idea of the theorists of the postmodern referred to in this chapter is that the experience of the daily routine, saturated with information and the media that transmit, it has changed a great deal. It has acquired features common to the experience of schizophrenia as it is described in academic literature or illness narratives: the destabilization of time and space perception, perception of the real and imaginary, paranoid and grandiose tendencies, and the loss of a sense of, or propensity for, autonomy.

Both stories analysed in this chapter present Self’s satire as one where ambiguity plagues ultimate interpretation. Finney characterizes Self’s work as “a fiction of excess” (2001) as his satire explores and transgresses the boundaries of the norms that demand completeness. Baudrillard speaks about indeterminacy in his Transparency of Evil and claims that the contemporary revolution is the “uncertainty revolution”. He says, however, that “we are not ready to accept it” and paradoxically attempt to escape from it by relying on information, but as a result we only “aggravate the uncertainty itself” (1993, 43). What readers are often not ready to accept is uncertainty concerning madness and sanity. Challenging of this dichotomy is clearly present in both of the analysed fictions. It is seen not only in the figure of Gyggle, who appears to be either an authoritative figure or in cahoots with the supervising power. It might be even more explicit in Richard’s relationships with his colleagues. In the quote already given above, he says that his
colleagues fail to notice Bell’s non-attractive appearance, on the contrary, they find him pretty. Likewise, they seem to ignore Bell’s ubiquity, being either irresponsible to his powers or, rather, already addicted. If the latter option is considered, it is possible to refer to Frosh’s statement concerning the inevitability of schizophrenic symptoms. Although Richard’s colleagues seem to stay relatively “sane”, “their deeper experiences are still those of madness” and “their very sanity is a kind of imaginary position, a spurious covering over of the dissolution” (1991, 146-7).

In this case, Richard’s condition carries an insightful rather than debilitating character. Bakhtin’s theory of the carnival presented in Chapter 2 can be applied here. Bakhtin writes that carnival is a temporary celebration of freedom from authority. I have argued that the temporary character of the carnival reveals its hegemonic nature, that is, its inability to transgress the hegemonic order. It might seem that the meetings at the bar that Richard’s colleagues regularly have are carnivalesque. However, these meetings do not involve “the suspension of all hierarchical rank, privileges, norms” (Bakhtin 1968, 109), rather they—their intercommunication and behaviour of everyone in them—are all about pursuing “social prospects”:

They all seemed to smoke, they all seemed to drink, they all held themselves in exaggerated postures, heads jerking around, on the lookout for better social prospects lying behind the heads – or the bodies – of their interlocutors. (9)

Sealink, the bar, operates as a simulacrum, as it provides the illusion that journalists are manipulative but are not themselves manipulated. As I argued in Chapter 2, an event that pretends to be transgressive may take a form of hegemonic order that, in fact, has both solidified rules (and hierarchy—Sealink is obviously a classy community, as only the chosen ones are allowed into Bell’s company) and an authoritarian centre (Bell himself). When Richard first entered this community he felt ashamed and repulsed by his colleagues’ tricks—their actions and postures were pictured as grotesque, as if such transgression of morality is something that pertains only to the carnival, that is, to the parties at Sealink. However, as Richard gets to know the society better, he starts to realize that the grotesque behaviour is not only reserved for parties, but is a rather general modus operandi employed by his colleagues.

Contemplating Foucault’s idea of the disciplinary, Deleuze emphasizes the notion of continuous internalized control in contradistinction to confining disciplinary control: “He [Foucault] was actually one of the first to say that we’re moving away from disciplinary societies, we’ve already left them behind. We’re moving toward control societies that no longer operate by confining people but through continuous control and instant communication” (1995, 174). If applied to Richard’s colleagues, such an approach would show that they are subject to continuous control and are likely to have internalized it—this is the reason why
they do not recognize it in the figure of Bell. Levin notes that “the paranoid schizophrenic is of course subject to delusion if he thinks that our world is a Panopticon and that telepathic thought control is the universal method of government. And yet there is also a vital truth here, to which the schizophrenic may be more attuned than we” (1987, 526). The hierarchy of madness and sanity, even if there was one, is reversed: hallucinations might have become a way of resistance for Richard. He might be attempting to transgress the social media bonds and his madness may acquire a transformative character, as Laing meant it, yet there is no happy end in either My Idea of Fun or The Sweet Smell of Psychosis: both Ian and Richard appear to be captured and controlled.

Certainly, those who take up the normalizing medical approach, as discussed in the introduction, may claim that Ian and Richard are mentally ill characters who hallucinate and might rather be addicted to drugs than to the Big Other. It is interesting that drugs or a hint of them are present in both the novel and the novella discussed in this chapter. Matthews notes that Self “repeatedly juxtaposes the discourse of consumerism with the aesthetics of drug-taking in order to suggest parallels in the manipulation of desire and addiction” (2016, 115). Such consumerism is evident in the case of Ian’s addiction to The Fat Controller and his promotion as a marketeer, as well as in the case of Richard, who finds himself in a community of journalists who eagerly do drugs, although this does not trigger their creativity and they keep on “writing articles about articles”. Any approach aimed at providing clear-cut judgments and diagnoses is limiting, as it overlooks the possibility of the ambiguous relationships between madness and sanity and perceives the self as an originally rational and stable being. As Frosh writes, “just because I’m paranoid, it doesn’t mean that I’m not being persecuted” (1991, 126). Perhaps, this kind of uncertainty is the actual quintessence of the zeitgeist that Self is trying to capture—why his writing demonstrates the many connections between literature and social responsibility. As a British writer, Self employs a specific type of satire to express such a responsibility since, as he writes in one essay, “England has the world’s top satirical culture” (Self 2014, n.p.).
This chapter discusses the narrative identity of a person recovering from schizophrenia and its construction in the collaborative family memoir *Henry's Demons: Living with Schizophrenia, a Father and Son's Story* (2011) by Patrick and Henry Cockburn. The memoir consists of seventeen chapters: each represents Henry’s, his father Patrick’s, and his mother Jan’s own narratives. Each chapter is titled with the name of the narrator, so that there is no confusion or cacophony of voices—each episode of Henry’s illness and recovery is viewed from several perspectives that are intended to not mute or interrupt each other. The main objective of the chapter is to demonstrate how a person with schizophrenia may successfully construct his or her own narrative, preserving credibility and narrative agency. Among other objectives is to show how a collaborative narrative about mental illness provides the framework that embraces different perspectives, each being of a specific nature. Thus, I demonstrate Henry’s representation of schizophrenia as a “spiritual awakening” and Patrick’s chapters as providing a critical reflection on, on the one hand, psychiatric practices and institutions, and on the other hand, stigma and silencing that schizophrenia carries despite the fact that it is not the rarest illness. In this sense, the memoir tackles the problem of schizophrenia as one of the most stigmatized illnesses, which I will also discuss in Chapter 6.

Collaborative writing is a versatile production that is not easy to define. G. Thomas Couser writes that collaborative autobiography, in particular, “occupies an awkward position” (2001b, 222) since it is less established than traditional forms of biography or autobiography. Wyatt and Speedy, for example, mention that collaborative writing “utilizes cycles of talking, writing, reading and responding, seeking to find collective experience in the accounts of lived experiences” (2014, 52). It is interesting that the collaborators of *Henry's Demons* talk, read and respond to each other, indeed, as I will argue below, this dynamic process helps each of them transform and change their own perspectives. On the one hand, collaborative narrative of mental illness reduces the alienation of the person with schizophrenia by giving them voice while, on the other hand, it enlightens the reader about the human qualities of mental illness. I will, however, also examine some problematic issues or dangers that a collaborative narrative may entail. In *Henry’s Demons* these are linked with Patrick’s editing work and his “appropriation” of the narratives of
others. Wyatt and Speedy use an interesting concept to approach a similar problem: they speak about a dispersed self, that is, a situation when in a collaborative narrative “the identifiable individual” is lost “within the edited text” (2014, 53). It is noteworthy that the memoir and the overall collaborative work were highly appreciated by critics. However, I emphasize that the seventeen chapters of the memoir are not equally shared between the contributors: the majority (ten) are written by Patrick, five are written by Henry, one is jointly written by Patrick and Henry, and only one features Henry’s mother’s diary. Moreover, the diary is not given a chapter of its own—it is a joint chapter by Patrick and Jan, with the extracts from her diary framed with Patrick’s commentaries. Thus, 11 chapters in total are written by Patrick, but not a single whole chapter by Jan. Thus, a problematic issue is the amount of editing that each chapter written by Henry and Jan receives or may have received from Patrick’s side. Issues of positioning and hierarchy thus arise and the number of voices can be questioned: although there are three narrators in the memoir, how many voices, in fact, are there? I refer to G. Thomas Couser’s concept of “vulnerable subjects” in my analysis of Henry’s chapters and Jan’s diary. To question the autonomy and authenticity of Jan’s diary I also turn to the discussion of a diary as a type of writing that belongs to the gendered genres. While a diary is generally thought to be a realm of a private, non-edited and non-polished “feminine” and “female” (and by some even “feminist”) writing, Jan’s diary seems to be far from this representation.

The current tendency among many scholars (Baldwin 2005; Charon 2006; Mehl-Madrona 2007; Morris 2008; Prendergast 2008; Wood 2013) is to oppose the pure biomedical approach towards treating mental illness. The role of narratives in medicine has, instead, gained focus (the role of the medical humanities is discussed in more detail in Chapter 1). The narrative approach does not, however, reject scientific methods or claim, drawing on the “postmodern condition” and incredulity, that all knowledge is relative. Such a critique of narrative medicine and the medical humanities is provided, for example, by O’Mahony, who speaks of the “anti-scientism” of narratology (O’Mahony 2013). Similar accusations of relativism have been brought against post-structuralism and deconstruction. What narrative medicine proposes in reality, though, is to “challenge the false binary of knowledge that is soft or hard ... [and] rethink the concept of a knowledge that is neither purely objective nor purely subjective but, impurely and pragmatically, intersubjective” (Morris 2008, 90). The same challenging of the binary and classificatory approach is common in post-structuralism. Knowledge, thus, is not relative and narratives are not divided into objective or subjective, rather, all of them are constructed and, therefore, not only depend on the narrator’s identity but also represent it. As I argue in Chapter 3, the “truth” of experiences and narratives is mediated not solely by language but also by the constructedness and discontinuity of the teller’s identity through time. The identity is involved,
consciously or unconsciously, in social regulation and cannot be considered as a stable unchanging unit.

Paul Eakin mentions that “our life stories are not merely about us but in an inescapable and profound way are us” (2008, x). Perri Klass (MD) also highlights the idea: “Every person is a story”, she writes, “every patient is a story” (1992, 323). What follows from this is not just the fact that the narratives possess aesthetic value (as bioethicist Tod Chambers claims, there are “no artless narrations” [1996, 25]). Apart from their aesthetic nature, individual narratives are of the same dynamic nature as identities. For that reason, such stories are different from medical facts—and far more revealing. Lennard Davis points out that “disabled bodies are, in the current imaginary, constructed as fixed identities” (2013, 7), and I would add that there is a tendency to apply the same to those with mental illness. Davis uses the term “fixed identity” here to indicate that despite the popular idea of diversity and free personal choice, the identity defined by medical diagnosis appears to be fixed and abjected. Davis also implies that one believes that when something is determined medically it is not constructed socially. But if it has nothing to do with society, its norms and acceptability, how can it be abjected, otherted or feared? Moreover, such an assumption is challenged when we turn to the notion of narrative identity: “We are embedded in a narrative identity system […] our social arrangements […] assume that we all have narrative identities” (Eakin 2008, 16). The narrative identity that the reader can see in the personal narratives of those with mental illnesses becomes the main challenge to a “fixed identity”: once diagnosed—forever determining.

Personal narratives differ drastically from the ones represented in the DSM Casebook (for examples see Wood 2004) or so-called doctors’ stories—“tales of cure that feature physicians as heroes in the scientific conquest of disease” (Morris 2008, 93). Firstly, the most important difference from the casebook lies in the fact that “the psychiatrist […] attempts to create an ordered, diagnosable schema from presented disorder” (Baker et al. 2010, 27). As a result, such an approach may lead to ignoring the “shadow narratives” (in Wood’s terms) and leaving behind the crucial idea of a personal narrative. The idea is “describing his or her experience from within madness” (Stone 2004, 18; original emphasis), when madness cannot allow “an appearance in the order of reason” (Foucault 1988, 107) because in this case it will not represent its true nature anymore. Secondly, the most important difference from the doctor’s story lies in the idea of giving voice to the person with mental illness him- or herself. This is the only way to get a “valuable representation of the inside of madness” (Baker et al. 2010, 27). This perspective is also crucial due to its empathic foundation: readers “are able to know ‘the alien self’, [in Jauss’s terms] as it were, from the inside” (Sklar 2013, 69; original emphasis).

Thus, personal narratives represent not only a means of recovery and self-expression for patients, but are also a great tool for practitioners as a story that deals with the lived-experience and calls for empathy. The story allows physicians
“to see beyond their own terministic screens” and “are also valuable reading for patients grappling with their own illnesses” (Kleppe 2006, 48). Both writing and reading his own story appears to be beneficial for Henry. Eventually, “it allows readers to inhabit the spaces and lives of the people described, shrinking the distance between the reader and the world evoked in the text” (Kleppe 2006, 46), “move from the study of symptoms and differential diagnoses into the experiential realms of identity, relationships, recovery, and hope” (Woesner and Kidd 2013, 45).

At the beginning of this chapter, I emphasized the importance of the role that narrative medicine plays in approaching mental illness and stories about it. Following from this, the first section of this chapter will show how *Henry’s Demons* as a collaborative life narrative works towards the main goals of narrative medicine, among which are giving voice to the patient, evoking empathy in the reader and reducing ignorance about schizophrenia. In the subsequent sections, I will show how different Henry’s, Patrick’s and Jan’s narratives are. Henry’s first-hand experience is spiritually charged and brings forward the questions of coherence and credibility. Patrick’s perspective is critical and reasonable: without any previous knowledge of schizophrenia, Patrick learns and explains in his chapters why ignorance about the mentally ill makes them alien and frightening to laypeople. Concerning Patrick’s perspective, I will discuss the two stereotypes that underlie this fear and ignorance—the clear-cut binary division into norm and deviance and the authority of the biomedical model of treating mental illness. Jan’s daily diary is, perhaps, the most challenging to analyse: it is supposed to be illustrative of the perspective of the caregiver, who faces the dilemma of constant anxiety concerning Henry’s wellbeing and the need to move forward with her own life, yet the complexities of the collaborative narrative are evident. In conclusion, I will sum up how Henry’s and Jan’s narratives, as well as Patrick’s insightful analysis of how schizophrenia is usually approached, provide a miscellaneous and useful account of encountering mental illness that, on the one hand, can help reduce stigmatization and the “othering” of people with schizophrenia, and, on the other hand, opens the space of questioning concerning the issue of collaboration. By addressing the notion of stigma, the memoir helps to challenge the idea of the “morality” of the norm, that is, the norm as a moral-based category, as discussed in the theoretical chapter.

5.1 A COLLABORATIVE NARRATIVE OF MENTAL ILLNESS

Paul Eakin claims that he is sure “we don’t [...] read autobiographies in the same way that we read novels. Readers take it seriously when autobiographies claim to be based in some sense on biographical and historical fact” (Eakin 2008, x). This is even more so when considering personal narratives of mental illness. The reason for this is the challenge that an authentic experience represents in this case. Thus, as Patrick Cockburn mentions in the preface to the memoir: “I do not believe that
somebody who does not have schizophrenia, or has recovered from it, can fully understand and describe what it is like for somebody who still has it” (16).21 As one who has experienced and not yet fully recovered from schizophrenia, Henry, according to his father’s words, has the opportunity and the right to say the unsayable: “madness”; that is, what Derrida refers to as “what by essence cannot be said” (Derrida 2005, 51). In other words, he is able to shape his experience of madness in such a way that it is authentic and still approachable by the reader. When Patrick mentions that Henry was “well enough to write but not so distant from his psychosis” (16), it already implies that Henry’s is not a fixed identity but rather continuous. Galen Strawson brings up a notion of “discontinuous identity” and claims that “he cannot access previous identity states; he cannot reexperience or rehabit them” (Eakin 2008, 9). In Chapter 3, I addressed the problem of the lack of self-transparency when a person tries to recover his or her memories. In Henry’s case the work of “excavating” his memories is facilitated, at least, by the fact that he does not actually need to “reexperience” them, because they have not yet “become ancient history in his own mind” (16), as his father claims. However, due to the amount of editing that the narrative is likely to have been subjected to, the reader may still have cause to question the “truth” of the experiences presented in it.

Patrick also adds that “he [Henry] was ideally placed to write from the inside about what it was like to have an acute mental illness” (16; original emphasis)—an idea that echoes the above-quoted Brendan Stone’s words about “experience from within madness” (2004, 18; original emphasis). In the preface, Patrick points out that “the mental world in which he [Henry] had been living was so different from my own that his first-hand testimony alone could convey what it is like to hear voices and see visions” (15). The sheer difference of the mental world of a person with schizophrenia can make their experience unspeakable for the narrator and unimaginable for the reader. In order to grasp such an experience, the reader needs what Sklar calls “points of access” (2013, 73) to get an empathic and “imaginative reconstruction of another person’s experience” (Nussbaum 2001, 301-2). The memoir I discuss here, a collaborative life narrative with the challenges and advantages that it entails, serves as a unique benchmark for such imaginative reconstruction.

In her article on collaborative narratives Stella Bolaki links them to autobiographical works, even though she notes that they might “transcend fixed generic boundaries” (2014, 90). She also gives a concise definition of illness narratives that also works for the current study: she writes that collaborative illness narratives

(explore and explode the opposition between health and illness; force us to confront the often disavowed realities of disability, aging, and death, and can be used to foster new practices of witnessing and caring for others. (ibid.))

21 All quotes are from the ePub version of the book.
The opposition is blurred indeed: for example, in *Henry’s Demons* the reader can clearly see that Henry is capable of writing and has lost none of his humanity.\(^{22}\) Henry cannot be called “impenetrable” for the reader, even though the latter has not experienced schizophrenia him- or herself: “The fact that we can recognize suffering without necessarily having experienced the particular suffering of a given individual (or character) effectively provides us with ways of identifying” (Sklar 2013, 74). Moreover, these ways of identifying with the disabled other in turn enable us to “confront the disavowed realities of disability”. As readers we can hear Henry’s actual voice, which is not muted—because the collaborative narrative is written together with Henry and not about him. Ralph Savarese expresses this idea while talking about people with autism: “Instead of writing exclusively ‘about’ autistics, let’s imagine writing ‘with’ them—even if that ‘with’ is simply a matter of engaging their words” (Savarese and Zunshine 2014, 34). He adds that in his 12-year-old son’s chapter for the *Reasonable People: A Memoir of Autism and Adoption* (2007) his son told him “all sorts of things that [he] got wrong” (ibid.). As the co-author of the collaborative memoir, Patrick also notes that “what he [Henry] wrote was also full of surprises for me, though I thought I knew him so well, showing that only somebody suffering from this strange and terrible illness can describe what it is really like” (17). That such surprises emerge is the greatest advantage of the collaborative life narrative and attentive listening to the voice of the person with mental illness. The multiplicity of perspectives demonstrates that people’s experiences of mental illness are far from identical; they differ for each person in Henry’s family, and also for the readers. In discussing the memoir, Bolaki says that “the book does not take sides […] but illuminates both Henry’s and Patrick’s predicament” (2014, 91) and that the “double perspective sustains a dialogue about understandings of mental illness” (ibid., 92). I would argue that the perspective is not actually “double” here but rather triple at the very least, as Jan’s perspective is no less important. I will discuss the complications concerning Jan’s diary below in more detail.

As mentioned previously, collaborative narratives also present certain challenges regarding people that Couser refers to as “vulnerable subjects”, namely children, people with physical or mental impairment, and women in patriarchal society (2004). Couser writes that vulnerable subjects are “encouraged to rely wholly on trust in their collaborators” and at the same time “are likely to have their autonomy violated” (ibid., 17; 23). He gives the example of John Bayley’s *Elegy for Iris* (1998), which deals with Iris Murdoch’s dementia. Couser does not reject the respect with which Bayley tells the story, yet notes that he might “take a great liberty” with his wife’s story and, therefore, Couser finds her a vulnerable subject as she may be subject to “misrepresentation in her husband’s writing” because her

\(^{22}\) On the concept of “humanity” and “countering this perceived impenetrability by insisting on the humanity, if unreachability, of those living with schizophrenia” see, for example, Wood (2013) or Pro-sandeeva (2017a).
impairment “deprives her of capacity to take part” in this representation (ibid., x). Henry and Jan in Henry’s Demons can be seen as vulnerable as well: Henry as a person with mental issues and Jan as a woman.

Since the memoir is presented as collaborative, it differs from those told solely by relatives or practitioners about people with mental illness, even though these may refer to the person’s own words. Being very insightful and supportive, such narratives tend to focus more on the experiences of the caregivers, who talk about the sufferer in the third person. Being collaborative, Henry’s Demons provides both. The specific challenge here concerns so-called “coaxing” that occurs in “doubled autobiographical narratives”: “Coaxing is an integral part of the life-writing process when more than one person is directly involved in producing the story” (Smith and Watson 2001, 53). Smith and Watson also note that genuinely “credible” (2001, 56) narratives occur at certain sites—in Henry’s case he refers his narrative not only to the context of his family but also to the site of mental institutions. In the case of a family narrative, however, there is generally a “specific coaxer” (ibid.). In the preface to Henry’s Demons Patrick appears to confirm this idea: “It took a lot of coaxing and encouragement to get him [Henry] to write” (17), “I ran my idea for the book past him, and he liked it” (16). In the context of narrative medicine, it is widely accepted that telling stories and writing them down may trigger the process of recovering (Diedrich 2001; Prendergast 2008; Wood 2013) and Patrick admits that “working on the book appeared to give him [Henry] a sense of purpose and accomplishment” (230). While I admit the curing (for the sufferer) and illuminating (for the reader) role of the collaborative narrative, Smith and Watson note that sometimes “the roles of a coaxer in assembling a life narrative can be more coercive than collaborative” (2001, 55). Mainly, this happens due to editorial control “presented in the name of preserving the voice, the experience, and the culture of the life narrator” (ibid.). In this case, Patrick has the full editorial control; he writes the preface and seems to frame the whole memoir, thus leaving an impression of having the authority. Moreover, his being a well-known journalist gives him some status, as he mentions: “He [Henry] knew everything about what it is like to have a mental illness and to live in mental hospitals for years. My profession was writing […] Why not combine these strengths” (229).

In his essay on collaborative autobiography, Couser deals mainly with the ethical issues of such narratives. The most crucial imperative, he writes, should be the mutually beneficial nature of the narrative, however, there are “thin and not always clear lines between making, taking, and faking the life of another person” as “coauthoring can be a creative or a destructive act” (2004, 36). The imbalance of power brings in the notion of hierarchy and Couser compares a collaborative memoir to a marriage, saying that these narratives “are rather like marriages and other domestic partnerships” (ibid., 35). This remark is spot-on in the Cockburns’

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23 See, for example, Randye Kaye’s Ben Behind His Voices (2011) or Jay Neugeboren’s Imagining Robert: My Brother, Madness, and Survival: A Memoir (1997).
case: it points, again, at the differentiation of roles, points of authority and equity in such a partnership. The question of authority is clearly closely tied to that of responsibility: the great authority presupposes a large portion of responsibility over those under control. While Couser underscores the question of responsibility to those whose lives are used as “material”, I would broaden the matter in the case of the Cockburns’ memoir as the “models” also speak there themselves: what is the “writer’s” responsibility towards other speakers in a collaborative narrative? This narrative is special in the sense that it contains the features of both biography and autobiography, and the features intermingle in various ways, often blurring the distinction between those who speak. This blurring is induced by one key factor: all three contributors to the memoir are writers as much as they are readers. When they write, they do so taking into account what the others write and what they have read, whether they like it or not and whether they are aware of it or not. This is a distinctive feature of the collaborative memoir that cuts both ways: it both informs the readers and the writers and, to some extent, limits them, thus revealing once again the relative nature of writing. Even Patrick himself, as a “writer”, the editor and the one in control, is affected by what he reads and finds out and, simultaneously, by what he writes in his chapters. Patrick discovers things that he did not know about his son only from Henry’s writing (one example being Henry’s smoking much more pot than Patrick knew or could have imagined—an important fact in the context of Henry’s illness as it is known that marijuana can trigger the development of schizophrenia if there is an inherent predisposition) and Patrick mentions these things in his own writing.

In defence of Patrick’s somewhat authoritative stance, I must say that, first, Henry’s, Patrick’s and Jan’s narratives are drastically different, bringing forward different anxieties and challenges that they had to live through. Second, we should admit that without Patrick’s professional framework the memoir might have been less approachable and not as rich as it came to be. Henry’s being “not so distant from his psychosis” (16) is invaluable if we consider the voice “from within”, but not facilitative if we consider critical reflection on the lived experience. As a collaborative family memoir Henry’s Demons provides those and also Jan’s perspective as a caregiving mother. In the following sections I will discuss the special features of all three family members’ perspectives in detail.

5.2 HENRY’S VOICE – A SPIRITUAL AWAKENING

There are many reasons for a person with mental illness to write a collaborative narrative of their experience, and for others to read it: writing gives the sufferer not just a voice but also a sense of achievement; it provides a means of critically assessing the origins of schizophrenia and mental illness in general, reasons for stigmatization, and psychiatric practice in general. The main reason for reading the narrative is best explained by Patrick in the preface: “I believed that Henry and I
could serve a broader public purpose by making schizophrenia and mental illness in general less of a mystery which people are embarrassed to discuss” (15).

Henry’s chapters in the Henry’s Demons memoir have a specifically disarming nature. Henry’s very sincere way of describing his first-hand experiences makes it easy for the reader to empathize with the narrator. In Carl Rogers’s terms, Henry “drops facades and becomes authentically who he is”. Consequently, the “capacity for empathy” on the reader’s side is revealed through authentic and “genuine communication” (Brinich 2002, 92). Rogers’s ideas as the founder of the humanistic approach in psychology are relevant to my interpretation, as the narrative approach is, in theory, “fundamentally supportive of a person-centered approach to psychiatric care” (Baldwin 2005, 1028). Patrick’s provision of a framework for Henry’s writing brings even more credibility to Henry’s narrative. It is his father who notes that “he [Henry] was highly educated and had done well on school exams, though these were often preceded by spasms of doubt about his own abilities” (17). This fact in a way opposes the stereotype of a person with schizophrenia as someone “out of control, dangerous, retarded, homeless, almost a non-person” (Miller and Mason 2005, 214). The high level of Henry’s education and his aspiration for doing arts make Henry even more identifiable to the reader as they can emphasize with him and thus see Henry’s “reality as a possibility for their own” (Noddings 2003, 14). Furthermore, Henry’s interest in art highly influences the nature of his condition and his narrative. Henry’s narrative is highly personal and intense, he maintains his narrative agency and is certainly not “narratively dispossessed” (in Baldwin’s terms). Moreover, the memoir includes Henry’s own drawings and mentions his music studies, all of which as “non-discursive expressions” (Baldwin 2005, 1026) can be read narratively.

After being first diagnosed with schizophrenia at the age of twenty, Henry started to take an interest in the bond between madness and genius. Jan noted that once during their talk about his illness, Henry said “wryly that being an art student seems likely to leave you in a mental hospital—several other people he knows there are ex-art students, or else musicians” (152). Henry also mentions his talk with a friend called Luke “about Virginia Woolf and how she had gone mad”: “He [Luke] said the line was thin between creative genius and insanity” (106-107). Henry does find sense in such assumptions and feels that he is one of those geniuses and mad artists:

> At Brighton during that first term, my painting had become circular, and I was trying to break away from that. A few weeks later, I was in Ireland, where I picked up a copy of a book on Jackson Pollock. It said he was possessed by daemons, and when an artist starts drawing circles, it is the first sign of madness. […] I saw myself as a direct descendant of artists from Basquiat to Picasso. (54)
Such a bond between madness and genius is a much scrutinized topic among philosophers, literary theorists and postmodern writers (Baudrillard 2002; Deleuze and Guattari 1983; During 1992; Felman 2003; Foucault 1988; Jameson 1991). As I quoted from Ballard’s *Super-Cannes* in the literature review section of Chapter 1, “in a totally sane society, madness is the only freedom” (2001, ch. 29). Dwelling on Foucault’s idea of madness disappearing when expressed in written form (Foucault 2006), During claims that “personal madnesses swallow their lives”, being the “constant threat of their moment of collapse” but also “grant those works their force of contestation and prestige” (During 1992, 40). The names Artaud, Nietzsche and de Sade seem to be the most frequently mentioned when talking about art and madness, becoming “model schizophrenics” (Prendergast 2008, 58). I discuss Artaud’s madness and its relation to Deleuze and Guattari’s “schizophrenic hero” in Chapters 3 and 4. In Chapter 3 I mentioned the possibility of an art discourse that cherishes mental illness as a prerequisite of genius and that this might have influenced Henry’s attitude to himself and his illness. As Foucault notes of artistry and madness, “to express this experience requires […] artistry—the fury of a poet like Artaud” (Miller 1993, 107). This artistry and madness discourse might have also influenced the nature of the voices Henry hears. Scholars claim that we can “understand the meaning of voices through the person’s life history and spiritual belief system” (Thomas et al. 2004, 15), which means that the sociocultural context in which a person who hears voices lives is important to consider.

Schizophrenia and its creative power is often exploited as a “metaphor for contemporary experience” of being in a “fragmentary, deconstructed state” (Frosh 1991, 13), which provides patterns of thinking akin to those of a person with schizophrenia. The same can be said about postmodern literature, being much concerned with drugs and hallucinations as “an integral part of notions of reality and simulation” (Baker et al. 2010, 172). The idea of the creative power of schizophrenia is also favoured by the antipsychiatry movement, which I will discuss in detail in the section on Patrick’s perspective. However, I would like to pick up on Catherine Prendergast’s observation that a solely metaphorical approach towards schizophrenia that is “always/already artistic” (2008, 58) can be entrapping, thus, we need to shift the focus towards examining “the circumstances of publication of schizophrenic writing” (2008, 58). The publication of schizophrenic writing and the analysis of the context in which such writing occurs may facilitate the self-identification of people with schizophrenia, which, in turn, would serve to reduce ignorance and alienation. Certainly, *Henry’s Demons* provides an example of such writing that not only depicts Henry’s belief in his own mediumism and chosenness, but also situates the whole memoir within the context of psychiatric practice and social environment. Henry’s real auditory or visual hallucinations are not directly drug-induced and are thus not metaphorical. Patrick notes that “though when we spoke of hallucinations, he [Henry] objected to the word, since to him they remain genuine events” (16). Henry does admit that he used to smoke
cannabis a lot while at college: “Looking back, I spent most of my time at college in
a stoned, drunken haze. I took a lot of marijuana between the ages of fourteen and
nineteen [...] it would have been better if I hadn’t” (55). He gives it up as his
interests in the spiritual world follow a different route: “I did not see many people,
was often by myself, gave up smoking cannabis and cigarettes, became a vegan,
and took to walking around barefoot. I had been drinking a lot during my first
term, mostly beer” (55). However, when Patrick tried to find reasons for Henry’s
illness, he found out that drugs could boost the development of schizophrenia if
there was an inherent disposition for it (Baigent et al. 1995; Hambrecht and Häfner
2000).

Despite Henry’s assigning himself to the mad artists, he does not believe that he
is himself ill or mad. He says he “didn’t think of it as an illness but as awakening, a
spiritual awakening. I thought there was another side to the world I hadn’t seen
before” (48). Couser notes that the rhetoric of spiritual compensation is often used
in narratives of disability (2001a, 81). According to this thinking, people with
disabilities or mental illness often find a certain “purpose” in their disability or
illness, or feel that there is a certain mission that is assigned to them by God. While
some might aspire to be “better Christians” (Couser 2001a, 83), Henry was more
interested in Buddhism. Henry’s obsession with circles and rings also seemed to
him a part of this unseen world: “Usually, I see rings, like the rings you see in a
jewellery shop. Every hollow in a tree, every piece of ivy, all look like they’re
turning into rings” (187). Once it occurred to Henry that he should go to the shop
and buy a ring for the girl he had met once but who later abandoned him. The
journey to the shop turned into a frightful adventure that reflected Henry’s
experience of reading a J. R. R. Tolkien novel: “I was being tricked into finding the
dark ring of Sauron, the demonic overlord in Tolkien’s The Lord of the Rings, and
that I myself was evil. [...] I thought I was Gollum, also from The Lord of the Rings,
that I was a sinner and was subservient to the dark ring” (190). Henry refused to
take his medicine for a long time and devised many manoeuvres to avoid taking it.
He explains: “I won’t take it because there is nothing wrong with me” (42), “I
would put the tablets between my lip and my front teeth and pretend to swallow
them. I was suspicious of the tablets [...] I wanted to live life to the fullest and felt
that taking the medication would hinder me” (191). Henry was dead sure that his
“spiritual awakening” is what makes him outstanding and different from anyone
else, but no one can truly understand it as he is the only one awakened: “I think I
just see the world differently from other people, and maybe if psychiatrists
understood this, I would not have been in the hospital” (61). Physicians had little
credibility in Henry’s view, as he describes in one episode: “I met a kid at the bus
stop who couldn’t have been older than thirteen or fourteen. I gave him a piece of
advice: ‘If you ever meet a psychiatrist, don’t confess to anything’” (193).

Henry’s belief in a spiritual awakening led him into meditation and had his first
vision sitting in the lotus position, after which he climbed up an embankment
thinking that the Hanging Gardens of Babylon were there: “It was only for a few
seconds, but I saw two birds fly across each other, and where they crossed, I saw a
golden Buddha in the sky” (55). Henry perceives every voice he hears and
hallucination he sees as a mystical experience that makes him feel in charge,
responsible for the “mission” (57) he believes he is on. Anything begins to have
mystical significance for him—for example, Henry becomes obsessed with letters:
“You know fire hydrants are yellow and have an H on them. I thought the H stood
for Henry” (57), “I tried to counteract the olanzapine with tobacco by smoking lots
of cigarettes because the word began with O and ‘tobacco’ ended with the same
letter” (60). It is noteworthy that Henry finally admits to not being fully well only
after conversations with his former yoga teacher whose opinion, taking into
account the spiritual nature of yoga, was weighty and authoritative for Henry.
Moreover, Henry’s experiences of seeing rings everywhere gradually became
unbearable to him and he felt that avoiding his pills was leading him not only into
the unseen spiritual world, but also to dire torment: “Not a moment’s pause; rings
everywhere. I get this feeling of inner torment that I am a sinner and that I will die
or be physically tortured” (187). Thus, while Couser speaks in his essay about a
woman who finds solace in her sainthood and criticizes the rhetoric of spiritual
compensation that does not help to remove the stigma from mental illness or
disability (2001a, 83), Henry’s spiritual experiences seem to be more complex. He
does not become a religious fanatic and, even though he still felt he was on a
mission, his spiritual interests finally helped him to overcome the crisis and
contribute to the destigmatization of schizophrenia.

Having a grip on his narrative agency, Henry constructs his narrative in the way
he feels most appropriate for himself—as a person with schizophrenia he believes
that everything he hears or believes in is an undeniable truth and he does not
hesitate to express this in his own narrative. In Chapter 4, I have discussed Louis
Sass’s and other psychiatrists’ views on the “illumination” and feeling of being
“closer to truth” that schizophrenia often entails. Another remarkable case of being
spiritually awakened is that of Paul Schreber discussed in the literature review.
Mary Elene Wood, the author of Life Writing and Schizophrenia (2013), gives a
dialogue with her mother diagnosed with schizophrenia: “When I asked her, ‘But
were you confused at the time?’ she would reply, after a brief hesitation, again with
that faraway look, ‘No, I thought it was all real’” (Wood 2013, 310). Like Wood’s
mother, Henry puts full trust in his experiences and describes them in a credible
way in his chapters, thus reclaiming authority. Patrick and Jan try to find the best
hospital for Henry that would manage to keep him safe from running away (which
he did tens of times) but still would not oppress him. Henry proves himself to be
fully conscious and understanding when he says that “a mental hospital is not a
prison or even a police cell, but at night, when you look at the wall, they seem the
same” (145) or when he agrees to taking medicine to comfort his mother when Jan,
being desperate, bursts into tears. Deep inside Henry understands that hospital,
although prison-like, keeps him safe from himself, but then he makes a rather insightful and reasoned comment: “Being locked up for so long really damages your spirits” (61). He is also aware of a certain degree of stigmatization that surrounds schizophrenia: “When people hear about a psychotic episode, they probably relate the word “psycho” to someone with violent tendencies. I would not describe myself as violent” (61). As a rule, stigma separates people into “us” and “them”, thus, those with schizophrenia “appear to be a completely different sort of people” (Link and Phelan 2001), which additionally leads to “self-stigma” (Rüscht et al. 2005). A person with schizophrenia thus becomes a deviant, their identity carrying all the connotations that are ascribed to deviant groups by society, as discussed in section 2.4, including moral condemnation.

Henry used to ask Patrick if he thought Henry was a “failure” (228). In other words, he experienced feelings of guilt and shame that appear to be common in schizophrenia (see also my discussion of guilt and shame and their relation to schizophrenia as presented in Filer’s novel in Chapter 6). However, in Filer’s case guilt seems to be one of the triggers of schizophrenia, whereas in Henry’s case guilt is rather a consequence of his developing the illness. Henry says: “I was full of guilt that I was a closet gay, a racist, and generally evil. I would say irrational things like ‘Does God believe in me?’ and think I was being evil by the way I phrased it” (189). Self-stigmatized Henry is certainly guilt-ridden and his guilt takes the “form of sadistic self-criticism that leads to the formation of destructive fantasy introjects” (Levin 1997). Patrick describes a situation when Juan-Carlos, his and Henry’s journalist-friend, shot himself, while being drunk. Patrick was not sure if he had the right to tell Henry about it or not. Finally, he told the story and “Henry said that he felt he had not done enough to save JC by steering him away from drink and drugs” (94). Patrick knew that “excessive and irrational guilt seemed to be part of Henry’s illness, and for the next few years he kept telling me that he blamed himself for the death of Juan Carlos” (94). Scholars have noted that “patients may also feel guilty because they believe they caused their illness by substance abuse before illness onset”, which may also be the case with Henry, though “it is not clear yet whether substances can trigger schizophrenia” (Miller and Mason 2005, 218).

It may be supposed that those “introjects” are tightly connected with the voices that Henry hears, as clinical psychologist Robert Firestone, who has written substantially on psychological defences and schizophrenia, notes: “The voice represents the introjected negative thoughts and hostile attitudes” (1987, 210) and “may be conceptualized as the language of one’s guilt feelings and self-attack” (1987, 219). Henry explained that his “main reason for escaping was that the trees were calling him and he had to do it” (146). Echoing the scholar’s reasoning, Patrick mentions that “people with schizophrenia really do hear voices, but they are a misdirection of the ‘inner speech’” and “such speech is made up of verbalized but unexpressed thoughts, imaginary conversations and arguments, bits of dialogue which are never spoken” (122).
It is of particular importance that the voices that people diagnosed with schizophrenia hear are “meaningful” (Thomas et al. 2004, 22). Patrick knows that Henry “was drawn to run away by the voices of trees and bushes” and he supposes that what the voices told him “reflected his own rebellious spirit and hatred for being confined” (180). Patrick’s findings are confirmed by scholars in neuroscience who study the sources of voices in schizophrenia (I have discussed the theories at length in Chapter 4). In short, in schizophrenia internal events can be misattributed to external sources (Lakeman 2001). This produces the impression of voices coming from outside and, therefore, the voices are not perceived as delusions but as actual entities. As far as following the orders of voices is concerned, as Junginger writes, it is common for people with schizophrenia to perceive their voices as authoritative (1995). The different nature of voices opens a possibility that hearing voices may signal whether a person is able or unable to cope with and integrate “puzzling and distressing experiences within his or her life” (Thomas et al. 2004, 22).

In this section, I have discussed the part of the collaborative life narrative that belongs to Henry and carries a very transparent, authentic and credible character. Henry’s first-hand experience of living through schizophrenia provides the reader with a trustworthy perspective that enlightens the reader on the nature of the illness. Henry describes his auditory and visual hallucinations as a spiritual awakening and as genuine events because he perceives them as such. Henry’s sincere narrative inevitably brings up the notions of stigma and self-stigma. However, Henry’s accepting his father’s idea of writing a memoir helps him to resist self-stigma and guilt. The writing gives Henry hope and a feeling of worthiness. He also cares for his mother and younger brother and listens to the advice of his friend—a yoga teacher. Thus, the care of family and friends (the discussed collaborative memoir being a part of it) helps Henry to admit his illness and recover. Jay Neugeboren, considering the question of why medicine can work one day and be useless the next day, asked people recovering from mental illness what the reason for this might be: “In all instances, they said that the key had been a relationship—the presence in their lives of somebody—professional, family, or friend—who believed in them, who talked with them, and who was committed to staying with them for the duration” (2008, 144). Henry fights stigmatization by asserting his humanity and proving that he is capable of constructing his own narrative. Henry presents his own perspective on the experience of the illness, and this ought to be taken into account by society when constructing its idea of the norm. Henry’s caregivers, in their turn, help him to overcome the self-stigma. I devote the next section to analysing the perspectives of Henry’s caregiver and “editor”—Patrick.
5.3 PATRICK’S VOICE – A CRITICAL REFLECTION

I have previously noted that Patrick’s contribution to the collaborative memoir is substantial. He does not only tell what he has experienced as Henry’s father, but, what is even more crucial, he provides a critical framework for the events described. At the beginning of the memoir Patrick admits that “the word ‘schizophrenia’ did not mean much to [him], since [he] knew almost nothing about the illness except that it did not mean having split personality” (37). Thus, Patrick introduces himself to the reader as a layperson who had no particular knowledge of psychiatry before encountering it himself. However, it must be noted that the ability to distinguish between schizophrenia and split personality does credit to Patrick, since all of the other characters and real narrators mentioned in this study—including Nathan Filer and Matthew, the narrator of his novel The Shock of the Fall, Lori Schiller and her mother, Elyn Saks, and also Henry Cockburn—encountered certain difficulties with the terms. The general lack of even basic knowledge concerning mental illness often leads to fear, stigmatization and moral condemnation of those with schizophrenia: “Until Henry became ill, I knew little about madness: Like so many other people, I found it frightening and alien” (89). In his article, Longmore investigates how people with disabilities are represented on television and states: “What we fear, we often stigmatize and shun and sometimes seek to destroy” (1987, 66). In carrying out his own research on schizophrenia, Patrick also discovers that

in the UK, more than one in three people think that those with schizophrenia will be violent, according to an opinion poll by YouGov. In reports on television news and in films, the typical schizophrenic often comes across as a Jekyll-and-Hyde figure, outwardly harmless and normal but in reality dangerous and mad. (116)

The allusion to Jekyll and Hyde that Patrick evokes here is significant since the image refers the reader or the TV viewer, once again, to the problem of split personality, not schizophrenia. The “outward harmlessness” mentioned by Patrick is a characteristic strongly attributed to the figure of a schizophrenic: one that, for the lay person who fears the unknown, serves the function of a mask, an uncanny disguise. However, if there is a mask, it is the one that barely, if at all, disguises violent intent:

People with schizophrenia are periodically demonized as potentially violent by television and newspapers, but the sad reality is that their violence is directed mostly towards themselves. [...] The mentally ill are not only feared but deemed, consciously and unconsciously, as not human in the fullest sense. Dehumanization opens the door to cruelty and disregard by the rest of society. (112)
When dehumanized, a person with schizophrenia becomes a human-other, where he or she is no longer perceived as a “normal” or adequate interactant, to use a sociological term. Therefore, the person can be denied the respectful attitude that a “normal” individual deserves in society, that is, they can be “disregarded” and dismissed as immoral. By encouraging Henry to write down his story, Patrick challenges the dehumanization he speaks of in the quote and, thus, allows Henry’s voice to be heard and become meaningful. Patrick sees that ignorance and fear form a vicious circle of stereotypes and are rooted in the idea of madness: “The ignorance of many of my generation about mental health was rooted in part in the traditional fear of madness” (46) and, thus, “fear of mental illness has fostered public ignorance” (118). Foucault, for example, states that “madness only exists in society” (Miller 1993, 98) meaning that it would not exist if it was not expelled or measured against the norm (as discussed in Chapter 2). I suppose that there are two strong beliefs that underlie this vicious circle of fear and ignorance: first, the belief in the binary structure of the norm and deviance and, second, the belief in the biomedical model of mental illness.

Narrative medicine opposes norm and deviance binary divisions, rejecting the distinction between “soft or hard” (Morris 2008, 90) knowledge. “Normalizing” (Davis 2013; Tremain 2005; Barnes, Mercer 2010) tendencies or those that are described by the term “healthism” (Skrabanek 1994) presuppose the dominance of a one-dimensional perspective that works towards a binary division of “us” and “them”. In Patrick’s case, when he encounters the illness as a father and analyses it as a journalist, he sees that the seemingly “deep divide between madness and normality” is “less solid” and that psychosis is not “an island of insanity cut off by deep channels from the normal and the sane”:

In reality, some 10 to 20 percent of the population occupies an intermediate zone between normality and psychosis. […] This intermediate stage is variously called schizotypal, schizoid, schizophrenia spectrum, or schizotaxic and is difficult to investigate because people fear that if they are too forthcoming about voices or exotic fears and suspicions, they will be seen as mad. (123)

It is noteworthy here that all of these terms from “schizotypal” to “schizotaxic” are narrowed down to “madness” in the public mind. While Henry’s experience is the first-hand authentic experience of having schizophrenia, Patrick speaks about his own first-hand experience of seeing a close person fighting the illness and realizing that there is no “complete sanity” or “total madness” (232). Moreover, Patrick finds that his encounter with mental illness is not a one-in-a-million case: “I found it astonishing that so many people I thought I knew well turned out to have close family members suffering from schizophrenia or bipolar disorder. I wondered why they had not spoken about it to me” (90). Considering the high impact of
stigmatization and the belief in binaries, it seems no wonder that none of Patrick’s acquaintances had mentioned anything to him before.

The second strong belief—that the biomedical model of treating mental illness is a panacea—is much discussed by scholars of narrative medicine and also outside the field (Baldwin 2005; Lewis 2006; Morris 2008; Rudnytsky and Charon 2008; Stone 2004; Wood 2013). The overall idea can be expressed by the assumption that “the focus on neurobiology could, in the eyes of the public, turn people with mental illness into ‘almost a different species’” (Mehta and Farina 1997). It is noteworthy that the “focus on neurobiology” or the biomedical model resorts to the same binaries of “us” and “them” that have been mentioned above. Scholars point out that a cancer sufferer remains one of “us” because cancer, in their understanding, does not shape the person’s fixed identity (Davis 2013). As I have suggested at the beginning of this chapter, although mental illness is not an “attribute”, a person becomes one of “them” (Rüscher et al. 2005, 530), one of a “different species”. As a proponent of narrative medicine, Rita Charon notes this “simplemindedness of biomedicine” that “has become paltry, limited, conceptually cramped” (Rudnytsky and Charon 2008, 25). She explains that patients “are being abandoned left and right, not because their doctors do not recognize their molecules but because they cannot apprehend their narratives” (ibid.). In Henry’s Demons Patrick answers the question of why such failure to “apprehend the narratives” hinders the process of recovering. Patrick empirically realizes that diagnoses can be extremely constructed and “artificial” as they represent only names of a “collection of symptoms observable at a certain moment in time”: “Critics of the psychiatric establishment, particularly in Europe, allege that its diagnoses—even the distinction between schizophrenia and bipolar disorder—are artificial constructs and do not correspond to verifiable categories” (118). Patrick notes that diagnoses of mental illnesses differ to a significant degree from those of physical illnesses and that the obvious explanation for this is that “the same individual may receive radically different diagnoses at different times” (120). To confirm his own first-hand observations, Patrick quotes Robin Murray, a knighted Scottish psychiatrist who majors in treating schizophrenia and bipolar disorder:

_It is not uncommon to see somebody who has been admitted to a hospital many times, and “maybe five times they had a diagnosis of schizophrenia, three times they had a diagnosis of schizoaffective disorder, and a couple of times they’ve had a diagnosis of bipolar disorder”. (121)_

The biomedical approach is opposed because of its firm belief in science, classification and the “hard” essence of psychiatric knowledge, despite the evidence that the divisions can be “arbitrary and inaccurate” (Lewis 2006, 78). As Lewis notes, “language divides the world through binary divisions, such as mental health versus mental illness” and, thus, it becomes “intelligible” (2006, 78). But these very
binaries represent the abovementioned “simplemindedness” which is, according to the narrative medicine scholars, opposed to the “fraught” process of “reading and writing of patients through narrative” (Wood 2004, 197).

However, when Patrick makes his own investigations into the history of dealing with schizophrenia, as he does not want to remain uninvolved, he realizes that the history of treating mental illness is challenging and controversial. Therefore, the relation between biomedicine and narrativity appears to be challenging as well. Thorough analysis and scrupulous reasoning distinguishes Patrick’s chapters because he does not jump to conclusions or take sides. He quotes Richard Bentall, a leading critic of the traditional approach: “The conventional approach to understanding madness is deeply flawed” (119). Patrick sees these flaws in the underestimation of the suffering of people and in the fact that they are often reduced “to poverty on the margins of society” (112). Moreover, the role of medication is often overestimated: “Jan and I felt that the very real benefits of medication had been overstated; while they muted the most dramatic symptoms of schizophrenia, they did not cure the underlying illness” (178).

Certainly, Patrick does not leave behind the discussion of talk therapy and the work of antipsychiatrists. In the context of narrative medicine and the medical humanities, scholars often mention how the “the work of the antipsychiatrists such as Laing, Cooper and Szasz, and more recently, movements such as the Hearing Voices Network, have sought to stretch or dissolve the rigid formulations of the narratives of mental illness constructed and imposed by Western biomedical orthodoxy” (Baldwin 2005, 1027). Patrick admits that Laing’s approach that favoured madness as a creative experience and listening to the patient’s own words as a way to a cure was “well ahead of his [Laing’s] time” (117). Thus, despite all the advantages of the approach, it in a way “discredited talk therapy” (117) and, thus, triggered the rise of full reliance on medication. It is important that Patrick presents in the memoir the first-hand experience of his acquaintance whose sister-in-law received treatment from one of Laing’s followers. This real story has been novelized as Anna by Laing’s brother under the pen name David Reed. The story goes that “she tried to battle through a severe psychosis—in other words, a prolonged bout of madness—without being hospitalized. One day in 1973, she poured petrol over herself and lit it, badly burning over three quarters of her body. It took her weeks to die in agony” (114). Patrick realizes that Anna’s husband’s decision to turn to talk therapy was not ungrounded: if she were hospitalized, she would receive nothing but electric shock treatment, of which there was “no verifiable scientific evidence that it benefited patients” (117). Contemporary psychiatric practice offers mental patients antipsychotic drugs without resorting to shock treatment, but now there is new extreme—the dominant belief in the curative effect of pharmaceuticals. Understanding the importance of all the good that medicine does for Henry’s recovery and all the controversies of talk therapy, Patrick still wanted him to see a psychotherapist as he realized that attention to his own “voice” buttressed by
medicine would help to understand the nature of his illness. Thus Patrick says: “We knew that in general terms, psychotherapy had been downgraded as a treatment in British and American mental hospitals over the previous twenty years and displaced by greater reliance on medication because the utility of such therapy was difficult to prove” (178). Patrick and Jan saw that they could not always rely solely on medicine: “We were never wholly sure what caused these relapses. It could not have been solely that he was secretly not taking his medication, because sometimes a relapse happened when he was receiving it by injection” (182). The reason for that could be generally described as self-stigma, as when “his mind stabilized, he could see all the more clearly the misery of his own situation, his life passing him while he was effectively imprisoned. […] he would then see himself as living in a world that thought him mad and in which he had no prospect of happiness” (182).

Patrick realizes how destructing the stigma of hospitalization can be, but at the same time he knows that Henry apparently needs “expensive special treatment and facilities” (207). This realization leads Patrick to conduct an investigation into so-called “care in the community”. The general idea of the reform was to close down big asylums and make people with mental illnesses receive treatment at their own homes or outpatient clinics. Yet, the results of the reform in Europe and in the USA were devastating: as Hadley and Clough state in their book with a telling title Care in Chaos: Frustration and Challenge in Community Care: “Responsibilities remained fragmented and progress in strengthening community care services was low” (1998, 12). The outcome of the reform was that the patients “had nowhere to go and were sometimes thrown onto the streets, becoming ‘sidewalk psychotics’; were sent to prison” (203). Felix Guattari, who has worked as a psychiatrist for decades, talks about care in the community in a sarcastic way in an interview:

Q: What do you feel about institutional psychiatry today?
G: Wonderful! It’s beginning to collapse. […] Almost half of our psychiatric hospitals are working at less than half of their full capacity. […] The cost per day of public hospitalization for the mentally ill has risen so astronomically. It is also collapsing in people’s minds—no one believes in it any more! The policy of community mental care […] has at best achieved nothing, and at worst resulted in an intolerable population surveillance. (1984a, 47)

There is certain amount of ambiguity in Guattari’s use of “wonderful”: on the one hand, the closing down of large hospitals promised a break away from the traditional representation of the asylum as a prison (perhaps, in an antipsychiatric sense), on the other hand, Guattari continues by saying that the closing down of hospitals “does not prevent psychiatric repression being exercised in other ways” (ibid., 48). In other words, even though the “raving lunatic” is a thing of the past, the role of overprescription of pharmaceuticals and psychoanalysis make madness omnipresent. Moreover, the fact is that the attempt to reduce mental
health costs did not help reduce the stigma or fear of people with mental illnesses or improve facilities. Patrick partly assigns Henry’s problems with recovery to the faults of mental hospitals that, on the one hand, could not guarantee Henry’s safety as he managed to run away and avoid medicine and, on the other hand, were prison-like. Therefore, Patrick speaks of the dilemma that they faced: “He looked miserable, trapped and restless, but at least he was alive and receiving treatment. [...] Henry was in DVH [Dudley Venables House, low-secured ward] to protect him from the consequences of his psychosis. But this solution had a massive downside in that the prolonged confinement made him acutely unhappy, and this in turn exacerbated his psychosis” (175).

As I have shown, Patrick researched schizophrenia and psychiatric care extensively. In spite of this or, perhaps, by virtue of the research, he still draws no definitive conclusions about talk therapy, pharmaceuticals, the nature of the voices Henry hears, or the roots of his son’s schizophrenia. In general, there is no closure in the memoir in the same manner as there is no definite (either happy or sad) ending to any of the texts analysed in the current study. I have argued earlier that it is a myth that stories concerning mental illness or trauma should be stories with a happy ending, in other words, a cure. The last line of Henry’s Demons reads: “I sit under the tree which speaks to me and gives me hope” (222). One reviewer claims that this line reminds him of a horror movie: “As if the mutilated monster, long presumed dead, flicks opens its green eyes” (Garner 2011, n.p.). Inappropriate as it is, this claim demands a “completed” story and underestimates the open-ended stories, no less worthy than the former. Apparently, schizophrenia is not an illness that can be done away with once and for all (a similar experience is described in Filer’s novel); however, a person with schizophrenia is not a monster in a horror film. Having focussed mainly on the advantages of collaborative narrative, I will next turn to the challenges that it appears to pose for Jan’s diary, “crammed” into the memoir.

5.4 JAN’S PERSPECTIVE – A MOTHER’S DIARY

While gender interrelations have seemingly little to do with Henry’s story of living through schizophrenia as seen in Henry’s Demons, they apparently concern the narrative aspects of a collaborative memoir as well as the issue of “vulnerability” involved in representing schizophrenia in general. The discussion of Jan’s autonomy is relevant to the wider concerns of the thesis, since it deals with the idea of subjectivity, as well as with the issue of alterity that might be overlooked. When schizophrenia, in particular, or the representation of norm and deviance in general are in focus, it is important that all perspectives are taken into account and given equal weight. In this sense, Henry’s special perspective as the one experiencing schizophrenia is as important as Jan’s seemingly underrepresented perspective,
which seems to imply a certain level of gender inequality, which is also relevant to the discourse of normative and non-normative.

I have claimed at the beginning of this chapter that the seventeen chapters of the memoir are not equally shared between the contributors. Jan’s contribution is not even mentioned in the title of the book, though Henry’s mother was the first person to discover that Henry had been taken to the asylum and diagnosed with schizophrenia. While Henry’s voice is present at least in several chapters, Jan’s is given only by means of an extract from her diary. I have already mentioned that there may be a hint of coaxing concerning Henry: although Henry is said to write his chapters himself, Patrick is the only editor of the book. In this section, I discuss the gender theory concerning narrative studies and diary writing and post-structural theories of feminine writing to analyse how the diary that is meant to convey a most personal and immediate experience seems to lack expected subjectivity because of Patrick’s intrusion and how the fact that it is given fairly little attention in the memoir can be interpreted through a gendered perspective. The main challenge would be to answer the question: “Whose story is this?”

In a joint chapter with Jan, Patrick writes that “it was impossible even moments later to recall fully what it had felt like” to worry about Henry when he repeatedly escaped hospital and went missing, therefore, he chose to reproduce what was written “contemporaneously”, that is, Jan’s diary (Cockburn 2011, 149). Chapter 11 presents Jan’s diary that she kept, as Patrick explains, “during one particularly fraught fortnight starting in January 2004” (149) when he was away reporting in Iraq. At the time Henry was moved to a rehabilitation ward and had a chance to spend weekends at home. However, the period turned out to be one of a crisis: Jan’s diary reflects the first-hand experience of “time going very strangely when Henry is missing” (168) and permanent apprehension that the following call would reveal dreadful news. This would not have happened, as Jan explained, if the hospital was not that “careless”: “Obviously they thought his feet were so sore [because of running away barefoot and being frostbitten], he wasn’t going anywhere. But that means they were assuming he’d act like a sane person, which he’s not” (165). Jan got a call on Monday from the manager of the rehab place who said that on Friday Henry had admitted he hadn’t been taking medicine for three months: “I ask: why wasn’t his blood tested before? She says it was, weekly, but only for the white blood cell count. I say, why only that? She says a bit defensively that the plasms check ‘isn’t part of routine’” (157-8). Thus, staying in the hospital made Henry feel imprisoned but what is more—it did not help him recover, as the staff did not guarantee his safety and his taking medicine: “I think again how we can trace the beginning of this horror to no one making sure he really was taking the Clozaril because testing for that ‘wasn’t routine’” (165).

Thus, Jan’s diary is supposed to tell about a period when she had to deal with Henry alone, not being able to rely on Patrick or the hospital. According to Cinthia Gannett, it has always been common for women to “use the journal to deal with
sickness and death” since women “have been the primary caretakers, attending the sicknesses and deaths of both the young and the aging” (1992, 140). However, Jan’s diary seems to lack the aspects that usually characterize a diary and present a personal, sincere and, more importantly, immediate, non-polished narrative. To demonstrate what is, in fact, wrong or suspicious about Jan’s diary I will examine the history of gendering the genre of diary. It is typically supposed that diary is a feminine genre and, in this sense, the term has been rather marginalized or used pejoratively (Gannett 1992, 141), indicating a non-seriousness of the matters tackled in them. However, many diaries written by men have been published and are still known today, such as Samuel Pepys’s or Samuel Sewall’s diary. The standards of a “worthy” diary were established by these or similar examples of male writing. Penelope Franklin writes:

*What I found amazed me. The vast majority of published journals were those of men. The thousands of unpublished women’s diaries were in archives across the country, thousands more, I realized, were in attics like mine. I noticed that the men’s diaries published were often tales of exploration, war, politics, or adventure; or were those of famous literary or historical figures. […] Since women weren’t for the most part climbing mountains or running for office, no one had considered their personal diaries particularly interesting. (Franklin 1986, xiv)*

Thus, the division into the public male sphere and the domestic female sphere is very important here, since it concerns the contents of the diaries as well as the fact that women were “permitted” to write solely about the private sphere. No wonder that the male and female literary diary traditions differed—they revealed the differences of male and female existences. Adrienne Rich calls diary a “profoundly female, and feminist, genre” since women “as a group belong to the ‘private’ sphere of the home”, whereas men “act in the ‘public’ arena of power, the ‘real’ world” (1979, 215; 217). Gannett also notes that a worthy diary (written by a man) must be addressed to “intimates and colleagues, to the public” or to “future generations”, while a woman’s diary is addressed either to no one or to other women (1992, 130-131). Even though women’s diaries were mostly ignored, women wrote extensively, since this kind of writing suited their emotional needs and has become a meaningful means of expressing them; it was “gratifying” to them because, through writing, they could “sustain [their] sense of being a self, with an autonomous and significant identity” (Blodgett 1988, 5). Thus, many women wrote personal diaries and, as by the 20th century the diary had come to be associated with self-exploration, the genre started to be thought of as primarily women’s, whereas autobiography came to be thought of as a male genre, since “such books typically promulgate career, heritage, social standing, or fame” (Larson 2007, 12). Elizabeth Podnieks also remarks that “studies of life writing have tended to focus on autobiography” while diaries are dismissed as a “lesser form” (2000, 4).
Importantly, when female diaries appeared “women began to write in their own tongues and voices, however muted, the journal/diary was a principal form for the representation of their physical and discursive experience” (Gannett 1992, 98). Diary writing was a means to have one’s voice heard, since publishing was not available to women: “Men have been the creators of public written forms and have controlled access to writing and publishing, as well as the evaluation of published writing” (ibid., 96).

Diary can be seen not only as a “female” genre but also “feminine”, as part of what has come to be called *écriture feminine*. The French feminist approach aimed at using feminine writing to challenge the discourse of man and woman’s place within it, “to dislocate this ‘within’” and “invent for herself a language to get inside” (Cixous and Calle-Gruber 1997, 257). Cixous places feminine writing beyond the phallocentric system and its authority, as a practice that “can never be theorized, enclosed, coded—which doesn’t mean that it doesn’t exist” (1976, 883). Cixous’s idea of women’s “writing through their bodies” (“language which is capable of translating those moments when language fails us and the body attempts to speak” [Bray 2004, 37]) complicates the notion of *écriture feminine* as it brings in the biological and, hence, essential aspects of femininity (e.g. Shiach 1991). The very notion of feminine writing becomes an unfortunate one the moment it goes beyond the political discourse of women acquiring the right to have their voice heard. Even if one deals with the notion of feminine as a construct as opposed to masculine and as separated from the idea of femaleness, it still carries the sense of being female and, thus, becomes confusing. Essentially female writing is a paradoxical idea in the context of post-structuralism with its critique of essentialism and categorization. However, this type of writing in general is important in the post-structuralist context as it is characterized by breaking the rules of syntax, grammar and lexis. In this sense, the notion rather refers to the fragmentariness, irrationality and improvisation in language in general than to something “essentially” feminine: this is why Cixous and Kristeva themselves speak of feminine writing as belonging to both men and women, Kristeva’s examples being James Joyce and Jean Genet (see, e.g., Stone 2007, 206). Another good example could be Antonin Artaud’s writing discussed earlier in the current study. It is, however, clear why the lens of gender is still applied to *écriture feminine* and why it is difficult to unhinge the feminine from the female. When theorizing about feminine writing, Kristeva refers to Lacan’s psychoanalysis and situates feminine writing in the pre-Oedipal, pre-linguistic stage (see, e.g., Smith 1998, 87), the realm of the impossible with no adequate means of mediation or carnivalesque violation of the established order, associated with the maternal sphere, while the Symbolic stage marks the entry into the language, law and order, associated with the Name-of-the-Father. Even though Kristeva speaks of several male writers who employ *écriture feminine* and thus produce a language beyond the phallogocentric representations of one’s self or experience, it still carries
within itself an unintentional hint of othering and hierarchized assumptions of proper and improper, male and female.

Jan’s diary seems to lack the aspects that would characterize her narrative as *écriture féminine*. The diary seems to follow the conventions of the genre (such as adding dates and employing first-person narration), but it lacks the immediacy that is inherent in diary writing. The narrative is told in accordance with all the grammar and syntax rules of standard English. In his research on diaries, Robert Fothergill states that “to edit or rewrite one’s own entries” means “to corrupt the pure spontaneity of utterance that should mark the ‘true’ diary” (1974, 40). In Jan’s diary there is a differentiation of direct and indirect speech (“He says he did it a lot, far more than I knew: ‘Since I was fourteen I don’t think I passed a period of more than two or three weeks without a spliff. [Corrects himself] No, once I was off for six weeks’” [153]); even the fonts and typography are well kept: italics are used for emphasis and for highlighting borrowed words (e.g. “croque-monsieur”), which is more in line with academic writing than writing a diary. It is not specified in the memoir whether Jan typed her diary herself or Patrick retyped a version of her handwritten diary. In any case, but for the several dates specified in the text, it is difficult to recognize that you are actually reading a diary. Diary is a peculiar genre of writing due to its flexibility and fairly liberal nature. If someone chooses to be inconsistent in their diary no one can prevent them from doing so. The nonlinearity of the diary is expected to allow the emergence of meanings that have been repressed by (phallocentric) realist discourses (Cottam 2001, 269). Even Lejeune states in his *On Diary* (2009, in French 2006) that a real diary has an “open-ended quality” and is, thus, “written without the knowledge of where it will end” (2009, 207). In his book on the memoir, G. Thomas Couser discusses at length and criticizes what he calls “hi-def memoirs”: “The pursuit of verisimilitude and immediacy can backfire: when examined closely, such narratives reveal themselves to be highly suspect. When life writing imitates fiction too closely, reading it, too, can require the suspension of disbelief” (2012, 72). He explains this suspension: “When the reader of a memoir is ‘shown’ what no narrator could possibly remember, then the narrative requires the same suspension of disbelief as the novel. [...] I find myself doubting the general truth of memoirs that trade in implausibly specific details” (ibid., 74). Among such specific details Couser names dialogue, which is present in Jan’s diary and which I have mentioned as being somewhat dubious in its differentiation between direct and indirect speech. Couser confirms my suspicion that “it is impossible” that the author “could remember verbatim dialogue” (ibid., 75).

Lorna Martens calls a diary a “closed structure”, implying that the contents of this structure “cannot be questioned from without either by ‘the facts’ or by other characters, or by an omniscient narrator” (1985, 9). While this makes perfect if a diary is treated as an independent, stand-alone piece of writing, the idea of “questioning from without” begins to haunt Jan’s diary. Jan’s diary is “questioned
from without” in the sense that it is employed as if to provide an immediate experience, yet it is broken into extracts by intruding commentaries and thus fashioned in order to conform to the style, discourse and goals of the joint chapter. Even though scholars claim that diary writing “holds itself away from the world of print” and, therefore, “if anything, diaries evade authority” (Rak 2009, 19; emphasis added), in Jan’s case the presence of authority remains in question.

A large portion of feminist criticism concerning the idea of giving woman a voice draws upon Virginia Woolf’s idea of women’s need to enjoy “a room of her own” (1957), to speak from a precise place she wants to occupy and occupies rather than from a non-place that is granted to her in a phallogocentric context. Woolf also argues for having a language, a sentence for women’s own use, not that of men. As Jan’s diary is concerned, there seems to be a lack of both a sentence and a place to use it. A room of her own as if made for Jan, in the form of a chapter of her own, is an utter illusion: the chapter is joint, and her diary extracts appear as small insets between Patrick’s framing remarks. In her own diary Woolf notes that “diary writing does not count as writing”, since it is characterized by the “rapid haphazard gallop at which it swings along”, yet if it were not written so fast “it would never be written at all”, and if she hesitated she would exclude things (1979, 233-4). Lack of hesitation is perhaps one of the most important advantages of diary writing, the lack of contemplating how uttered words will be rendered. However, to state that a diary or a “diary novel does not presuppose a fictive reader” is controversial (Martens 1985, 7). Bashkirtseff’s statement gives the matter a perhaps more profound interpretation: she claims that she writes her diary “without any attempt at concealment, as if no one in the world were ever to read it, yet with the purpose of being read” (Cottam 2001, 268). In this sense, a diary may contain an aspect of uncanniness—of having to deal with something private made public, reading the intimate, revealing the hidden that should have remained hidden, though some part of it nevertheless always remains hidden. Is there any hint of hiddenness or elusiveness of the self in Jan’s diary that might indicate to the reader that they have come close to Jan’s real intimate emotions regarding her son’s illness? Strong emotions would be characteristic of a diary of a mother who encountered a tragedy in her life. There is no doubt that Jan’s narrative is informative: she speaks of her work, some daily routine (“Go to the hairdresser to have my hair done” [157], “I fixed a quick pasta and tomato sauce for us all” [152]), visits to the hospital—yet, this informativity does not presuppose immediacy or emotionality.

It is difficult to disagree that a diary provides access to a more direct experience, a “truer reality of self” that is not constrained by order (Cottam 2001, 269). While the idea implied by the word “truer” as that of immediacy is a reasonable one, it has been compromised in post-structuralist thinking. While post-structuralism questions the reliability of the idea of the autonomous unified self and the possibility of accessing and transmitting immediate experience as it “truly” is in
writing, the situation is further complicated in the case of women’s writing. Mary Mason is known to be among the first feminists to posit the notion that women’s autobiographical writing is different from that of men’s due to its relatedness. Mason writes that the patterns established by Augustine and Rousseau are inappropriate models for expressing women’s experience and women’s life writing. She adds that “the disclosure of female self is linked to the identification of some ‘other’” (1980, 20-21). This idea implies that Rousseau, who is known for his claim “I have displayed myself as I was” (1953, 17), possesses a unified, autonomous, self-contained and self-existent selfhood (as tautological as it is), whereas women are incapable of producing a coherent and authentic piece of writing of their own as her own self is always related-to-other, subordinate and even subservient rather than self-existent. Mason’s idea has been picked up by other scholars: some write that “the most pervasive characteristic of the female autobiography” is “this self-definition in relation to significant others” (Brodzki and Schenck 1988, 8); others claim that women’s writing is “constructed through the relation to mother and father, mate and child” (Stanton 1987, 14), thus claiming an inferior position of a woman, always and exclusively dependent on her role in kinship relationships.

Chodorow also applied psychoanalytical reasoning to her idea of women being influenced by “mothering”, resulting in “the basic feminine sense” being “connected to the world” and the “masculine sense of self” being separate, since the child perceives the mother as one with him or her, while the father is separate (1978, 169). In other words, feminine identification is relational, while masculine identification is counter-relational. Such a view can be criticized as it generalizes the binary of femininity and masculinity (e.g. Scott 1988). However, Chodorow’s theory has impacted the psychoanalytical attitude towards an individual and his or her autonomy. In an essay, Chodorow juxtaposes the “traditional autonomous self of the pristine individual” and the reconstruction of the self that is “fundamentally implicated in relations with others” (1986, 199). Object-relations theory presupposes that there is “a fundamental internal as well as external relatedness to the other” and claims that agency and autonomy are also relational. Thus, Chodorow demonstrates the progression from the view of individualism as “pure” separateness to a “relational individualism” (ibid., 207). Despite this impact on the view of individualism as being relational in general, these early theories produce the impression of women’s inferiority due to dependency and give a collective image of some certain category of women, hardly paying attention to individual manifestations and characteristics, let alone the similar aspects of relatedness in men’s writing. Thus, these early theories bolster gender differences and attach biological aspects to them in addition to the hierarchical aspects of superiority and inferiority, instead of highlighting the aspects of responsiveness and relatedness in human writing in general (scepticism towards the generalized, collective representation of women as a category was also a part of Kristeva’s critique of feminism).
Such a divisionary approach is illustrative of dividing the private and public spheres between women and men, respectively. Division of this kind is applicable to Jan’s and Patrick’s situation. Due to his job as a journalist, Patrick spends a lot of time abroad covering events in Kabul, Chechnya, Jerusalem and other places all over the world. This is seen in the text on several occasions: “I spent so much of my time living in houses or apartments of my own in other countries”, “this was symptomatic of Jan and my relationship: very affectionate but bearing the marks of long separations. Jan and I had lived apart for extended periods since we first met”, “My job was highly mobile and hers was largely stationary”, “I wondered if having his parents living in two different countries had contributed to Henry’s breakdown” (25-26). The starting point of the entire memoir is Jan’s phone call to Patrick: she calls him in Afghanistan to tell him that Henry has been taken to a mental hospital by the police after they found him nearly dying after swimming in freezing water. It would be, however, unfair to state that Patrick is always out (in a public sphere outside of family affairs) and Jan is always in (in a stationary position, exclusively inside the family affairs). Patrick nearly always comes from the outside in—he rushes to England after hearing the news from Jan—while Jan is always on the inside: going to the hairdresser is the only outside luxury open to her, “Jan told me she was feeling overburdened by cooking for both boys and simultaneously trying to do her own work, involving a heavy teaching load and writing a new lecture on *Lady Chatterley’s Lover*” (151). Jan’s being always inside Henry’s situation further complicates the question of the lack of room of her own in the collaborative memoir.

Nancy Miller and Francoise Lionnet can be named among the first scholars who combated the theory of the woman’s self being different due to its dependency. Lionnet and Miller analyse the confessions of Augustine (regarded as a pattern of male autonomous writing by Mason) and Derrida’s *Circumfession* as examples of male writing characterized as a “self-portrayal through the relation to a privileged other” (Miller 1994, 4). In both cases the privileged other appears to be the mother of the one who confesses. Regarding Augustine, scholars claim that the main objective of his quest is to “come to terms with his relationship with his mother” (Atkinson 1985, 140) and that Augustine’s inner life that he remembers is “dominated by one figure – his mother Monica” (Brown 2000, 17). Drawing upon the maternal elements of the Confessions, Lionnet concludes that “the human individual is a fundamentally relational subject whose ‘autonomy’ can only be a myth” (1989, 27). The influential theorists of autobiography, such as Georges Gusdorf and Philippe Lejeune, assumed a significant independency on the part of the writing individual and believed in the authority and authenticity of a unique self. At least the latter theorist paid considerable attention to the notions of collaboration and fictionalization present in life writing (“this job of writing is a literary creation like any other” [Lejeune 1989, 191]). His work presents an idea that hints at the relational nature of identity. In his book, Lejeune provides an insight
into the broader notion of the collaborative, claiming that “a person is always several people when he is writing, even all alone, even his own life” (ibid., 188 original emphasis). He demonstrates how an actual collaborative autobiography highlights the inconsistencies of any life writing, implying that the issue of collaboration and the problems of authority concerned with it do not refer only to memoirs openly announced to be collaborative. “The multiplicity of authorities” manifests itself in any writing. What, however, collaborative writing comprises, according to Lejeune, is the explicit “division of labor” that is assumed by the writers of different roles themselves, these roles being that of a model and a writer: “The function of the model is to tell what he knows, [...] the writer, on the contrary, is entrusted with all the duties of structuring, of control, of communicating with the outside” (ibid., 188-189).

The “sources” in the Cockburns’ memoir are apparently Henry and, to some extent, Jan, while Patrick is the “writer” who has a claim of power, authority and control. Thus, the intention is the promise of collective memories from Henry, Patrick and Jan, but the result is solely Patrick’s writing. Lejeune states that it is not the inauthenticity that can be condemned in such memoirs but the fact that they “cast suspicion [...] on the rest of literature” (ibid., 186), that is, a collaborative work exposes the relatedness, the questions of authority and fabrication in any work, be it a one- or multi-authored writing, an idea also expressed by a prominent thinker in autobiography and disability studies, G. Thomas Couser: “Much writing—even literary writing—that we think of as having a single author is in fact the product of number of hands” (2004, 205). In a similar vein, Derrida speaks of a response, drawing upon the Levinasian ethics and saying that there are also points of transference at work, meaning that “there is always someone else” (1995, 353)—the idea that undermines the privacy or autonomy of one’s story. In *Circumfession* Derrida writes: “One always confesses the other, I confess (myself) means I confess my mother, [...] I make her speak in me” (1993, 147). Derrida’s response is not summoned by his mother only: Paul de Man calls for his response, as well as Levinas, Althusser or Deleuze. Derrida’s responses to Levinas, Althusser and Deleuze are written in a manner of obituaries as these speeches were made at their funerals. Derrida points out that death as a point of non-response (“I would have tried to say to him why his thought has never left me for nearly forty years. How could it do so now?” [2001a, 195]) makes the deceased respond from the inside: “I know that Louis doesn’t hear me; he hears me only inside me. [...] And I know well that his voice within me is insisting that I not pretend to speak to him” (2001b, 117).

Against this theoretical backdrop, the positioning and framing of Jan’s diary in a collaborative memoir opens new possibilities for interpretation. It is only if one admits the man’s autonomy in writing and the woman’s relatedness that the entire issue of the framing of Jan’s diary would make sense. Yet, the myth of the autonomy of the male self in writing has discredited itself too much to still look at the self through its prism. It occurs, then, that Jan’s diary is made relational, is
fashioned in this manner, but the very nature of the collaborative memoir leaves no possibility for autonomy for any of them, be it Patrick, Henry or Jan, a man or a woman, a “model” or a “writer”, a person with schizophrenia or a supposedly mentally healthy person. Yet, the paradox is that Jan appears to be entrapped, and even more so as she is in a double trap: hers is the commented on, framed, diary in a non-autonomous collaborative narrative. Gannett writes something similar about women’s diaries in general: while a diary can be considered a marginalized set of discourses, “women’s journal traditions [are] marginal even to those” (1992, 120). In other words, even if the fact that the diary is edited and “controlled” is put aside, the idea that this control is exercised against the collaborative background prevails.

“The fact of writing is not sufficient to be declared an author”, (1989, 192) writes Lejeune. This insightful statement points at, perhaps, the major trouble that haunts answering the “whose story is this” question. Couser claims that a “collaborative autobiography is inherently ventriloquistic” (2004, 48), implying that one never knows who is really speaking: the entire issue of the diary presupposes that one hears Jan speaking, but upon a closer view one is not so sure anymore. One’s attitude towards Lejeune’s statement also depends on how one understands the notion of an author. In this section I have discussed the main points of the self-autonomy debate and the relatedness of feminine (as well as any other) writing. The conclusion is that the fact of writing is not sufficient to be declared the only author, independent from the intentions of others. This applies to Jan’s diary as much as to the entire collaborative memoir. If Derridean-Levinasian terminology is taken up, the diary is a response to the same degree as all the chapters in a memoir are responses to each other. Thus, a collaborative memoir is a perfect example of how power and relatedness operates within any work of writing—solo or collaborative.

One inconsistency that, perhaps, triggered the discussion of the place of Jan’s diary in this narrative is that presented by the title of the memoir. The second part of the title reads: “A Father and Son’s Story”. The continuation that forces itself and that I cannot get out of my head is “and no mother then”. Cixous writes in her essay about the “dream of marriage between father and son. – And there’s no mother then” (39, 2003), quoting from Mallarme’s poem on his son’s death. “There is no place”, she writes, “whatsoever for woman. […] Either woman is passive or she does not exist. What is left of her in unthinkable, unthought” (ibid.). When she says that there is no place, she implies, among other things, that the father-son binary resists including mother in this opposition. Coming back to the memoir’s title, it becomes clearer why Jan does not make it into the content—it seems that this is not her story. Yet, another question arises: why, then, include the extracts of the mother’s diary at all? And if included, does the memoir meet Couser’s ethical imperative of the narrative being mutually beneficial?

Clearly, one should do justice to Patrick as far as the entire enterprise of creating a memoir is concerned. Without the editing and initiative authority represented by
Patrick, the memoir might have never been issued. As Gannett writes, even if women's diaries are preserved (often "overly-edited"), "they are frequently cataloged under male family names", which means that, in fact, "they are saved because of their relation to some man" (1992, 121-122). Couser also notes insightfully that "it is not enough to produce a manuscript", since publishing "involves negotiating access to the marketplace", and "people with disabilities may be granted access to the literary marketplace on the condition that their stories conform to preferred plots" (2001a, 79-80). Moreover, it is possible that Patrick is not entirely aware of appropriating the narratives of others. The division of roles seems to be an inevitable circumstance of writing and publishing collaboratively. Patrick's and Jan's perspectives of the events are certainly different than those of Henry. Patrick mentions that the "emotional pummelling" (149) they lived through and that was described in Jan's diary seemed to bring them closer and, thus, stronger as "it would have been very difficult for a single parent to have endured these successive crises without collapsing under the strain" (149). Patrick's critical reflection and Jan's experience of caring for Henry help them understand his perspective and suffering. Talking about the time when Henry got frostbitten, Patrick says that "from Jan's and my perspectives, this episode was more complicated, and considerably more dangerous, than in his account" and that "he acted like what he did was taking place in a different world" (149). But Patrick realizes that Henry's "mental world in which he had been living was so different from his own" (16). Likewise, Jan understands why Henry actually refuses to take medicine: "He won't do it because he feels he is defending his whole identity and integrity, and taking the meds means that everything he thinks is wrong" (43). As the caregivers catch Henry's mood swings and manage to support him, they present their experiences in the collaborative narrative, thus, involving the reader in understanding "living with schizophrenia". An aftertaste of suspicion, however, remains regarding the controversy of authority and domination and, perhaps, its abuse, which leads inevitably to misrepresentations (albeit unintentional) and excessive coercing and framing.

This chapter has been divided into four sections: the first aimed at explaining the nature of a collaborative narrative and the other three at examining Patrick's, Henry's and Jan's experiences, problems and ways of dealing with schizophrenia. In the first section I defined the notion of collaborative narrative as something that could enlighten the readers about the essence of mental illness and "make it a less mystery" to them. This can be achieved due to the many voices that a collaborative narrative can embrace: the voice "from within" madness and the voice of critical analysis. The second section represented Henry's voice "from within" schizophrenia and a voice of spiritual awakening that emphasized the connection between artistry and madness. Henry's credible and sincere narrative that revealed the essence of his hallucinations and the reasons for Henry's actions provides the reader with ways of emphasizing, identifying and finding "points of access" with
Henry. Moreover, Henry’s ability to construct an apprehensible narrative makes him approachable—a characteristic that resists any stigmatization of people with schizophrenia or labelling of them as “a completely different sort of people”. In the third section I showed Patrick’s perspective, someone who does not only speak about his experiences but also justifies them by drawing on the theory or history of treating mental disorders. These provide the background for the readers’ understanding of the challenges and controversies concerned with psychiatry. I emphasized the fact that all three perspectives are of a specific nature, but it is this versatility of the collaborative narrative that accounts for its significance. The last section also helped to underline the importance of giving equal weight to all perspectives: it addressed problematic issue of editing that haunts the idea of collaboration and the concept of vulnerability of such subjects as women and people with schizophrenia. I analysed Jan’s writing as a text that departs from the genre conventions of diary that presuppose a private, non-edited, non “hi-def” narrative. It is apparent that, as editor, Patrick provides the framework for all of the “voices”: on the one hand, this makes the memoir coherent, on the other hand, the possibility remains that the number of narrators does not match the actual number of voices, because these voices are somehow suppressed.
GUILT, MEMORY, CONFESSION: SCHIZOPHRENIA VOICED IN NATHAN FILER’S THE SHOCK OF THE FALL

“If you only knew how fatigued I feel at these revelations and unveilings, how many I have had to put up with, how badly I put up with them.”

Jacques Derrida

It seems to be a common task for readers to question the nature of the experience that an author includes in a narrative of mental illness. “Where does the author’s idea of the experience of mental illness come from?” they ask. Predictably, this was the first question Nathan Filer was asked during an interview and presentation of his novel at Bath Spa University:

I’ve worked in mental health for many years and I was aware that I was writing the story through the eyes of a patient with schizophrenia which I don’t have. I think you don’t need to have a personal experience of something to write about it, if that was the case novels wouldn’t exist. Of course we can write about things we don’t have direct experience of. […] Schizophrenia is so often portrayed in stories about, you know, split personality and violence associated. […] I did feel a moral responsibility engaging with this project. […] One is not a textbook, I was never seeking to discuss everyone’s experiences of this illness and I couldn’t do it. […] There are many experiences of it. Actually, my task was to make sure that I describe Matthew’s experiences of it correctly, my fictional narrator, to make his priorities my priorities and to handle it sensitively. (Wood 2014)24

Nathan Filer is not only a young prominent novelist and performance poet and winner of the 2013 Costa Book of the Year award for his debut novel The Shock of the Fall—he is also a registered psychiatric nurse. Filer is also actively engaged in a range of other projects and political actions, from volunteer work in Israel to protesting against the disintegration of the NHS (UK National Health Service) and making a BBC radio documentary on representations of mental illness. His combination of medical knowledge, critical thinking and the art of writing (MA in Creative Writing from Bath Spa University) resulted in this detailed, touching and rather personal story, which is told “from the inside”. Filer’s medical training and writing contribute to both medicine and the humanities, giving a voice to people with mental disorder who are often stigmatized and who have no means of

24 The transcript of the YouTube video is mine.
speaking for, or expressing, themselves. In a short article in The Guardian, Filer writes about his friend who developed a bipolar identity disorder and shared his impressions of being institutionalized. Filer pays much attention to Byron’s experience, since, although Filer is part of the staff himself, “it’s the patient experience that matters” (Filer 2014, n.p.).

A close reading of Byron’s words makes it clear where Filer finds inspiration for the description of life in a mental hospital that he presents in The Shock of the Fall—his own experience of working in one and the real experience of others. In the article, Filer quotes Byron: “Some days a nurse would ask me if I wanted to go for an escorted walk the following day. […] I always said yes but it never happened” (ibid.). This experience is in line with Filer’s own criticism of the reduction of space and staff in psychiatric wards: “We are failing the most vulnerable of our society”, he says (ibid.). Filer makes these reductions part of Matthew’s, his protagonist in the novel, experience:

“Can you take me for a walk?” […]
“You do have escorted leave written up, but the nurse in charge says we’re a bit pressed for staff today […]. It might not be possible for you to have a walk this afternoon. Did you get one this morning?”
“No”. (“day 13, for example”)25

Matthew’s nurse mentions the cuts as well: “It looks like we may have to scale back the groups […] services are being cut right across the Trust. Right across the NHS really. […] I just wanted to let you know. Money seems to be making all the decisions these days” (“sharp scratch”). I will provide further examples of Filer’s insight into life at a mental hospital in the section of this chapter that addresses unreliability (6.1.2).

However, with all of these issues in mind, Filer says that the novel is not specifically about the NHS or schizophrenia (Cochrane 2014). The words schizophrenia and mental illness, however, are articulated in the text—therefore, the strength of Filer’s novel lies in that he challenges the labelling and stigmatizing approaches to people and mental illnesses. Unlike Haddon, who apparently rejects Christopher’s diagnosis (see Chapter 7), Filer seems to acknowledge it without imposing it. He says: “I don’t diagnose him [Matthew] with schizophrenia, in that I never have a character in a position of authority say he’s got it, […] but then, he does end up on a community treatment order being given a depot injection against his will, so I guess it’s pretty strongly implied” (Maughan 2014, n.p.). It is implied in the text indeed, since Matthew manages to find a quite close relative, his grandmother’s brother, who has spent most of his life in an asylum—an apparent

25 A Kindle version of the novel is used in this study. When quoting, I refer to the names of the chapters as they are given in the novel. The chapters are not numbered—each of them has a name and tells a separate story.
hint at the genetic implications of schizophrenia (see Chapter 4 and 5 for a discussion on the roots of schizophrenia). However, it is clear that the trauma and guilt Matthew experiences after his brother’s death are contributing factors in his developing schizophrenia and key source of his hallucinations and inner turmoil. In this chapter, I will examine several studies on trauma as a trigger for mental illness as well as studies on guilt-induced psychosis, and show how these associations are realized in the novel. Along with this analysis, I will discuss the issue of labelling and the idea that schizophrenia is one of the most stigmatized illnesses.

The problem of stigmatization, one of the main challenges that narratives of deviance or mental illness face, raises key questions: Whose voice is this? Who is actually telling the story? Can we trust the narrator? Is the narrator reliable enough? As narratives concerning deviance or mental disorder often represent experiences that would be unimaginable to the layperson, a weight of responsibility is placed on the author. Their task is a demanding one—to illustrate these unimaginable experiences in a way that is accessible and comprehensible to the reader. A challenging question here is why should the reader want to identify or empathize with a person with schizophrenia? Schizophrenia is represented in The Shock of the Fall in such a way that the protagonist’s story appears to be not only believable but also of immediate interest to readers with no personal connection with mental illness. I suggest that labelling and stigmatization emerge along with the inability to empathize. It is not clear which of these, if any, is the initiator but I submit that they nurture and feed each other. I will also discuss the notions of empathy and sympathy, the non-judgmental nature of empathy, and the way the “other-orientedness” of empathy works if the “other” is a person with schizophrenia. I will discuss how the aspects of constructing a personal narrative and telling the story “from within” help evoke narrative imagination and empathy, how the protagonist with schizophrenia can be identified with by anyone who can imagine experiencing loss and guilt, and how he becomes a “likeable” character. The novel thus draws attention to the main principles of labelling, namely how labels stick and serve as the basis for making judgments. I will point out how these ideas are of undeniable importance to the novel as it calls for empathy and deals with the problems of ignorance and fear surrounding mental illness.

I have chosen The Shock of the Fall as the subject of this chapter for several reasons: it is a multifaceted novel embedded with aspects that reveal themselves upon each reading. For example, during the Bath Spa University interview with Filer a great number of issues were raised, but the impact of guilt or trauma on schizophrenia was not discussed. I would argue that Filer’s novel can be read as much more than an illness narrative, even though it is a profound illness narrative that challenges the problem of labelling, as mentioned above. In my reading of the novel, I argue that guilt is one of the central topics along with trauma. Therefore, the novel can be read also as a narrative of confession. On the basis of Foucault’s and Derrida’s speculations on confession, it can be suggested that confession often,
if not always, goes hand in hand with guilt. Yet, this alliance is complicated in the novel by the issue of schizophrenia. I will look into scholarly discussions of guilt and shame and see how guilt is related to the confessional nature of Matthew’s narrative and how shame is related to stigmatization. I will also show that the idea of confession as a cure and a normative way to deal with trauma and guilt is challenged by the fact that the novel does not provide a single closure.

In order to analyse the abovementioned issues of labelling, trauma, guilt and confession as presented in the novel, I will explore the aspects of the protagonist’s illness: its sources, the interconnectedness of guilt, loss, and need for forgiveness, as well as the protagonist’s immersion in his memories and obsession with them. I will examine the nature of the voices that bother the protagonist and how one’s own anxieties and aspirations can be projected onto others and perceived by oneself to be real.

6.1 THE MOST STIGMATIZED ILLNESS: SCHIZOPHRENIA

Filer opens his BBC radio documentary saying that as a storyteller he is entrusted with shaping the understanding of mental health. He says that it “has been shaped by the stories we’ve come into contact with” where the concept of stories is used in the broad sense to signify “the mass of popular information we call the media” (Filer 2017). As can be seen, Filer speaks about being responsible for and entrusted with telling stories of mental illness: in the first quote in this chapter he also talks about feeling “a moral responsibility”. There is good reason for doing so: Filer says that “stories can help us empathize with people whom we might not meet in our day to day life” but “they also have the power to make us fear people […] and to even fear ourselves” (ibid.). I have already touched upon this question of media influence in Chapter 3 when addressing the ignorance concerning the nature of such diagnoses as schizophrenia or depression that result from propagating stereotypes in the media. Filer’s radio documentary features Graham Thornicroft, Professor of Community Psychiatry, who also accentuates the media impact: “Most people who haven’t had direct experience of mental illness themselves actually know very little about mental health, and the problem is a lot of what they do know is actually wrong and where people get these ideas—mostly from the media” (ibid.). In Chapter 3, I have also discussed the myth of schizophrenia as a “split personality”. Thornicroft continues that the fact that schizophrenia is obviously a split personality “is just wrong”: “This idea of Jekyll and Hyde around for so long has been extraordinarily damaging. This is just false. There is a separate condition called multiple personality disorder which is extraordinarily rare”, yet the media would lead you to think that it is “the most common psychiatric disorder” (ibid.).

The problem seems to be that the split personality idea is “dramatic and sensationalizable” and therefore attracts people’s attention. The latest popular

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26 The transcript of the radio programme is mine.
speculation on this topic resulted in Night M. Shyamalan’s recent film *Split*, which has caused a tidal wave of criticism from mental health communities claiming that the movie stigmatizes mental health (for example, Bramecko 2017; Slattery 2017). One speaker featured in Filer’s radio documentary calls it “complete nonsense” (Filer 2017). I would argue that, dubbed horror, it should be perceived as horror and fantasy with no regard to actual dissociative disorder. While the beginning of the movie seems to make references (even though implicit) to Milligan’s story, even as far as having the exact same number of personalities, the “superpowers” end is out of place. However, even if not taken seriously, the prospective damaging impact of such genres cannot be denied.

These arguments can explain why Filer focuses on responsibility. Schizophrenia appears to be complicated to grasp for the layperson. It is not without a reason that Matthew says in the novel that his illness is a “disease with the shape and sound of a snake” (“prodrome n”). Filer gives a concise definition of schizophrenia that “does not mean split personality or people likely to be violent, it is an illness that affects the way a person thinks, symptoms might include experiencing things that are not real in a form of hallucinations or having unusual beliefs or delusions” (2017, n.p.). In the novel, Matthew is obsessed with guilt and experiences hallucinations but as he consciously points out he is not what he calls “different people”: “I do not have a split mind. I am not different people. I am myself, the same self I have always been, the one person I can never escape” (“sharp scratch”). Filer adds that “film isn’t the best place to depict mental illness. […] In novels we are placed directly into the minds of the character, given access to their most private thoughts and feelings. I’d argue that novels are uniquely placed to explore mental health from the inside and many novelists have drawn from personal experience” (2017, n.p.).

At the core of Filer’s novel is the story of Matthew who lost his brother Simon at the age of nine but still feels his presence, which results in his being diagnosed with schizophrenia. The novel is written by Matthew who types the story on the mental hospital’s computer when he is allowed to, or on his typewriter at home. Matthew asserts: “I am writing myself into my own story, and I am telling it from within” (“drawing behaviour”) and the reader sees the story unfolding through Matthew’s eyes. Such an approach challenges the readers’ narrative imagination and provokes them to try to enter into the seemingly alien perspective of the experience of the mentally disordered mind.

The seeming unrealizability of facing the experience in illness narratives is challenged by narrative imagination. The term narrative imagination, coined by Martha Nussbaum (1998, 88), indicates the need and possibility to understand the circumstances that shape people’s aspirations and desires. To learn the art of narrative imagination means to be able to take the perspectives of the others different from oneself, to see the situation as if through their own eyes. Any narrative imagination, and particularly that of mental illness, often comes side by
side with critical reflection. The critical approach is always fraught with challenging one’s own values and stereotypes. It is only by risking leaving one’s comfort zone of adopted assumptions that one’s emotional intelligence can be advanced and the horizons of understanding others, as well as oneself, expanded. Margit Sutrop also acknowledges the importance of imagination: “In order to imagine being another person, we do not have to create a different possible world. All that we have to do is to view this very same world from a different perspective. One has to exercise one’s subjective imagination, imagine having somebody else’s experiences, feelings, desires, memories, expectations, etc.” (2000, 211-2).

6.1.1 Empathy

Adopting the perspective of the alien other is a phenomenological experience that evokes empathy. There are a lot of controversial issues when it comes to defining empathy. I regard the most crucial of these to be the difference between empathy and sympathy, the non-judgmental nature of empathy (and, therefore, non-moralistic, that is, the interdependence of empathy and moral judgment is emphasized), its other-orientedness, and the degree of self-other differentiation. Some scholars use the terms sympathy and empathy interchangeably, which seems inappropriate. For example, Miller and Eisenberg write: “For the sake of simplicity, in such cases we use the term empathy to refer to both sympathy and empathy” (1988, 325). In another text Eisenberg writes that “sympathy is the consequence of empathizing” (1987, 6), while Batson states that empathy is sympathy: “Empathic concern is other-oriented in the sense that it involves feeling for the other—feeling sympathy for, compassion for, sorry for, distressed for, concerned for, and so on” (2016, 164). However, Eisenberg notes that there are approaches contrasting with hers and quotes Goldstein and Michaels’s study: “The sympathizer, in contrast [to the empathizer], is more preoccupied with his or her own feelings in response to the other and thus is less able to respond to, for, or with the other” (qtd. in Eisenberg and Strayer 1987, 6). This last definition seems to be closer to the way in which empathy is distinguished from sympathy in the current study. It is interesting how Matthew’s feeling of guilt is connected not only with his preoccupation with Simon but also with his empathizing with his late brother. In this sense, empathy is intertwined with responsibility (as it is presented in Bakhtinian or Levinasian philosophy).

In Chapter 2, I discussed Schopenhauer’s concept of compassion and Nietzsche’s concept of pity. I would like to underline that Cartwright writes that compassion, unlike pity, is “ultimately other regarding” and a matter of respect, since “we do not pity those we respect” (1988, 559). Understanding sympathy as being sorry for someone therefore implies pity, which in its turn implies a hierarchical relationship. In practice, even though there might be the best of intentions behind one’s sympathy-pity for the other, the impact of that feeling can
be “violent” (Vesala-Varttala 1999, 33). Suzanne Keen also writes that empathy is distinguished from sympathy as follows: while empathizing implies “I feel your pain”, sympathizing implies “I feel pity for your pain” (2007, 5). For example, Matthew would be pitied by the reader if he and his behaviour are treated as inferior to the reader’s rationality. In more general terms he would be considered deviant. It would mean that Matthew’s experiences, his guilt and confession are beyond the reader’s grasp or concern. Similarly, his obsession with Simon’s image or dolls, which I discuss below in more detail, could be seen as transgressive, dangerous and, therefore, immoral. However, if the reader does not take a (morally) superior stance they will not sympathize or pity—rather the reader empathizes with the character since they find Matthew and themselves to be on a level playing field. Therefore, a (morally) judgmental attitude is changed for one of compassion.

The idea that “sympathy can be a block for empathy” seems valid here (Rutsch 2012, n.p.). Brene Brown’s animation on empathy and sympathy is in line with this idea: “Empathy fuels connection, sympathy drives disconnection”, she says (The RSA 2013). Another characteristic often assigned to sympathy as a more sophisticated response than empathy is that “in sympathy the suffering of the other person is experienced immediately as something to be alleviated” (Wispe 1986, 318). However, it is often not help or pity that is needed or wanted. Alleviation may come to mean something similar to the “closing-down” of open-ended narratives, as was discussed by Mitchell and Snyder. Since people love telling stories, telling is often enough. As Carl Rogers says, “when I was in doubt as to what I should do, in some active way, I listened. It seemed surprising to me that such a passive kind of interaction could be so useful” (1975, n.p.). Even though he speaks within the context of therapy, a similar strategy might be appropriate in general. Moreover, in the case of narrative empathy (see, for example, Keen 2007), no alleviation is possible, which does not mean that the affective response the reader experiences is not real. Literature, according to Nussbaum, is the best creative space for developing narrative imagination, since concern for fictional characters, their circumstances and needs, awakens moral and political interest in readers (1997, 104). Fiction provides the kind of experience that otherwise cannot be received and shared with the others. Hans Robert Jauss writes about taking an “empathic perspective” by “projecting oneself into the alien self” that will lead to “solidarization with the suffering hero” (1982, 172). According to Jauss, when we solidarize with the hero, we eliminate the distance that prevents us from knowing the character from the inside (ibid.).

However, the hierarchical approach to sympathy is opposed by Sklar, since he implies that sympathy may involve the idea of “solidarization”. The scholar questions whether it is actually sympathy that is detrimental and has violent qualities: according to his perspective, it might rather be self-indulgence than sympathy (Sklar 2011, 141). In that case, the sympathizer precisely lacks any feeling
of true sympathy. On the other hand, a sympathizer may have the genuine feeling, but it might be a “misguided” or “misplaced” sympathy, that is, sympathy that is misapplied. Sklar opposes the view that a disabled person is being sympathized with because he or she deserves pity and not respect—the scholar notes that sympathy rather takes the form of “positive solidarity” (ibid., 142). I agree that if sympathy is used in this sense we might sympathize with others “not because we ‘know’ [them], but because we care enough to want to know about [them]” (ibid., 152; original emphasis). In this case, this idea is in line with my reflection on alterity, non-reducing the other, and Levinasian ethics. Apparently, the problem of definition is at work here: sympathy as solidarity has to be distinguished, for example, from “shallow pity” (another term used by Sklar) as well as from “misguided” and “misplaced” sympathy.

Let us have a look at how etymology can help us in defining empathy. According to the Oxford dictionary, etymologically empathy is modelled on the German Einfühlung, which is a translation of the Greek empatheia from an assimilated form of en “in” and pathos “feeling”, and means “the ability to understand and share the feelings of another” (Oxford Living Dictionaries, “Empathy”), while the Greek sympatheia is constructed from an assimilated form of syn- “together” and pathos and means “feelings of pity and sorrow for someone else's misfortune” (Oxford Living Dictionaries, “Sympathy”). It is clear that the etymological “in-feeling” implies the very ability to leave one’s own place in order to experience the other. The nature of this “other” may evoke some questions of its own. Scholars often call empathy an “other-oriented” affective response (e.g. Batson 2016, Hoffman 1987, Tangney and Dearing 2002). Yet, what or who is the “other” in the concept of other-oriented? For example, scholars write: “It is likely that people often empathize not because they have put themselves cognitively in another’s place, but because they have retrieved relevant information from their memories that has enabled them to understand another’s situation” (Eisenberg and Strayer 1987, 9). This line of thinking may appear misleading: what if there are no such memories? Does that make empathy impossible? Does it imply that a person with no memories of mental illness cannot empathize with someone who has such experience? This would likely result in making the latter the former’s ultimate other. Brown states that knowledge of a particular situation is not always possible (or rather, as I would say, complete understanding is never possible), it is the “response” that matters (The RSA 2013). While Miller and Eisenberg claim that the result of empathizing can be both sympathy and personal distress (1988, 325), I would argue that the feeling of distress is failed empathy. The concept of empathetic distress is discussed at length in Martin L. Hoffman’s study (2000). The scholar notes that empathic distress “shows that humans are built in such a way that they can involuntarily and forcefully experience another’s emotion” and “their distress is often contingent not on their own but someone else’s painful experience” (Hoffman 2000, 7). Interestingly, he writes that empathic distress can be limiting for
empathy and cause “empathic over-arousal”: “If the signs of distress are too intense and salient, the observer’s empathic distress may become aversive enough to be transformed into a feeling of personal distress” (ibid., 197).

Other scholars (who, however, also do not distinguish between empathetic and sympathetic concern) note that “from a developmental perspective, personal distress diminishes over time as it evolves into empathetic concern” (Zahn-Waxler and Robinson 1995, 152). If one is asked to empathize with a mentally ill person and he or she feels distress, no empathy takes place. The ability to feel empathy already guarantees a certain level of identification. As Howard Sklar mentions, “the fact that we can recognize suffering without necessarily having experienced the particular suffering of a given individual (or character) effectively provides us with ways of identifying” (2013, 74). Even though readers realize that they have no experience of such suffering, they may empathize and see that, for example, Matthew’s feelings and reasons are not so alien to them. His emotions are human and, thus, always represent a possibility: “To be touched, to have aroused in me something that will disturb my own ethical reality, I must see the other’s reality as a possibility for my own” (Noddings 2003, 14).

The verb disturb is crucial in the last quote since it leads to the realization of another aspect pertaining to empathy—that is of its non-judgmental nature. Brown mentions “staying out of judgment” (The RSA 2013), and also Goldstein and Michaels say that empathy involves “sincere attempts to understand in a nonjudgmental or helping manner” (qtd. in Eisenberg and Strayer 1987, 7). In an interview, Foucault remarks: “It's amazing how people like judging. Judgment is being passed everywhere, all the time. Perhaps it's one of the simplest things mankind has been given to do” (1997b, 323). Nietzsche also mentions that when a person encounters another person, he “measures himself against another” and therefore “man designates himself as the creature that measures values, evaluates and measures, as the ‘valuating animal as such’” (1989, 70). In general, judgment is a particular defence against “disturbing” one’s “ethical reality”, therefore empathy is often referred to as non-judgmental since judgment would inhibit the ability for empathy and may result in the distress mentioned above. Judgment (in the sense of labelling), thus, signals the absence of empathy. Yet, what is judgment and what does being non-judgmental mean? To suppose that one can be perfectly non-judgmental towards the other is wishful thinking. I agree with the view stating that “complete impartiality is likely to be impossible in human judgment and behaviour” (Janoff-Bulman and Carnes 2016, 184). Theorists of hypo-egoism claim that “people are most likely to experience empathy, with its close relationship to altruism, when the other is similar, familiar, socially close, and socially cooperative”, that is, when the other is the “ingroup member” (ibid., 183, 184). Such division greatly depends on the “ethical reality” mentioned above or one’s moral convictions about right and wrong: “If I am right, the other is clearly wrong; these convictions are perceived and ‘experienced as facts about the world’” (ibid.).
binary opposition between right and wrong provides one with a clear judgment founded on “facts”. Such facts acquire the character of a norm that is perceived as universal, even though the universal “right” might appear to be “wrong” in an instant. It seems that the only explanation of a non-judgmental stance, taking into account the biased nature of human thinking, is non-binary: since one cannot get rid of oneself, one can at least give up judging against a universal norm. This idea has great significance in terms of empathizing with those with mental illness. The major binary at work in this case is the main topic of this study, norm and deviance. The norm does not appear to be something that ingroup members conform to and outgroup members deviate from. At least such a “norm” is not unitary. Even more so, if we consider the fact that mental issues are triggered by different events that can happen to almost anyone—Matthew’s encounter with loss and guilt is one example.

Another issue that complicates the concept of non-judgment and empathy in general is the bias of one’s self that I have already mentioned. Eisenberg writes that some theorists assume that “there is at least a minimal differentiation between self and other when empathizing”, while others assume that it “does not necessarily take place” (Eisenberg and Strayer 1987, 5-6). To assume no differentiation likely means to engage in delusion. I have discussed the notions of alterity and otherness at length in Chapter 2 drawing from Mensch’s Levinasian phenomenological philosophy. In sum, the lack of differentiation would result in merging one’s self with the other and the knowledge to be attained is not that of the other, but of oneself. Thus, empathy fails, once again. Within Mensch’s philosophy, non-judgment would mean “non-mannequining” (2005, 80) the other, that is, not reducing the other to one’s own system of judgment. Moreover, Mensch speaks of the reciprocal nature of empathy—seeing the other and being seen, being a subject and an object. While Sartre who gives an example of being caught while peering through a keyhole experiences a reduction to being an object and a collapse of subjectivity, Mensch says that subjectivity is “something more than being a ‘seeing without being seen.’ It is”, he continues, “the ability to be both seeing and seen” (ibid., 113). No wonder that an attempt at empathy can result in distress or disturbance, since “others provide me with the alternative standpoints that make possible the self-separation that I assume in empathy” and are “also the source of possibilities I appropriate” (ibid.). Thus, encountering the “possibilities” and other-orientedness that empathy involves is possible on the condition of a non-prejudiced approach. Carl Rogers, for example, gave two concise definitions of empathy. The earlier understood empathy as a state of “perceiving the internal frame of reference of another […] without ever losing the ‘as if’ condition” (1975, n.p.). Later he started to perceive empathy as a process that means “entering the private perceptual world of the other”, “temporarily living in his/her life, moving about in it delicately without making judgments”, which in sum implies that “for the time being you lay
aside the views and values you hold for yourself in order to enter another world without prejudice” (Rogers 1975, n.p.).

The issues of responsibility and empathy discussed above are crucial when dealing with illness narratives. Even though understood as other-oriented, empathy often appears not to be possible when the other is uncomfortably “other”. It becomes even more so when we speak about schizophrenic protagonists whose tales are not always consistent. With an extensive experience of working with schizophrenics, the founders of the person-centred approach in psychotherapy mention that “behind the curtains of silence, and hallucination, and strange talk, and hostility, and indifference, there is in each case a person [...] human beings are persons, whether we have labelled them as schizophrenic or whatever” (Rogers and Stevens 1967, 191-2). In the next section I will, firstly, look into the concept of memory in Filer’s narrative, secondly, discuss Matthew’s representation as an unreliable narrator, and, thirdly, demonstrate how the delusion of narrative coherence adds to labelling.

6.1.2 Unreliable Narration

In an interview about The Shock of the Fall, Filer speaks about the reliability of memory. This is for good reason, as the narrative of the novel is not linear: it is constantly shattered by different flashbacks of Matthew’s childhood, his moving out of his parents’ house, or Simon’s accident. Filer says that “when we do that ourselves, when we think of our past we don’t do that in a linear very convenient narrative” (Wood 2014, n.p.). The reason for this is that “we think of the events that are important to us at the time” and “how we think of them is affected by how we feel at the time” (ibid.). The memories of certain events apparently merge with the impact they have produced upon the protagonist’s current state of mind. Therefore, remembering does not come as a clear uninterrupted reflection of past events. Perfect memory would require the possession of a coherent identity, which is unobtainable along with the idea of a story as a coherent narrative, as I argue in Chapter 3 using Artaudian narratives as an example. Similarly, in my discussion of narrative identity and truth, I mentioned that events that are memorized allow a certain amount of fiction and imagination—whether the account is a tale of those considered mentally ill or not. As Albright writes, we only pretend that the remembered self is an “object, achieved, neutralized, almost dead” so that we have power over it, whereas it is “far from docile, obedient; it can dominate, can overwhelm, the rememberer” (1994, 37). Therefore, Filer’s expression “a convenient narrative” captures the essence of what the reader might expect from a memorized and, as I argue, confessional narrative, but not what the reader will actually get. A “convenient narrative” would, probably, leave no ambiguity concerning Matthew’s condition and the objectivity of representation of the past events. A “convenient narrative” is expected to present a “convenient” conventional notion of the self that
"offers security" and whose past is a "settled image, objectified and bulky" (Albright 1994, 38-39). However, such a narrative would not provide the protagonist with the degree of believability that is available to Filer’s non-linear one. In general, it is Matthew’s unreliability as a narrator that makes his story, his remorse and his coming to terms with guilt believable. Identifying and empathizing with the protagonist are facilitated by the way the narrative is constructed. As Albright writes, “nothing makes us more suspicious of the autobiographer’s veracity than a smooth, consecutive narration” (1994, 23; emphasis added). G. Thomas Couser also mentions in his book on the memoir that too detailed a narrative that presupposes a faultless work of memory is “meretricious” and “aesthetically dishonest” (2012, 76; original emphasis).

Unreliable narration has long been a crucial issue in narrative theory and has caused much controversy. The central problem is the definition of an unreliable narrator and the unreliability of narration in general—the same problem that regards the notions of the norm, deviance, madness, etc. It is interesting that the two conventional definitions of an unreliable narrator belonging to Wayne Booth and Gerald Prince contain the word “norm”. For Booth, a narrator is reliable if he or she “speaks for or acts in accordance with the norms of the work” (1961: 158–9) and, for Prince, a narrator is unreliable if his or her “norms and behaviour are not in accordance with the implied author’s norms” (Prince 1987: 101). However, the implied narrator is already a vague textual term, let alone the “norms” and the authorial intention that the narrator is expected to follow. Therefore, instead of using an implied author as a reference point for an unreliable narrator, it might be more appropriate to turn to the reader and his or her interpretation of the “norms”. Thus, it becomes clear that it is not the moral standards or norms of the implied author that define unreliability, but rather the “normal moral standards” of the reader, which are hardly definable, as I have shown in Chapter 2 (Nünning 2005, 97).

Matthew’s narration can be seen as unreliable even, since there are certain reasons to suspect his rendering of the story (Lanser qtd. in Nünning 2005, 94). Indeed, Matthew does not write his story in a precisely coherent or chronological way. Several times the reader stumbles upon such claims as: “I don’t know why it was this day that I decided to follow him. Perhaps it wasn’t. Perhaps it was another day” (“prodrome n”). or “I stood at the spot where you had to stand when it was your turn to count. […] Except I don’t remember standing there. Not really. You don’t always remember the details like that, do you?” (“the girl and her doll”). Matthew admits and draws the reader’s attention to the fact that he cannot be truly called a reliable narrator. He sometimes cannot retrace the exact sequences of events and gives as much as “three truths” about his friend Jacob’s leaving their apartment. Matthew writes: “I should write about why he left but there are different versions of truth. […] Everything changes all the time. Truth changes”
It is noteworthy that there might be more to this particular situation than mere faults of human memory.

The tension grows from the chapter describing the first truth to the chapter describing the third. It is already in “truth no. 1” that Matthew tries to make Jacob the one who wanted to leave, saying that “he [Matthew] was becoming a problem”. Perhaps, truths 2 and 3 are attempts at understanding why he does not stop Jacob from leaving. He says: “I knew what I had to do”, which means that he knew what could actually be told differently, “except I didn’t want to. So I replay the memory a different way” (“truth no. 1”). The next chapter is much longer since it contains a flashback—seeing a drawing on the fridge Matthew remembers how his handmade birthday card was the only one Simon kept in his keepsake box. When Jacob says that the social workers put his disabled mother’s hair in pigtails “like she’s their fucking doll”, Matthew’s mind is “snatched away” once again (“truth no. 2”). The image of a doll reminds him of Simon’s accident again. The memory haunts Matthew and strengthens his feeling of guilt—he seems to think how affectionate Simon was and what a treacherous person he is himself. Meanwhile, Jacob continues talking about his mother but notices that Matthew is distracted: “You ain’t listening. You never listen” (ibid.). As is the case with truth 1, Matthew wanted to ask him to stay, to shake him and shout that “he couldn’t abandon [him] now” (ibid.), yet he does not do it. Filer does not directly explain what the reason for this is, yet it seems to be clear that already at that point Matthew, in order to resolve the guilt, feels the obligation to listen to the memories rather than to Jacob. It is since his stay alone in the flat that he starts hearing Simon’s voice and making an ant farm in order to bring him back. In “truth no. 3” he says that he “gives” Jacob his “permission to leave” but it becomes clear that he was the one who facilitated the leave. Thus, not only the memories are unclear but their representation can always conceal the intentions between the lines. The believability of the tale is reinforced by these ambiguities and self-deceptions. Yet, interestingly, the only version of events that the reader gets is Matthew’s, even if he gives three truths—all of them belong to him and, thus, memories “are explicitly reconstructed by the person who experienced them” (Neisser 1994, 1). Matthew presents what he sees and intentionally teases the reader: “In the bathroom mirror were the blurred edges of a healthy young man […]. I should have wiped away the condensation and taken a proper look at him. I wish I’d done that now. But I didn’t, so you can’t either” (“make yourself at home”).

The narration does not exhibit truly schizophrenic language in an Artaudian manner. Rather, it resembles a collection of stories, which, taken together, represent a fictional confessional memoir. Therefore, Matthew’s inconsistency should not be immediately labelled an outcome of his developing schizophrenia—the narrative is humane since it exhibits the associational nature of human thinking. People struggle to remember exact dates or recall events in their exact chronological sequence, unless they have an eidetic memory, as discussed in Chapter 4. Neisser
puts it clearly: “Not all self-narratives are true”, and adds: “Even when people strive for accuracy, what they remember may not be just what happened” (1994, 2; emphasis added). Moreover, the blurring memory plays tricks and events are recalled from a certain perspective—more beneficial for Matthew in the case of Jacob’s leaving, but more onerous for him in the case of living through memories about Simon. As Larson notes, “memory serves the demands of the rememberer, who lives in the present” (2007, 60). Neisser rejects the common belief that people remember pleasant events rather than unpleasant: he says that “the real biases of memory are far too subtle to be captured by such a crude dichotomy” (1994, 13). This subtleness manifests itself, at least, in fashioning memories, in taking different perspectives on them. As Marcia Cavell notes, “memory takes different forms, which carry with them different degrees of conscious awareness [...]. The past informs the present, often in ways of which we are unaware and over which we lack direct control” (2006, 2). Matthew’s unreliability represented in such light opens a discussion about the scheme by which labelling works: how a medical diagnosis can be exploited as the primary reason for the inconsistency of thought or incoherence of a narrative.

Apart from the unreliability, there are a number of other techniques used in the novel that add greater believability to the story. I will first address a strategy that supports my perception of the novel as a memoir. It is known that fiction can often simulate memoir, but the definition of memoir is itself ambiguous: G. Thomas Couser, for example, reminds the reader that “the term derives from the French word for memory” and is, therefore, “based primarily on memory”, which is “a notoriously unreliable and highly selective faculty” (2012, 19). This means, he continues, that “the narrative may be impressionistic and subjective rather than authoritatively fact based” (ibid.). A memoir is usually differentiated from autobiography as a writing that aims to picture not the whole of life but only a “discrete part”, a “temporal phase” (Couser 2012, 23; Larson 2007, 2). Filer’s book is centred on a certain event that is gradually becoming visible, and it slowly occurs to the reader why the event is so significant—it has brought Matthew to where he is now. Larson also notes the emotional constituent of a memoir: authors of memoirs, he writes, “are willing to put themselves on the couch, under the lamp, into the darkness, sometimes as they are living or soon after they have lived the emotional mire they are working with and, perhaps, waking up in” (2007, 18). A memoir is also usually narrated in the first-person, a fact that, according to Couser, gives such narratives a special dimension: he treats them as “being motivated” since a narrator, having experienced something, “undertakes to recount it” (2011b, 58; original emphasis).

However, The Shock of the Fall presents us with a story told “from within” not only due to its first-person perspective. Since Filer has experience of carrying out mental health research, this experience has its own effect on the insightfulness of the narrative. Filer has the knowledge to present a story that might have been real
in the form of a novel. He includes a number of details that make the story trustworthy. Thus, while at home, writing down his memories on the typewriter, Matthew refuses to come to the hospital for injections. Finally, he receives an official letter from the hospital authorities who strongly encourage him to cooperate. Matthew includes the letters that carry the logo of the Bristol United Mental Health Partnership into his story. In the literature review (1.3.), I mentioned several memoirs of mental illness including Lori Schiller’s *The Quiet Room* and Susanna Kaysen’s *Girl, Interrupted*. Schiller includes several chapters with notes made by nurses and extracts from her medical record. Similarly, Kaysen includes copies of her progress notes and case reports. In the context of these memoirs, such official documents are important since, on the one hand, they provide the reader with evidence and, on the other hand, they provide a contrast to what the patients experience and tell themselves. In a way, this is one example of how Lejeune’s “autobiographical pact” can be challenged. Lejeune writes that this is an “antifiction pact” and that “antifiction is a commitment that must be made and kept” (2009, 203). The pact is concerned with truth claims and should ensure the identical nature of the author and the narrator. Couser explains that “by definition, a memoir or autobiography purports to represent its author and the extra-textual world more or less directly” (2012, 81; emphasis added). It seems that the truth claims that Schiller or Kaysen make are not identical with the truths contained in their medical records. In the case of Kaysen, for example, the author was amused to read years after her institutionalization what symptoms and behaviours were ascribed to her. Matthew, similarly, comments on these documents in his own manner. Moreover, the Kindle version of the book opens with the recommendation for readers to use the Publisher’s Fonts when viewing it. Filer, though, uses different fonts: the chapters that Matthew writes at home on the typewriter can be easily distinguished from those written on the hospital computer. Moreover, the novel also includes handwritten notes as if they represented real physical evidence. One of them is written, for example, by Denise Lovell, a nurse who came to give Matthew injections, but was never allowed to enter.

I have discussed at length the lack of language resources to express painful experiences that are often part of living through mental illness. The authors of the memoirs in the present study try to overcome the faults of the mediator in different ways. In his search for help, Henry Cockburn, for example, turns to drawing for help (and includes some of the pictures in the memoir) and playing music. Lori Schiller includes a part of her diary in the text. Thus, when language seems to fail Matthew or he wants to express his own thoughts in a more spectacular or explicit way, he recourses to the creative use of pictorial supplements. Having only short-term access to a typewriter or a hospital computer, by using literal graphic pictures he manages to make his experiences more illustrative. Matthew clarifies the meaning of the visual: “It’s like we each have a wall that separates our dreams from reality, but mine has cracks in it. The dreams can wriggle and squeeze their way
through, until it’s hard to know the difference” (“kicking and wailing”). This condition of feeling that the wall between reality and nightmares is completely broken haunts Matthew when he is heavily medicated and fails to concentrate on his writing or other personal aspirations.

The hospital atmosphere is represented in the novel as dismal and slumberous. It becomes even more difficult to realize his potential, because Matthew feels he cannot concentrate properly: “I’m forever getting distracted” (“kicking and wailing”). Filer illustrates Matthew’s experience of staying in hospital as an inpatient by describing it in detail. One point is the feeling of having no control that keeps on haunting Matthew. He feels that he is not supposed to make any decisions or have any plans for the future: “Everything I do is decided for me. There is a plan [...] It tells me exactly what I have to do with my days [...] I’m nineteen years old, and the only thing I have any control over in my entire world is the way I choose to tell this story” (“is this question useful”). The chapter in which Matthew describes his daily routine is called “day 13, for example”, indicating how indistinguishable his days have become. Since most of the time there is not much to do, the patients tend to smoke a lot: “We smoke for ages. There is nothing else to do. Nothing”. This feature is also highlighted in Henry’s memoir (Chapter 5) and in Elyn Saks’s *The Centre Cannot Hold: My Journey Through Madness*, a memoir mentioned in the literature review, where the characters try spending time drawing or reading but eventually it is smoking that helps kill time.

While the strict daily regimen ensures order, it also seems to deprive the inpatients of their will to make progress and any hope of ever realizing their potential. Matthew faces this challenge, too; he says that his mother often talks about his potential and he tries to argue against her reproaches, saying that there is nothing special about achieving potential (“make yourself at home”), yet still the idea haunts him. Once it seems to him that a short note written by another patient reads: “HELLO, my name is your potential. But you can call me impossible. I am the missed opportunities. I am the expectations you will never fulfil” (“make yourself at home”). In her autobiographical novel Saks mentions that “a mental illness does not automatically sentence you to a bleak and painful life” (2008, ch. 24) or a life with no achievements and intimate relationships. However, realizing one’s ambitions means finding the source of the disorder, the reason for it, ways of fighting or calming it down and, in most cases, admitting that the disorder is real but not, in fact, alienating. While in the hospital, the majority of the protagonists experience a sense of being left behind. Matthew notes that calls from Jacob become increasingly fewer, which he attributes to the non-caring attitude of his friend and of the whole universe: “The other person has cleared. The other person has enough shit to worry about without you to deal with too” (“day 13, for example”). The same happens to Henry and Elyn, who feel that everyone else they know are starting their own families or getting better jobs, while they are stuck in the asylum. Some of their friends have begun to show that specific type of fear that people get
when facing someone very different from themselves. The fear of alterity and otherness originates from the consequences of stigmatization that Filer draws attention to in the novel.

Realizing that no one trusts him or, at least, understands what the nature of his hearing voices and seeing Simon is, Matthew claims: “This is what labels do. They stick. If people think you’re MAD, then everything you do, everything you think, will have MAD stamped across it” (“empty dull thud”). While speaking about labels, Matthew mentions an experiment that a group of researchers has conducted. Apparently, Filer refers to the David Rosenhan’s study “On being sane in insane places”, published in Science and intended to demonstrate the “massive role of labelling in psychiatric assessment” (Rosenhan 1973, 252-3). The researchers were voluntarily institutionalized and pretended to hear voices. In the course of the so-called Rosenhan experiment, they took notes and after a while, nurses diagnosed them with excessive writing behaviour. Filer’s reference draws attention to the main principles of labelling, namely to the ways in which labels can stick and serve as the basis for making judgments. Tom Shakespeare also speaks to this when writing about “identity spread”—a phenomenon that implies that one’s individuality “can be ignored, as the impairment label becomes the most prominent and relevant feature of their lives, dominating interactions” (2006, 71). Such domination becomes possible due to the social factors influencing customary labelling, factors that need to be identified and dealt with. According to Howard Becker, “the deviant is one to whom that label has successfully been applied; deviant behaviour is behaviour that people so label” (1963, 9).

Another detail is mentioned as if in passing, but it carries a significant meaning for the reader’s realization of the realities and practices of the mental hospital. Matthew notices that “The mugs are provided by Drug Reps. They have the brands of the medication we hate, stamped all over them” (“day 13, for example”). The problem of the medicalization of therapy and its overemphasis on the use of pharmaceuticals is crystallized in this moment. The binary opposition of talk therapy and reliance on pharmaceuticals is one of the core questions touched upon in many novels concerning mental disorders. In Matthew’s case, this opposition is not as crucial as in, for example, Henry’s situation (Chapter 5), or that of Elyn Saks, who says that “medication has no doubt played a central role in helping [her]” but what allowed her “to make sense of everything that happened” during the illness was talk therapy (2008, ch. 24). Matthew realizes that he needs injections to blur Simon out. When Matthew finds Simon under his bed, Simon asks: “Why did you spit out your medicine? Won’t you get sick?” Matthew answers: “You want us to play together, don’t you?” (“open wide”). Not wanting to let his late brother go, Matthew tries to avoid medicine. However, whether he takes it or not, he still feels lonely and guilty, and letting go seems to be the same as forgetting or betraying Simon. For Matthew, taking medicine means giving up Simon, leaving him behind. At this point in the novel the reader already knows that Matthew did not actually
kill Simon, but this is the way his guilt operates. Matthew does not really get any
talk therapy, but, as the reader finds out in the end, the thing that pushes him at
least a step closer to reconciliation and throwing a memorial party for Simon is
letting himself cry at last, and the realization of his sense of guilt: “I’m so sorry,
Simon. […] Please can you forgive me” (“sharp scratch”). The last words in the
chapter are written in fading print, perhaps indicating a “letting go”.

6.2 GUILT AND TRAUMA

In the sense of “imagining somebody else’s experiences”, The Shock of the Fall is an
extremely important and illustrative novel. Matthew’s feeling of guilt and his
resulting delusions appears to be an experience more universal than we may
realize. In such cases it is crucial, then, to focus not only on the need to identify
with the mentally ill person, but also with the person suffering from guilt. One
reviewer of the novel astutely described The Shock of the Fall as a “story of
unresolved grief” (Ginn 2014, 1710). I would add that behind this grief stands an
unresolved feeling of guilt. To experience grief and profound guilt at the death of a
brother for which one blames oneself is essentially human, and our understanding
of this helps perceive Matthew not through the lens of mental illness but through
our common experience of guilt and shame. Gradually, as the story unfolds and the
details are revealed, Matthew’s account ceases to appear alien and his experience
becomes less unnatural than at first it seemed.

Tangney and Dearing note in their Shame and Guilt (2002) that these moral
“emotions of self-blame” (2002, 53) are both most private and inextricably “linked
to the self in relationship with others” and that “guilt-prone individuals appear
better able to empathize with others and to accept responsibility for negative
interpersonal events” than those shamed (ibid., 2-3). I call these emotions moral
because “moral behaviors of all sorts have been associated with the tendency to
experience guilt” and such moral goals are not centred on conformity to social
norms but rather “on the ability to acknowledge one’s wrongdoing, accept
responsibility, and take reparative action” (Tangney and Dearing 2002, 127). The
concepts are often used interchangeably, yet Tangney and Dearing refer to Helen
Lewis’s differentiation made in Shame and Guilt in Neurosis (1971). She claims that
“the experience of shame is directly about the self, which is the focus of evaluation.
In guilt, the self is not the central object of negative evaluation, but rather the thing
done or undone is the focus” (qtd. in Tangney and Dearing 2002, 18; original
emphasis). Barrett also notes that “guilt involves a focus on particular misdeeds”
and “involves trying to make amends” (1995, 27). Many scholars mention the
interpersonal nature of guilt: they say that “shame and guilt are ‘social emotions’
deﬁned in terms of the intrapersonal, interpersonal functions” (Barrett 1995, 25),
and that “guilt serves to protect and strengthen interpersonal relationships”
(Baumeister et al. 1995, 256).
If such a differentiation needs to be done, it is clear that Matthew is guilt-driven since he feels highly responsible for what cannot be undone: “People in the midst of a guilt experience often report a nagging focus or preoccupation with the transgression—thinking of it over and over, wishing they had behaved differently or could somehow undo the deed” (ibid., 19). Matthew thinks he finds a way to undo the deed—to build an ant farm that Simon wanted and to listen attentively to every sound lest he should miss Simon’s calling. Matthew tries to find Simon’s trace in the tiniest details, but thinks that his medication has numbed his feelings: “If I were more perceptive, if my senses weren’t so blunted by the medicine, I’d be better able to decipher, understand what he meant by the movement of leaves” (“I don’t hear voices”). Still everything reminds Matthew of his late brother: he wonders “whether Simon can transmit thoughts through the TV” (“day 13, for example”), he watches “the kettle boil, trying to hear Simon in the bubbling water” (“this goodbye”), he smokes a cigarette, holds his breath as long as he can and then “slowly blows it out and watches his face appear” (“sharp scratch”). Every time Matthew feels his presence, he thinks Simon is trying to tell him something: “If the tap choked and spluttered before the water came, he was saying, I’m lonely. When I opened a bottle of Dr Pepper and the caramel bubbles fizzed over the rim, he was asking me to come and play. He could speak through an itch, the certainty of a sneeze, the after-taste of tablets, or the way sugar fell from a spoon. He was everywhere, and in everything” (“I don’t hear voices”). As his medication begins to take effect it becomes harder to find and hear Simon, he begins to fade: “In time, Simon grew more distant. I looked in the rain clouds, fallen leaves, sideways glances. I searched for him in the places I had come to expect him. In running tap water. In spilled salt. I listened in the spaces between words. At first I wondered if he was angry with me, if he’d given up?” (“this goodbye”).

As a result of their study, Tangney and Dearing identified a number of shame and guilt-related adjectives and descriptors. The latter group includes expressions such as “regret”, “remorse”, “worry about hurting or injuring another”, feeling embarrassed, ridiculous, and being disgusting to others (2002, 37). The novel opens with Matthew confessing to the reader: “I should say that I am not a nice person” (“the girl and her doll”). Filer comments on this phrase in an interview: when the audience says that Matthew seems to be “unbalanced, not particularly nice” or “ungrateful”, Filer answers that he seems “stoic and brave, he doesn’t pity himself” and adds: “I am quite defensive of him” since it is likely that the responses of his parents or staff were “maladaptive” (Wood 2014, n.p.). Thus, the image of Matthew that Filer seeks to create is that of a humane likeable character who opposes the stereotypical violent image of a schizophrenic (similar to the media representations of a schizophrenic that Patrick Cockburn writes about). Once, Matthew’s nurse Denise tells him: “Really, Matt. You’re your own worst enemy”. And Matthew replies: “That’s a strange thing to say to someone with a serious mental disease. Of course I’m my own worst enemy. That’s the whole problem” (“sharp scratch”). It is
an interesting observation that Matthew realizes his specific condition, and that nobody else hears Simon’s voice, but he cannot imagine letting go. Even more, he feels he is the chosen one: “He had chosen to be with me, not Mum or Dad or his friends from school. He didn’t talk to the doctors, the nurses” (“I don’t hear voices”). Yet, where does the chosenness come from? Perhaps from the very responsibility that Tangney and Dearing name as a feature of feeling guilt. They also note that “there is a special link between guilt and empathy”; whereas shame is more self-centred, guilt “is relatively free of the egocentric, self-involved process characteristic of shame” (Tangney and Dearing 2002, 82). It implies that a guilty person might feel more other-oriented empathy, that is, focused on the other’s experience of his or her deed, and thus guilt and empathy become the “reflections of more broadly based feelings of responsibility for others” (Zahn-Waxler and Robinson 1995, 143). It is likely that Matthew’s overwhelming guilt is in line with this theory. As Silfver notes, “an ashamed person is concerned with others’ evaluation of self, but a guilty person is concerned with one’s effect on others” (2007, 170). Matthew might realize what it was like for Simon to be so scared by the doll that he digs from the ground and his saying “she wants to play with you, Simon”. Running away, Simon slipped on a rock and his fall was fatal. Referring to Hoffman, Silfver states that “guilt arises when the child feels empathy towards the other person and understands that she or he is responsible for the other’s distress” (ibid., 180).

As Tangney and Dearing note, “it seems likely that some people are better than others at coping with and recovering from experiences of shame” and guilt (2002, 62). Guilt can be adaptive if “the person is able to deal with the feelings of guilt in a constructive way”, that is, they do not punish themselves endlessly, which is a token of an “exaggerated sense of responsibility” that can “become unhealthy” (Silfver 2007, 171-2). It is not always clear where the boundary between “normal and complicated grief” lies, which leads to researchers’ using “different criteria for grief outcomes” and the results being “cumbersome” (Shear and Share 2005, 254). Referring to Richard Glass’s study “Is grief a disease? Sometimes”, Shear and Shair note that the “underlying neurobiology of both usual and complicated grief is virtually unknown” (ibid.). The main aspect of complicated grief is “a persistent disturbing sense of disbelief regarding the death” accompanied by “feelings of anger, bitterness, and resistance to acceptance of the painful reality” (ibid., 253). The scholars also mention that while closeness following a death is thought to decrease, there is, instead, “a continued sense of connection to the person who died, akin to closeness felt in similar relationships with living people” (ibid., 261). In the case of Matthew, the general idea of grief acquires the form of guilt- and trauma-triggered schizophrenia. As Filer says, “the catalyst for breakdown is always stress: it’s life events. If you want to depict mental illness accurately, then the interplay needs to be shown. Fiction can do that” (Maughan 2014, n.p.). Scholars note that “adverse life events or significant losses and deprivations can not only ‘trigger’
schizophrenic symptoms but may also, if they occur early enough or are sufficiently severe, actually mold the neurodevelopmental abnormalities” (Read et al. 2001, 319-320) and that “trauma symptoms may leave persons with schizophrenia less able to cope effectively with stressors, which may heighten vulnerability to symptom exacerbation” (Lysaker and LaRocco 2008, 331). It seems that Matthew may also have symptoms of “death guilt”—“the survivor’s sense of painful self-condemnation over having lived while others died” (Lifton and Olson 1986, 311). Similar experience is depicted in Guest’s Ordinary People mentioned in the literature review, which is also concerned with guilt and tragic loss of a brother. Lifton and Olson spoke to survivors 30 months after a disaster to find out that they “were still plagued by the feeling, however irrational, that they could or should have done something to save close relatives who perished”, inwardly experienced “a certain amount of personal responsibility for having ‘killed’” and felt that their “life was purchased at the cost of another’s” (ibid., 312). This might also be the case with Matthew if we consider the “shock of the fall” itself—Matthew’s fall that had happened before Simon’s and brought no real harm to Matthew except a bruised knee.

To understand the nature of Matthew’s guilt, it is important to look into what the “shock of the fall” really implies. Matthew repeats the same phrase several times: “There was the shock of the fall and the blood on my knee and Simon carried me all the way back to the caravan, all by himself, without any help from anyone, even though it half killed him” (“hypotonia n”). It is interesting that Matthew recalls this fall even more often than Simon’s. The shock of the fall referred to in the title of the novel is rather the shock of Matthew’s fall that preceded Simon’s. This fall is also the point of Matthew’s guilt. Knowing full well that Simon suffers from hypotonia, low muscle tone, Matthew cries and moans and acts miserable while Simon carries him home. Matthew later realizes how difficult it would have been for his brother. What tortures him, though, is that he did not do the same for Simon:

It was no harder than I had fallen only a few days before. And at the exact same spot […] I am trying to lift him, to carry him, but the ground is wet. […] I lift him and fall, lift him and fall. […] ‘I can’t carry you. I’m sorry.’ (“sharp scratch”)

There is hardly any way for the reader to judge whether Matthew’s actions were sensible or whether he has done everything he could have done. The important thing is that since the moment of his own fall he feels indebted and guilty and keeps on idealizing Simon, repeating that “he was the best” (“truth no. 3”). As Nietzsche notes, “the major moral concept Schuld [guilt] has its origin in the very material concept Schulden [debts]” (1989, 62-63), that is “the feeling of guilt, of personal obligation, had its origin, as we saw, in the oldest and most primitive personal relationship, that between buyer and seller, creditor and debtor” (70).
Matthew feels indebted, for example, to build an ant farm: “When I was looking for the ants, when I was digging in the ground. It’s hard to explain. I felt close to him [...]. I’ve been thinking about it a lot, and about how I never made him the ant farm” (“truth no. 3”). Matthew wants his brother to forgive him and is convinced that the act of building an ant farm would please Simon by fulfilling his wish for one that was not understood or accepted when he was alive. More than that, Matthew believes that by building the ant farm he will literally materialize his memories and that, once everything is constructed from these same atoms, this will help to make Simon come back: “I didn’t know what it was at first because it wasn’t me drawing the designs. He was moving my hand, scratching my pen across the sketch pads and the bedroom wall. His interstellar dust. His atoms [...] All around me would be new materials. I couldn’t think where they came from” (ibid.). Thus, Matthew’s recollection of childhood memories of studying ants together with Simon leads him to believe he can make Simon come alive by making the memories come alive. Matthew’s world becomes smaller, focused on the things he wants to believe to be true.

Matthew’s feeling of indebtedness is tied also to a feeling of selfishness: he repeats several times that he is selfish, particularly about his illness. On the one hand, he accuses himself of being selfish, on the other hand, he confesses that the illness “keeps him forever trapped by the pain of [his] mind”, he is “stuck looking inwards”: “Nearly every thought I have is about me—this whole story has been all about me; the way I felt, what I thought, how I grieved” (“this goodbye”). When Matthew sees Simon under the bed, his brother’s face is painted orange with black stripes: “‘I’m a tiger,’ he grinned. ‘Do I look like a tiger?’ ‘The best one ever,’ I smiled” (“open wide”). This episode is extremely significant for understanding the essence of Matthew’s illness and the voice that he hears. Although he sees an actual memory of Simon returning from the zoo, but it is his own illness, guilt and anxiety that make Simon speak and appear time and time again. Matthew experiences profound loneliness and seeing Simon helps him feel safe, to fulfil his desire to bring his brother back: “It felt so good to hold him, I could hardly breathe” (ibid.). Moreover, Simon always appears as Matthew remembers him when a significant event happened: this one was from Matthew’s sixth birthday party at the zoo. This memory is extremely important to him and he keeps a photograph from the trip to the zoo in his wallet. When Simon says “I’m eight, so you’re six!” Matthew feels guilty again: “‘No. I’m not six anymore.’ He stayed staring at his fingers, confused. I felt guilty for getting older, for leaving him behind” (ibid.). The guilt is what keeps Matthew stuck in that time, trying now to bring the past back to life. Matthew feels that he may be the only person who does not want to (and who actually does not) forget Simon and care for him. Matthew feels that “the end of Simon Anthony Homes was cruel and sudden. It was dismissive. [...] It was the whole universe turning its back and walking away, incapable of caring” (“sharp scratch”). In saying so, Matthew attempts to block the torment that he might not
have been caring enough himself. He tries to fill the gap that the whole universe left, to return and change the way things are, to do anything but admit that Simon is gone, because that means to forget and dismiss. Guilt makes Matthew feel responsible for keeping in touch with Simon: he does not want to offend or abandon him, while at the same time he is deeply afraid of being abandoned by Simon himself. Matthew is anxious about Simon being angry with him for abandoning him and confesses: “I don’t know which one of us was most dependent on the other” (“this goodbye”). Deep in his mind Matthew understands that the person who is actually dependent is himself, because of his own loss and guilt.

On a different occasion, when Simon’s face appears out of a cloud of cigarette smoke, he looks like he looked on the day when Matthew called him a baby for having a comfort blanket: apparently, Matthew remembers exactly those events, for which he feels guilty. Matthew is quite happy to see and hear Simon as he takes these appearances to mean that Simon is not angry with him and that he forgives him. As Matthew mentions in the quotation above, the story is all about himself, his grief, his guilt and his trying to let go. Therefore, everything that Simon does and says is what Matthew actually wants, because Simon’s words are, in effect, Matthew’s own projected anxieties and aspirations. This observation is quite compatible with the nature of voices that haunt those diagnosed with schizophrenia. Henry in his memoir expresses a similar experience: “Henry says now that he was drawn to run away by the voices of trees and bushes, but what they told him probably reflected his own rebellious spirit and hatred for being confined” (2011, 180). This relates to the projection of voices in schizophrenia, previously discussed in more detail in Chapter 3.

Matthew is rather reluctant in explaining the nature of Simon’s voice because the doctors’ questions do nothing but irritate him and he feels they do not understand him or trust him. This misunderstanding leads to the following dialogue:

You said your brother was in the moon, you said you could hear him in the wind?
Yes.
What was he saying?
I don’t remember.
Was he telling you to jump? Was he telling you to kill yourself?
It’s not like that, don’t say it like that. He wanted me to play with him. He’s lonely, that’s all. […]
How do you play with a dead person, Matt?
Fuck off. (“sharp scratch”)

As well as in Henry Cockburn’s case, trees, bushes or Simon do not tell the protagonist to run away, kill himself or even build an ant farm. The voices come naturally, and whether they seem friendly or, as, for example, in Elyn Saks’s case,
rather demon-like and hostile, they point to and represent the person’s own fears, anxieties or desires. Matthew says that Simon is lonely but it is Matthew himself who appears to be lonely, constantly recalling different episodes from a childhood spent with his brother. Matthew does not experience a split personality, he does not hear voices that order him and he does not hear Simon inside or outside his head, as his doctors inquire. In a similar way that Matthew projects his wish to bring Simon back and to not be so alone, Saks sees and hears her demons every time she is anxious, disturbed, alarmed, or even a little insecure or envious. The doctors’ inquiries bring Matthew no comfort or relief; he has felt lonely since the moment Simon was gone. When Matthew sat in the car with his parents, he heard his mother crying but felt totally numb himself:

I buried my head in my hands, so that if Mum or Dad turned around, they would think I was crying with them. They didn’t turn around. I never felt the reassuring squeeze of a hand on my leg, they never said it would be okay. Nobody whispered, Shhh, shhh. I knew then – I was totally alone. (“family portraits”)

This numbness largely accounts for Matthew’s condition—his parents’ reaction and their own grief is what Filer means by “maladaptive” ways of trying to reach Matthew. Filer also says that the only way to diagnose people in mental health is to watch how they interact with people: “If we say that his schizophrenia is located in him and look at his mother (clearly there’s some anxiety and depression there), it seems that their respective problems are located in the space between them” (Maughan 2014, n.p.). Matthew mentions in the novel that his mother’s “suffering spilled out of her”, yet he admits that “there’s a Use By date when it comes to blaming your parents for how messed up you are” (“this goodbye”).

Unable to let it all go, Matthew becomes stuck in the past with his memories haunting him day by day: “Each morning of waking up, of believing for the shortest time that everything was normal, everything was okay, before the kick in the guts reminder that nothing was” (“sharp scratch”). He becomes obsessed with his own guilt and search for forgiveness. Matthew’s world grows smaller and smaller with him believing that everything, even memories, is made out of the atoms that Simon once consisted of. His own story also represents a totally shut-in world that reflects Matthew’s own condition. Admitting that he is becoming selfish and inwardly directed, Matthew, however, cannot at first recognize the nature of the voice he hears. Being too scared and ashamed to leave Simon behind by forgetting him, he projects his own fears and desires onto Simon’s words and actions.

In the sections above, I have touched upon the idea of the universal nature of the guilt that haunts Matthew. In the course of the novel, the reader’s attitude towards Matthew’s behaviour changes as they come to empathize with him. The stranger who initially seemed completely alien gradually takes on the image of a suffering
personality. Matthew’s fixation with his brother’s death and obsession with the idea of the same atoms that allegedly make up everything and everyone in the world are his mechanisms for dealing with his deep emotional distress.

During one of his lessons at school, Matthew learned that every person, whether Albert Einstein or himself, is made up of a vast number of atoms. The idea impressed Matthew and he decided that even memories are made of the same atoms. For him, this means that memories do not go away and that Simon could be easily brought back: “‘Do you think memories are made of atoms too?’ [...] ‘Well they are. They’ve got to be. Everything is. So you can build them, you know? Stop them being memories, and make them real again, with the right ingredients, like the right sort of atoms and everything’” (“truth no. 3”). While writing down his impressions, Matthew calls his obsession with the same memories selfish: “We shape the world around us into messages” (ibid.). The messages that Matthew talks about are easily recognized—they are memories and things connected with Simon’s death. They form his world, which is closing on itself, operating as a closed-loop system. His key memories include, for example, the doll, Simon’s comfort blanket, the ant farm, and the painted faces. All of these are markers of the one event that Matthew cannot let go of. His sole focus on this loss causes him to seem selfish and unsympathetic to others. In fact, the only things that he appears unable to cope with are his guilt, the death, and his own self—the only person, as he mentions, that he can never escape.

The doll is the strongest image in Matthew’s obsession: it appears throughout the novel in different disguises and produces an uncanny effect. It is noteworthy that the story of *The Shock of the Fall* starts with the doll: in the caravan park, Matthew sees Annabelle burying a doll in a yellow coat, she notices him and shouts at him, and he falls over while running away. Later that night, he wakes Simon up and tells him he will show him a dead body. Matthew finds the doll in the soil and teases Simon saying she wants to play with him. Simon gets scared, runs and falls, fatally, on a slippery slope. Not able to carry him, Matthew places the doll under Simon’s head—no wonder that the doll has haunted Matthew ever since. It is noteworthy that the name of the girl is Annabelle, a possible allusion to Edgar Poe’s famous poem “Annabel Lee”. The poem not only deals with death (death of a beautiful woman in particular—an important topic for Poe) but also refers to a “kingdom by the sea” where the woman was happy and where her tomb is. Matthew meets Annabelle at a caravan park by the sea, the place where Simon tragically dies. The image of Annabel Lee has been widely used in literature and film, particularly in horror (e.g. *The Conjuring* and its sequel *Annabelle* that deal with a haunted doll).

Considered in more depth, the image of the doll represents a great number of meanings. Firstly, the funeral of a doll is not an unusual thing for a child to enact. It has been noted that “the features of funerals, weddings, schools and parties which are re-enacted with the doll are those which have most deeply impressed the child.
The child’s moods, ideals of life, dress, etc., come to utterance in free and spontaneous doll play” (Hall and Ellis 1897, 51). Vidal Clay also notes that “children are curious about death”, yet they are told very little about death and are considered altogether ignorant of it. Clay tells a story of a toddler whose little sibling died but “the parents said their toddler didn’t need to come for therapy because he knew nothing about the death. However, in the therapy session he was observed digging holes in the sandbox and putting toy dolls into them” (Clay 1976, 176). When Matthew meets Annabelle years later, she hardly remembers the “funeral” but she says that it was her own memorial for her mother who died some months before. Clay also notes that there is nothing that could help young people to “learn to grieve” (ibid., 180). It is worth noting that Matthew writes the story and is admitted to mental hospital some ten years after Simon’s death. The breakdown does not happen at the funeral—he could not cry a tear there. Only on the return to the caravan park later does he cry: “Nothing come from nowhere. It had been inside me for years. I’d never let it out, not really. The truth is I didn’t know how. Nobody teaches you that sort of thing” (“sharp scratch”). On his way to the caravan park he notices a book in the library: “It was in children’s section, where there is a miniature plastic table and chairs. How can I deal with ...WHEN PEOPLE DIE?” (ibid.). For Matthew the buried doll was his first encounter with death or burying the dead—it is for a reason that when he wakes up Simon in the night, he says: “Do you want to see a dead body?” to which Simon answers: “What? Yeah!” (“sharp scratch”). One scholar on examining the image of dolls in Rilke and Freud notes the connection between a doll and death: “The doll is a dead body, an inanimate child, an unresponsive, rigid corpse. [...] It gives a warning to the adult to be aware of the child’s naive confusion of the corpse and the doll, and the advice to cover the dead body lest the child play with it like she plays with her doll” (Simms 1996, 674). The result of Simon’s seeing a “dead body” is certainly uncanny: as Freud says, “we remember that in their early games children do not distinguish at all sharply between living and inanimate objects, and that they are especially fond of treating their dolls like live people” (Freud 1955, 233). Simon is tremendously scared, perhaps because he really believes that once the doll was alive and now it is supposed to be dead:

I lifted her into the air, she was dirty, sodden, her arms flopped at her sides. I held her, and began to laugh, laughing at Simon for being so pathetic: ‘It’s a doll Simon, it’s just a stupid doll, Look! Look! She wants to play with you.’ He was backing away, clutching his chest in the way he did when panic took hold, when no words could calm him down. He was begging me, Stop! Stop! STOP! (“sharp scratch”)

Clay says that since death is a tabooed subject, children may have extreme reactions towards mortality (1976, 178). Perhaps Simon is implicitly scared of death, but also of Matthew—he is overwhelmed by the image of the buried doll: “I am sitting in
my living room, tugging at the thread of time, so that I am standing on the cliff edge and tugging at the thread of time, so that I am waking up in our caravan, my thoughts moving in circles around the little girl with her cloth doll” (“sharp scratch”). While discussing Matthew’s three truths above, I mentioned how he was distracted by Jacob’s mentioning the similarity between his mother and a doll. Jacob’s mother, a little girl, a doll—everything would lead to the same event whose memory tortures him. When Jacob left, Matthew considered returning to his parents’ home, but thinking about it resulted, once again, in his encounter with the doll. Matthew imagines coming home and hugging his mother, but he senses some unpleasant odour and realizes that it comes from the kitchen:

There’s something on the kitchen table. [...] The doll is naked, covered in wet mud. Her pale arms stretch across the tabletop, her little face is angled toward us. Button eyes look right through me.
Ha.
It’s make believe, that’s all.
After Jacob left I imagined going home. But I never did that. I was far too busy going mad” (“truth no. 3”; emphasis added).

Thus, it is not only the direct reference to a doll that generates Matthew’s fantasies or memories but also the thought of coming back home. Until Matthew can let the pain and guilt go, everything in his own family will remind him about his loss and abandonment. I have emphasized the fact that the doll is covered in mud—this metaphor of dirt might point to Matthew’s feeling the burden of guilt, of which he wishes to clean or purify himself. He thinks that he might achieve this purification by means of confession, discussed below. It is also noteworthy how the doll is first associated with a dead body and then shown to haunt Matthew through its association with Simon’s death. He puts the doll under Simon’s head and, in his mind, the two appear to merge.

The acts of playing with a doll and playing with Simon also merge in Matthew’s mind. When he scares Simon with the doll, he says that the doll wants to play with him. This has stuck in his mind and he always thinks of Simon as feeling lonely and wanting to play. When Matthew sees a short note written by a new patient it appears to him that it has Simon’s writing on it, telling Matthew he “has to come out and play” and that he wants Matthew to play with him forever (“open wide”).

Matthew’s delusions seem to question death: just as children might believe dolls are alive, he refuses to imagine Simon buried in the ground, lonely and abandoned, and intends to bring him back among the living. Apparently, Matthew’s inability to cope with death originates from his first encounter with the buried doll, just as his guilt originates from the first fall—his own fall.
It is noteworthy that Matthew tells this story in full only close to the end of the novel. Even though he thinks about it all the time, it might be too painful and almost impossible for him to reconstruct the events. In a way, this is the working of memory. As Cavell notes: “Does trauma lead to a heightened memory of the traumatic event, or to ‘forgetting’? Both”, since “emotional memories are ‘burned’” and “cannot be erased” but at the same time “trauma can damage or shut down the part of the brain that is responsible for explicit, episodic, memory” (2006, 20). Nietzsche also noted that “there was nothing more fearful and uncanny in the whole prehistory of man than his mnemotechnics. ‘If something is to stay in the memory it must be burned in: only that which never ceases to hurt stays in the memory’” (1989, 61). Cavell adds that “stress impairs explicit memory while it enhances implicit emotional memories” (2006, 17). Matthew does not reliably remember the chronology of events but his implicit memories work in an associative way: “Implicit, associative memories connect to other unconscious memories by links that would not be obviously relevant to a ‘rational’ eye” (Cavell 2006, 13). The flashbacks in Matthew’s narrative present such links, the strongest associations being attached to the image of a doll. When memories are converted to narrative, narrative can, it is expected, become a productive means of overcoming trauma. To be overcome, the traumatic event must be remembered and faced, and this is what Matthew tries to do by writing: “Inside my head is a story. I hoped if I told it, it might make more sense to me. It’s hard to explain, but if I could only remember everything, if I could write my thought on sheets of paper, something to hold with my hands then—I don’t know” (“how best we can support you”).

However, reliving and re-experiencing events and emotions can be unproductive even in a confessional narrative. For example, Freud writes that a person may be trapped in the compulsion to repeat and differentiates between remembering (curing) and repeating (tied to repression and, thus, destructive) (1958). Cavell explains that “the nemesis of memory is not forgetting, as we might think, but repeating” and links the remembering-repeating coupling to another couple of Freudian concepts—mourning and melancholia. Mourning, she says, “acknowledges the unrepeatability of time; it is to melancholia as remembering is to repetition” (2006, 56-57). Freud writes that “mourning is the reaction to the loss of a loved person” but “in some people the same influences produce melancholia instead of mourning” (1957, 243). In case of melancholia, “a turning away from reality takes place and a clinging to the object through the medium of a hallucinatory wishful psychosis” so that “the existence of the lost object is psychically prolonged” (ibid., 244-245). He adds that “even if the patient is aware of the loss which has given rise to his melancholia, but only in the sense that he knows whom he has lost but not what he has lost in him” (ibid., 245; original emphasis). What Matthew has lost stays within his unconscious memory: I point, once again,
to the significance of the fact that the detailed story of the night Simon dies is given at the end of the novel, just before Matthew breaks into tears and decides to carry out a memorial. It seems to be an effect of his confession that instead of repeating and acting out the same feeling of guilt, he is able to ask for forgiveness. His suffering continues until Matthew returns to the caravan park where Simon died and meets Annabelle there—the girl who had buried the doll. Matthew’s doctors thought that during this trip the voices told Matthew to kill himself but, in fact, he went to the place where Simon seemed closest and most real to him. It is there that Matthew finally lets the tears flow: “It didn’t come from nowhere, but it did sort of take me by surprise. The tears falling faster that I could wipe them away. ‘I’m so sorry, Simon. I’m so sorry. Forgive me. Please can you forgive me’ (“sharp scratch”). In the first chapter, Matthew mentions that no one has comforted him, no one has said it would be okay, and that he could not cry or let it out. The pain and guilt grow inside him for years until he returns to the caravan park and Annabelle tells him: “Shhh, shhh. It’ll be okay […] You’re going to be okay” (ibid.). Interestingly, these are the same words that Simon told Matthew while carrying him (“the girl and her doll”), which also signals to Matthew that he might be forgiven. Moreover, he finally finds out why she buried the doll—it was supposed to be a memorial for her late mother. This idea strikes him and he decides to send invitation letters to his relatives to a party to celebrate the memory of Simon. After letting himself finally cry and throwing the memorial party, Matthew admits: “We place memories on pieces of paper to know they will always exist. But this story has never been a keepsake – it’s finding a way to let go” (“keepsake”).

As Cavell notes, “one mark of a successful analysis […] is that one comes to see the inevitability of what she has done”, since “a part of wisdom consists in seeing the inevitability of the past” (2006, 109, 124). Filer says that “writing can be cathartic” (Wood 2014, n.p.), that is, it can help to relieve the burden. Unlike somebody ashamed who might behave aggressively, “a person feeling guilty is motivated to confess, apologise or repair” (Silfver 2007, 170). Similarly, Tangney and Dearing note that “tension and regret are characteristic of guilt”, and that in guilt there is a “press toward confession, reparation, and apology” (2002, 19). Since guilt is a response to a misdeed, it is “aimed at reparation for a wrongdoing” (Barrett 1995, 26), and since guilt is an interpersonal emotion, “rather than removing the person from social contact, guilt often moves the individual to tell others about the wrongdoing” (ibid., 41).

I argue that the link between Matthew’s guilt and the style of his writing reminiscent of the confessional is emblematic. The confession helps Matthew to move from “repeating” to actual “remembering” and reliving: “Writing about the past is a way of reliving it […]. I don’t know the ending” (“keepsake”). As we saw, this remembering was not always accurate or reliable but it was committed and conscious. Many scholars have noted the curative effect of confession: “The cathartic element involved is of importance in explaining the genesis of all literary
confessions since Saint Augustine’s *Confessions*” (Berggren 1975, 3). Brown writes that Augustine was “coming to terms with himself” and was engaged in “an attempt to find himself” (2000, 158). However, such scholars as Foucault and Tentler point to the link of confession with disciplinary power: as Tentler notes, “sacramental confession was designed to cause guilt as well as cure guilt, and it no longer seemed fruitful to try to analyse one without the other” (1977, 13). Thus, it appears that Berggren’s and Brown’s assumptions are based on the belief that there is a universal and transhistorical, “immutable and psychic need to confess” (Taylor 2008, 6), whereas a Foucauldian genealogy of confession shows that this compulsion is not original or universal, but is an “inevitable outcome not only of our psychological makeup and of our social bonds”, but of “our system of values or morality” as well (ibid., 7). Foucault writes: “The obligation to confess is now relayed through so many different points, is so deeply ingrained in us, that we no longer perceive it as the effect of a power that constrains us; on the contrary, it seems to us that truth, lodged in our most secret nature, ‘demands’ only to surface” (1978, 60). Foucault’s strongest concepts concerning confession regard one as a “confessing animal” in a “singularly confessing society” since “one confesses one’s crimes, one’s sins, one’s thoughts and desires, one’s illnesses and troubles; one goes about telling, with the greatest precision, whatever is most difficult to tell” (ibid., 59). It can be said that due to the normative nature of confession, Matthew, perhaps unconsciously, chooses this way of dealing with guilt—he seems to expect that confession should help free and clean himself of guilt.

Where, then, does such a compulsion come from? Foucault writes that in the ritual of confession “the expression alone, independently of its external consequences, produces intrinsic modifications in the person who articulates it: it exonerates, redeems, and purifies him; it unburdens him of his wrongs, liberates him, and promises him salvation” (ibid., 62). Derrida, for example, makes an interesting differentiation between Saint Augustine’s and Rousseau’s intentions: he notes that Augustine’s confessions “are made, in principle, so as to beg pardon for a confessed fault” while “Rousseau confesses everything only so as to excuse himself and proclaim his radical innocence” (Derrida 2002b, 86). There is, however, no clarity concerning the addressee of Augustine’s confession: “Augustine does not know whether he is writing the *Confessions* for himself, for God, or for his fellow Christians” (Taylor 2008, 35). Taylor claims that in this context Augustine’s confession is quite different from modern confessional narratives, as it does not aim at self-revealing: “Augustine is compelled to write his *Confessions*, and is anxious and beset, not like Rousseau, not by the need to speak about himself, but by the longing to hear the Other speak at last” (2008, 40). However, Augustine’s confession is claimed to be the precursor of modern confession. Derrida’s response to Augustine’s question of why we must confess to God if God already knows everything is as follows:
Answer: confession does not consist in making known, informing, apprising the other, but in excusing oneself, repenting, asking forgiveness, converting the fault into love, and so forth. For there to be a confessional declaration or avowal, it is necessary, indissociably, that I recognize that I am guilty in a mode of recognition that is not of the order of cognition, and also that, at least implicitly, I begin to accuse myself—and thus to excuse myself or to present my apologies, or even to ask for forgiveness. (2002b, 109; emphasis added)

This explanation fits well with Matthew’s confessional behaviour in the novel. I have emphasized the words accuse and excuse in the quote above to underline the way a confession develops: from recognizing the guilt and self-accusing to excusing and asking for forgiveness. The guilt makes Matthew immerse himself in the memories and look for the tiny real or even made-up details that would prove that he is not so guilty, and thus help to finally let go. Matthew remembers the moment before Simon fell:

He glanced back over his shoulder to look at me. It was the briefest moment. […] It happened so fast and I can never slow it down. […] I try to convince myself that he was smiling. That the joke was on me. He wasn’t scared at all. […] Or else I tell myself it was a look of forgiveness. […] Did I give him any comfort, or only betrayal? (“sharp scratch”)

On remembering this Matthew wants to make sure that Simon forgives him, wants to make believe that he was smiling, and does it, certainly, for his own sake. He will never find out whether Simon really smiled, despite re-running his memories in slow motion (as he tries to do). It is Matthew’s guilt that makes his world shut-in and thus selfish, revolving around the same things and events. Such self-deception is precisely the reason why Albright calls the remembered self a “fragile construction”: we can always find out that “we are ourselves fictions, that the things we believe about ourselves are preposterous inventions” (1994, 21).

Derrida writes that “there is doubtless an irreducible element of ‘truth’” in confession “but this truth, precisely, is not a truth to be known or, as de Man puts it so frequently, revealed. Rather, as Augustine says, it is a truth to be ‘made,’ to be ‘verified’” (2002b, 109). “You would have every right to distrust it”, Derrida says about his own confessional writing, “as you would with any confession” (2002a, 38). Derrida is sceptical, for example, about Rousseau’s story about stealing a ribbon—it might have been invented in order to keep to Augustine’s tradition of confessing (Derrida 2002b) or it might be a self-conscious reply to Saint Augustine, which was not intended to be truthful about Rousseau’s life (Hartle 1983). It is a noteworthy remark since it shows the intention of the confessor to ask for an excuse or forgiveness, whereas truth-telling appears to be less important. Such an approach provides another explanation for Matthew’s unreliability as a narrator—it
appears to be an aspect of confessional writing that the reader is given no other evidence except what the author of the confession says. From this point of view, the episode with Simon turning around and smiling falls into place, as does the episode with the mirror when Matthew refuses to take a proper look at himself and says that the reader “can’t either” (“make yourself at home”). For Foucault, as well, confessing is the “production of truth” (1978, 58), while the truth is a production of power. In modern confessions “one does not confess without the presence (or virtual presence) of a partner who is not simply the interlocutor but the authority who requires the confession, prescribes and appreciates it, and intervenes in order to judge, punish, forgive, console, and reconcile” (Foucault 1978, 61). Rousseau, for example, seems to reflect a panoptic structure in his Confessions. “I must remain incessantly beneath his [the public] gaze”, he writes, “he must never lose sight of me for a single instant […]. I am laying myself sufficiently open to human malice by telling my story” (1953, 65).

Who is Matthew’s confessant? As discussed in Chapter 3, Derrida says that “one always confesses the other” (1993, 147). It seems clear that Simon is Matthew’s other since it is Simon’s forgiveness that he seeks and it is Simon who Matthew often addresses directly. However, it is also possible that Matthew addresses himself and his own guilt. Derrida wonders how Augustine addresses his own theft of pears, “as if the theft, the hiding itself were someone”: “His addressee, the destination of his addressee, his address and his addressee is the theft” (2002b, 81-2). Matthew writes that when looking at the picture of himself at the zoo he does not recognize himself: “I know that he is me because I am told he is me, but I do not remember turning six years old” (“sharp scratch”). Albright tells a similar story in his essay: “I see myself at the age of 7, being lifted onto a horse […]. I can imagine the rest of the scene, […] but this is purely factitious, a pseudo-memory derived by filling in the blanks, because I assume that somehow there was an I there to connect the scenes that I can remember” (1994, 26; original emphasis). He then wonders how many of his memories are actually real and not fabricated. Similarly, Matthew can reconstruct his memories from the photograph, but he does not feel that these memories are his own and this causes him distress. The same happens with the memory of Simon’s turning around and smiling—if it is a fabricated memory, it was meant to bring him relief. As Albright notes, “the remembered self is simply a cold, puny, arbitrary selection from a dazzling array of possible selves—there is no line of demarcation between memory and fantasy, between selves that we have been and selves we might be” (ibid., 30-31). In searching for a way to let go, Matthew addresses his other once possible self—the nine-year-old boy who blames himself for his brother’s death—and tries to overcome the guilt. Simon may be Matthew’s other “virtually present”, but it is also Matthew’s guilt that “never loses sight” of him. Matthew thus tells the confessional story in order to see how he has become who he has become and how he can take a different perspective on how things happened.
Theorists of trauma write that a certain split of selves can take place—the one before the trauma and a traumatized self. Lifton, for example, notes that “it’s a form of doubling in the traumatized person” and some elements can be “at odds in the two selves” (Caruth and Lifton 1995, 137). The only way to recover, he continues, is to reintegrate the self. Matthew attempts at reconstituting his six-year-old self, the self that has not yet been affected by trauma, through confession, but the question of whether he succeeds remains open. As is the case with the other literary works presented in this study (see, e.g., Chapter 4 or Chapter 7), closure is absent from Filer’s novel. Larson in his book on memoir, for example, speculates on the “I-then” and “I-now” and writes that “I am not exactly him nor am I free of him” (2007, 24). What needs to be done, he adds, is to “connect the past self” to the “present writer as the means of getting at the truth of his identity” (ibid.). Couser puts it more directly and points to “a sharp divergence between the present and past selves” as one characteristic of confession (2012, 39). Thus, more than two selves can be identified within Matthew: the six-year old pre-traumatized self and the traumatized self after Simon’s death; the confessional self that seeks for forgiveness and the post-confessional self that appears at the end of the novel. The aim of recovery is, therefore, to reintegrate all of these into a single self, tautologically, conscious of itself. It is, however, unlikely that Matthew has achieved such reintegration. I have emphasized the image of a doll in mud above and linked it to Matthew’s burden of guilt. What Matthew wanted is to “purify”, to use Mary Douglas’s term (Douglas 1989), himself of the mud of his memory and guilt, and return to the state of his first self—the six-year-old. At the same time, he remarks that he does not even remember himself at this age but for the photographs.

So has Matthew’s confession reached its goal—the resolution of guilt? Since, as I argued, Matthew is fixated on himself, his own “selfish” illness, guilt and loss, the actual act of asking for forgiveness and recollecting the whole story that makes up his narrative seem to help Matthew overcome the pressure of guilt. The final memorial provides a logical conclusion to Matthew’s confessional movement, signalling what Derrida defines as movement from accusing to excusing and to forgiveness. At the memorial, which becomes a symbolic homage to Simon as well as a means of absolution for Matthew, no one talks about dolls or ant farms—instead of him talking, he listens to other people’s stories about Simon, memories different to his own: “The truth is, I didn’t say that much myself. I didn’t have so many memories of my own to share. Not whole memories, with beginnings, middles, and ends. […] What I did at the memorial, was listen” (“keepsake”).

Two turning points can be traced in the novel. The first marks the beginning of Matthew’s crisis when he hears Simon say “I’m Lost, I’m Lost, I’m Lost” and begins to sees him in every person he encounters: “Each of them had him inside; his many, many, many, many atoms, and each of them with his face, his beautiful smiling face. It wasn’t frightening, it wasn’t like that. It was glorious” (“truth no. 3”). The second turning point seems to occur when Matthew admits that his brother is dead.
However, Matthew never unequivocally acknowledges having stopped hearing Simon’s voice or having realized fully that, because Simon is gone, it cannot be his voice that he is hearing. Although he does say things to that effect on one occasion, he does so because he knows that this is what he needs to say to get away from the hospital: “As a small boy I killed my own brother, and now I must kill him again. I’m given medicine to poison him, then questioned to make sure he’s dead. […] ‘Is Simon in the room with us? Is your brother still talking to you?’ […] “Simon isn’t speaking to me. He isn’t here. He isn’t in the room. He died a long time ago” (“this goodbye”). The plan works, and Matthew is subsequently allowed to move back in with his parents.

Matthew states that his story does not have an end and that the memorial held for Simon is not the end. The implication is clear—his feeling of guilt is not fully resolved and his trauma-triggered schizophrenic condition cannot be fully cured: “I’ve told you about my first stretch in hospital, but I’ve been back in since. And I know I will again. We move in circles, this illness and me”, he says, and adds: “I get used to having Simon around” (“keepsake”). From the illness narrative point of view, it is often expected that the narrative should tell the story of a cure. Perhaps it is similar with confessions—it is expected that they should end with revelation. Simon’s memorial could have been symbolic of both cure and revelation, yet Matthew intentionally writes: “I don’t know the ending” (ibid.). I would argue that Cavell’s idea of the unrepeatability of time and the wisdom of realizing this can be applied here. “We make mistakes in both directions”, she writes, “we often believe, falsely, that we are the sole agents of our misfortune; we often fail to see the agency we have. We cannot change the past, but we can come to understand it differently, which may change how we live our lives now” (2006, 124).

In this chapter, I have explored the construction of a personal narrative “from within” and shown how the author retains believability in the experience of mental illness by refusing to present a consistent or coherent narrative. By analysing Matthew’s sincerely written story I have demonstrated how guilt and loss led to his shutting himself into his own world, a world in which he found solace through communication with his late brother, who he was not ready to let go. Matthew projected his own anxieties onto what he thought Simon was telling him. I have drawn attention to the process of empathizing in the course of which an alien character becomes more approachable, intelligible and likeable. It is probable that if it were not revealed to the reader that Matthew has symptoms of schizophrenia, the reader would not find his experience unimaginable. Matthew’s story would be perceived as a story of loneliness, guilt, loss, seeking forgiveness and, finally, letting go—not as a story of schizophrenia. It would become a story of an essentially human experience of grief and of being trapped inside one’s own guilt and pain, which could cause anyone to become self-centred, to turn inwards. This is how Filer’s novel faces the ignorance surrounding mental illness: if we leave the labels aside we might not see a man who is sick, but someone we can empathize and
identify with. Certainly, this demands “narrative imagination” and the ability to “see the other’s reality as a possibility” for one’s own—it is here that the importance of other-oriented empathy lies.
While this chapter includes the discussion of narratives that are regarded by some scholars and reviewers as autism narratives, I do not see autism as “mental illness”—the main objective of this chapter and of the thesis in general is to examine the representation of difference, non-normative subjectivities, and alterity. The two novels analysed in this chapter have one crucial thing in common: they both are surprisingly successful at triggering normative attitudes towards their narrators. Nine-year-old Oskar in Foer’s Extremely Loud & Incredibly Close and fifteen-year old Christopher in Haddon’s The Curious Incident of the Dog in the Night-Time are, more often than not, referred to as “autistic child detectives” (Loftis 2015, 108). I argue that both novels display elements of subjective perspectives that are not reducible to any specific label or diagnosis. The dominant medical discourse turns Christopher’s and Oskar’s stories into illness narratives, thus failing to comprehend the characters’ subjective experiences and opening itself to inconsistencies that can be deconstructed. As Haddon says, “I simply tried to make Christopher seem like a believable human being, rather than trying to make him medically ‘correct’” (2004, n.p.). This study, and the current chapter in particular, avoids reducing the texts under study to illness narratives and discusses in detail the dangers of a diagnostic and classificatory approach to literature, characters and their alterity. However, it should be reminded that current theories (in the context of disability studies, for example) tend to avoid the binary of the pure medical and social-constructionist approaches, as discussed in Chapter 2. In my reading of the novel I aim to avoid the

27 Some parts of this chapter have been previously published as an article (Prosandeeva 2017b).
binary and demonstrate that difference should not necessarily trigger a pure medical approach, but rather open possibilities for interpretation.

While I have argued that narratives, or stories, as I have referred to them, are good sources for creating an empathetic connection between the teller and the reader, there are certain dangers that stories may be fraught with. For example, in Chapter 5 (*Henry’s Demons*) I have discussed the danger of over-editing a personal narrative of schizophrenia as this can lead to its appropriation by the editor. As for the novels discussed in this chapter, the possible danger that they may encounter is that of the reader’s interpretation. While freedom of interpretation cannot be denied, I however consider an over-diagnostic approach towards the characters in the novels to be limiting and even harmful. I will show how such a classificatory approach narrows the idea of norm and accentuates the binary of the “normal” reaction towards traumatic events and the reaction that deviates from the norm. I argue that drawing attention to such literature and non-dominant interpretations of a lived experience adds to the current comprehension of normality and raises awareness of the fact that labelling reduces the other’s humanity.

Despite certain commonalities, each novel tackles the issue of the norm in different ways and raises questions that provoke speculation on the nature of human experience. Thus, my reading of Haddon’s novel advances a cultural understanding of the notions of norm and alterity where the former is considered limiting and the latter non-reducible. I refer to Mikhail Bakhtin’s, James Mensch’s and Jacques Derrida’s theories in order to show the irreducibility of human experience to narrowly-defined medical diagnoses. I emphasize two large groups of conventions that are questioned in the novel in different original ways: the social and the linguistic. Haddon’s central character, Christopher, never referred to as autistic in the novel, notes the conventional nature of both imposed social rules and language rules.

As far as *Extremely Loud* is concerned, I regard Foer’s novel, first of all, as a confessional narrative that deals with several traumatic events. Similarly to Nathan Filer’s story, *Extremely Loud* presents, first, a story of dealing with death—the idea of death and vulnerability to it often occupies Oskar’s thoughts and becomes a crucial part of his traumatic experience. Second, just as *The Shock of the Fall*, Foer’s novel presents a confessional narrative, moreover, it contains much more than the sole confession of Oskar, but Grandpa and Grandma as well. The normative structure of confession, as I argued in Chapter 6, promises deliverance and freedom from guilt. In this chapter, I show that *Extremely Loud* deconstructs the normative idea of a confessional narrative in different ways: through Oskar’s secretive guilt that turns out to be no secret at all, Grandpa’s empty letters, and, eventually, the lack of closure that the entire novel offers. There is no decidable closure concerning the characters’ confessions or the reasons for their actions or whether or not they are “cured”. The same can be said about Haddon’s novel that does not offer a decidedly happy or sad ending. I will discuss these in more detail below. Trauma
narratives can also be ambiguous in terms of the dangers that they pose to the narrative. While being necessary for therapeutic purposes, they may be accused of “textualizing” and “consuming” the trauma (Yaeger 2002, 29). I will look into different approaches to traumatic literature, in particular those presented by Cathy Caruth and Dori Laub whose works are highly influenced by post-structuralism.

The novels are important for the present study since both of them deal with stories of a private person, or a private family, a “valuable personal world”, in Bakhtin’s words (1993, 46). Even though Oskar and Christopher are often viewed as “metaphors” or even “symbols” of the perverted social order (Loftis 2015, Berger 2008), I would like to draw attention to their human nature, behaviour, and, in the case of Oskar, trauma in the face of inhuman events. I base my interpretation on Jean Baudrillard’s and Jacques Derrida’s views in connection with this issue. The approach to Extremely Loud that accentuates the role of the private human experience is important in light of the generalization of the traumatic event of 9/11, that is, its presentation as a mediatized symbolic happening rather than a private affair that affects the life of a family.

7.1 A NORMATIVE ATTITUDE

The original expression of lived experience, trauma and the subjective perspective is often interpreted, even in scholarly works, through the lens of a dominant discourse, which imposes a limited understanding of what constitutes the “norm” and what is beyond this norm. Such interpretations appear to lack insight into the human experience and alterity. Since the norm becomes a part of established knowledge, some academic works tend to view Foer’s and Haddon’s texts as illness narratives and, therefore, to identify in them diagnostic criteria upon which their analysis relies. In this section, I will provide a critique of the normative attitude towards both of the characters under examination, that is, the attitude that interprets their behaviours, fears, interests, and talents through the prism of a given diagnosis that implies being on the autistic spectrum. I will start with a short introduction to the plots of the novels and the way Haddon and Foer view their characters—these views are largely inconsistent with those presented by the proponents of the diagnostic reading of both novels. I will analyse the ideas of the latter and focus on their interpretation of Oskar’s and Christopher’s behaviours separately: first, Oskar’s possible diagnoses are considered, that is, ADD and Asperger’s, and the possibility of their application is discussed; second, the study of Haddon’s novel as an example of an illness narrative in a classroom is debated. Finally, I refer to the idea of alterity, theorized in Chapter 2, and argue that both Oskar and Christopher resist being turned into simple symbols or metaphors of the contemporary socio-cultural condition but remain individuals with their own subjective experience that they tell in their stories. I argue that a non-classificatory
interpretation can be illuminating since it can provide insight into issues in the novels that seem inconsistent with a diagnostic interpretation.

Mark Haddon is an acclaimed English novelist, short story writer and illustrator. At the outset of his career Haddon wrote stories for children, but his later works are intended for adults. It is noteworthy that Haddon’s most well-known novel *The Curious Incident of a Dog in the Night-time* has brought him both the Whitbread Book of the Year Award in the novels for adults category and the Guardian Children’s Fiction Prize that distinguishes books written for children and young adults. Published in 2003, Haddon’s novel tells the story of Christopher who finds a neighbour’s dog killed with a garden fork, and decides to find the culprit. During his investigation he writes down a story that presents a first-person narrative full of insightful reflections and remarks that challenge common beliefs. Although Haddon claims that his book is not about Asperger’s syndrome or autism (2009, n.p.), critics and even scholars tend to base their speculations on presupposing the a priori status of Christopher’s diagnosis. Haddon says that he “has read criticism of the novel from a couple of people with Asperger’s, mostly on the grounds that they don’t recognize themselves, or other people they know with Asperger’s, in Christopher”; the best reason for that, he continues, is that “it’s not a novel about a boy with Asperger’s, is it. It’s a book about a young mathematician with some behavioural issues” (2004, n.p.).

Jonathan Safran Foer is an American writer whose father is a Holocaust survivor—a fact that undoubtedly influenced Foer’s choice of topics for his novels. For example, Foer’s latest novel *Here I Am* (2016) tells a story of a Jewish family living in the USA and is often seen as containing certain autobiographical elements including his Jewish background and painful divorce (Grossman 2016, Menaker 2016). Foer produces fiction as well as non-fiction: the latter category includes *Eating Animals* (2009), written in collaboration with a company that advances a conscientious approach towards eating meat. The novel discussed in this chapter is published in 2005 and tells a story of Oskar, whose father, Thomas, dies in the September 11 terrorist attack. A year after the event Oskar finds a key in his father’s closet and feels drawn to discovering what the key opens. The key lies in an envelope with an inscription “Black” on it, so Oskar decides to visit all the people whose last name is Black. Oskar’s story is accompanied by his grandfather’s and grandmother’s testimonies who, besides their son’s untimely death, have lived through their own traumatic event—the Dresden bombings. Some scholars find an intertextual link between Foer’s protagonist Oskar and Günter Grass’s Oskar Matzerath, the protagonist of *The Tin Drum* (1959): both characters experience the trauma of terrorism—the September 11 attack and World War II atrocities. For example, Uytterschout (2010) sees both Oskars as eccentric, their odd behaviour being induced by trauma. She thinks, however, that there is little hope for Matzerath to escape marginality, while Schell might eventually shed his traumatic past.
Similarly to what Haddon says about creating Christopher as a non-autistic character, Foer states that “it was not his explicit intent to create Oskar as an autistic character” (Loftis 2015, 109), he “never thought of Oskar as autistic” (Kahn 2012, n.p.). However, Oskar’s “disorder”, as well as Christopher’s, seems to be taken for granted by some readers. Foer seems to yield a bit to the majority opinion and says that “it’s not to say that plenty of descriptions of him wouldn’t be fitting, only that I didn’t have them in mind at the time” (ibid.). In offering my reading of both novels, I admit that literary texts can produce meanings not intended by their authors—meanings that are revealed by the reader’s own interpretation (in other words, due to the “birth of the reader”, in the manner of Roland Barthes). However, I argue that some interpretations, in this case the diagnostic one, can be harmful because they can trigger and entrench certain attitudes in the public mind, more so if these interpretations are given in scholarly works that bear a certain degree of authority.

Consider, for example, Foer’s statement following the feedback to his novel, quoted above, that some descriptions can be “fitting”. I think the word “fitting” is crucial here: to find something fitting is precisely the aim of the classificatory approach that ignores inconsistencies in order to simplify the matter and thus ensure its easier consumption and classification. It is also noteworthy that before the novel was eventually adapted into film, the director, Stephen Daldry, had done research on the autistic spectrum (Gilchrist 2011, n.p.). In an interview, he says: “We created our own version of a child that was in some way – not heavily, but somewhere on that spectrum in terms of the fears and the phobias” (ibid.). Oskar has certain fears indeed, yet, if one reads carefully, one will see that most of them are connected with the traumatic event. As Oskar puts it:

> Even after a year, I still had an extremely difficult time doing certain things, like taking showers, for some reason, and getting into elevators, obviously. There was a lot of stuff that made me panicky, like suspension bridges, germs, airplanes, fireworks, Arab people on the subway (even though I’m not racist), Arab people in restaurants and coffee shops and other public places, scaffolding, sewers and subway grates, bags without owners, shoes, people with mustaches, smoke, knots, tall buildings, turbans. (Foer 2006, “Googolplex”)28

Lifton’s research quoted in the previous chapter shows clearly that a much longer time than a year may be needed for survivors to stop being plagued by guilt and fear. It is, therefore, quite evident that his fears and phobias are linked rather to the idea and consequences of trauma than to an uncertain speculation about Oskar’s being “somewhere” on the spectrum. Oskar mentions that a year has passed and, apparently, the September 11 attack and his father’s death in it are implied. Everything Oskar recounts carries today a strong connection with terrorism and

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28 Since an ePUB version of the novel is used for this study, when quoting it, I refer to the names of chapters as they are given in the book.
informs his obsession with being (un)safe. As Judith Herman writes, “traumatic events destroy the victim’s fundamental assumptions about the safety of the world” (1993, ch. 3). The DSM-5 also states that “PTSD is often characterized by a heightened sensitivity to potential threats, including those that are related to the traumatic experience […] and those not related to the traumatic event” (2013, 275-6), so, for example, Oskar’s fear of “taking showers”, which seems unrelated to the terrorist attack, could, in fact, also be a consequence of trauma. Moreover, Oskar’s “inventions”, which I will discuss later, are also directly linked with fears of death and loss and triggered by the traumatic event.

In the following, I will refer to some of the scholarly works that make Christopher’s and Oskar’s “autism” their starting point and the characters’ most defining eature. If we turn to Oskar’s case first, a diagnostic reading of Foer’s novel encounters a certain inconsistency concerning the nature and the prevalence rate of the diagnosis. It is important to note the confusion about the diagnosis in the novel and the film. There is just one moment in the novel when Oskar says that “most of the kids in [his] class have ADD” (“Heavier Boots”). ADD, an abbreviation for attention deficit disorder, is a controversial diagnosis, which may be applied far too often under the influence of certain social factors and, thus, be rather socially constructed. ADD is not easily identifiable and, therefore, covers a very broad range of heterogeneous phenomena (Parens and Johnston 2009). Scholars note that there has been a recent rise, “to epidemic proportions”, in rates of diagnosis of ADHD (attention deficit hyperactivity disorder). They find the cause for the rise in the contemporary cultural perspective: pharmaceutical industries that have their interest in medicalizing the symptoms, competitive markets, family troubles, pressure at school, etc. (Timimi and Taylor 2003). If we take Oskar’s case and consider the trauma of experiencing a terrible loss, it would add to the perspective presented here. Timimi also notes that the medical model is rather harmful: “It offers a decontextualized and simplistic idea that leads to all of us”, he says, “parents, teachers and doctors – disengaging from our social responsibility to raise well-behaved children” (ibid.). It is, thus, not surprising that Oskar mentions that “most of the kids” have ADD in his class—being a socially constructed over-used diagnosis it seems to be applicable to many children. In the film, however, the situation is different: Oskar says that he was tested for Asperger’s (a scene added by the director and absent from the novel), yet there is no information about his being actually diagnosed.

Let us consider the essence of ADD—the only disorder that is named in Foer’s novel. The latest, fifth issue of the DSM names inattention and hyperactivity or impulsivity “that interfere with functioning or development” (2013, 60-61) as the main patterns of ADD behaviour. The DSM states that inattention implies “wandering off task, lacking persistence, having difficulty sustaining focus, and being disorganized” (ibid., 61). It seems hardly possible to apply this to Oskar, since he is extremely persistent in his search for the owner of the key he has found. This
persistence is certainly connected with his desire to be closer to his father, to unconsciously prolong the time he can be with him. Hyperactivity, in its turn, refers to “excessive motor activity” or “restlessness” (ibid.). While some may catch the idea and claim that Oskar’s persistent thoughts of inventing something absurd are a token of his hyperactivity, it is important to note that all of his inventions, as I have already mentioned, are connected with the idea of safety, which is the result of his fears induced by trauma. As for the Asperger’s disorder, it is characterized, according to the DSM 5, by “deficits in social communication and social interaction and restricted repetitive patterns of behaviour, interests, and activities” (ibid., 809). Repetitive patterns may be again connected to Oskar’s inventing and, perhaps, with his desire to wear only white clothes for a reason that he does not name. As for social interaction, Oskar seems quite successful in his communication with many strange families named Black that he visits looking for the thing that his key opens. It is also hard to say that he is inattentive to their feelings, because he notes that Abby Black, for example, is frustrated, even though he does not realize why she cries: because of what he has said or because of her husband yelling in the other room (“The Only Animal”).

One study claims that Oskar “has a hard time understanding his own emotions and relating to (and communicating with) others on an emotional level” (Loftis 2015, 110). The author gives the following example from the novel: Oskar tells one of the Blacks he meets: “I couldn’t tell what he was feeling, because I couldn’t speak the language of his feelings” (“Alive and Alone”). If we read this chapter carefully, we will see that Black is said to lack a good command of English since he is Asian and has lived in Chinatown all along. Oskar feels “guilty” for speaking English because he feels that the man is “nervous” since he does not understand the language. Thus, Oskar’s not “speaking the language of [the man’s] feelings” may refer to the actual Chinese language, which Oskar does not know. The problem here seems to be a language barrier, not Oskar’s disability. It might even be a cultural perspective, since being “confused, or embarrassed, or surprised, or maybe even mad” (ibid.) may be expressed differently and it is often hard to specify the emotion precisely.

Loftis, however, goes further, applying an extremely diagnostic classificatory approach to try to find evidence of autism spectrum disorder and even make the details fit the theory. In the novel, one of Oskar’s inventions is a book that “listed every word in every language. It wouldn’t be a very useful book, but you could hold it and know that everything you could possibly say was in your hands” (“Beautiful and True”). Loftis claims that Oskar “displays the autistic desire to catalog” and that “his constant yearning for human connections but his simultaneous struggle to create and maintain them suggests a common autism stereotype” (2015, 111). I suggest that this is a misunderstanding of Oskar’s intentions: such an invention would show the limited nature of language, its inability to express what needs to be expressed. Such a book could serve as a kind
of justification for the inadequateness of words and their non-correspondence with a person’s feelings. Oskar thinks about the book when he is struggling to fall asleep on the night before going to the cemetery—when he is feeling anxious and unable to balance his thoughts coherently through language. In Chapter 4, I referred to Borges’s story about the mnemonist boy who develops a similar invention: an infinite system of enumeration for every object taking into account the fact that the object changes every moment. The story also tackles the problem of language, namely its lack of precision, and presents an infinite system where no generalization is possible as a dystopian image. All in all, the “bunching” of different neurodevelopmental or autism spectrum disorders does not really help in understanding Oskar’s experiences and behaviours: the classificatory approach merely limits and narrows down his personality. A lot of questions are left untackled: how to deal with language, why Oskar invents, why does he search for the keyhole, why did he not pick up the phone when his father called from the towers, and why confess this to complete strangers but not to his mother? The status of a mental disorder, if taken for granted, becomes a cornerstone for characterizing a person, whether a real person or a character in a novel, and, therefore, for the construction of normality.

I will now analyse the dominant medical interpretation of Haddon’s protagonist, Christopher, as it is presented in the media and in scholarly works. It is important that The Curious Incident presents a way of “seeing the world in a surprising and revealing way” (Haddon 2009, n.p.)—a personal perception of the world with no generalizations or pointing beyond the text. In their comments, reviewers highlight Haddon’s opening “a unique window into the mind of a boy who thinks a little differently” (Freeman 2003, n.p.). Considering that Haddon writes that “good literature is always about peeling labels off” (2009, n.p.), it becomes even more surprising how insistently some scholars hold to the idea of the autistic character. In his blog, Haddon devotes several paragraphs to discussing the medical label applied to his novel: “Labels say nothing about a person”, he notes, “they say only how the rest of us categorize that person. […] Genuinely understanding another human being involves talking and listening to them and finding out what makes them an individual, not what makes them part of a group” (ibid.). It must be amusing to write a novel and ask the reviewers or publishers not to put any derivatives from the word autism on the cover of that novel, and then encounter an article whose first page manifests such a derivative as part of a self-righteous claim: “Christopher is an autistic adolescent” (Freissman 2008, 395). As Haddon writes, “i slightly regret that fact that the word ‘asperger’s’ was used on the cover” (2009, n.p.).

The author of another article on the novel, Shannon Wooden, chooses to view it “as a medical narrative with features common to other accounts of illness and disability” (2011, 276), while Haddon says in an interview concerning the staging of the novel that “it’s not a novel about disability, it’s a novel about difference”
(National Theatre Discover 2012). Although Haddon claims in his blog that he gave Christopher “some rules to live by and some character traits and opinions”, all of which he borrowed from people he knows and “none of whom would be labelled as having a disability” (2009, n.p.), Wooden still writes of “Haddon’s fictional presentation of the experience of autism” (2011, 283). Wooden uses the novel for discussion in the medical classroom, which means that even before reading the novel the students are offered an a priori medical view of it, that is, as a “patient history, a narrative with a clear diagnostic goal” (ibid.). Following the chosen medicalizing approach, Wooden operates within a closed binary system: it is inevitable that when she uses the words “impaired” and “wrong” together to characterize Christopher, she also implies an undisputable correspondence between “normal” and “right”: “Haddon’s omitting the word ‘autism’ puts readers in the doctor’s chair from the first page of the story. Very early, we discover something is ‘wrong’ with Christopher” (ibid.). And she encounters another paradox: “We not only see how we are like Christopher but how much he is like us”, she writes, “as he reports very ‘normal’ thinking” (ibid., 285). As soon as we choose to operate with the terms “right” or “wrong” (“normal”/ “abnormal”), we find ourselves trapped, as we have set rigid categories for ourselves and cannot but categorize. The question of what is the norm is central to the current study: both the philosophical and the sociological sections of the theoretical chapter are mostly dedicated to finding an appropriate definition of norm and deviance. The main fault of the normalizing approach lies here: it fails to categorize human experience because it lacks halftones. Realizing that halftones are always at work in a seemingly black-and-white world is a frightening issue, as it opens up a space of ambiguity. When Wooden suggests that the story “invites diagnostic reading even without the DSM” (ibid., 283), this view becomes a form of appropriation, which results in the need to diagnose a mental disorder followed by an attempt to ignore everything that does not fit into the diagnosis, or an attempt to leave this trap by recourse to the “normal thinking”, that is, human thinking seen through the medical lens. Such an appropriation is assumed to be reasonable when the binary of normal and impaired thinking generally appears natural, rather than artificially constructed. Constructedness involves uncertainty and unsteadiness: as Derrida has remarked on the origins of deconstruction, “one of the gestures of deconstruction is not to naturalize what isn’t natural” (Kirby and Koffman 2005, 64-5). If something is considered natural, the authority of the source is not questioned—the dominant interpretation is imposed as universal and the burden of other interpretations is abandoned.

What is also abandoned is responsibility, because the universal comes to stand for the normal and the absolute. In Chapter 2, I discussed Bakhtin’s dialogue theory and his juxtaposition of the “repetitiveness” of the truth to the never-repeatable character of the unique lived experience. Bakhtin’s dialogue theory and his idea of the primacy of personal responsibility are crucial to understanding alterity.
idea of unfinalizability consists in supporting dialogical relations that allow one to face alterity or otherness without trying to appropriate the other’s position (this kind of appropriating is at work when labels are given to Christopher or Oskar). Bakhtin’s notion of *vzhivanie* (an ability to empathize with another person’s frame of reference) presupposes the maintenance of one’s own place, the irreducibility of alterity, while at the same time respecting the other: being is thus impoverished when dialogue is no longer possible or sustained. The attempt to reduce the other to a set of symptoms that “fit” (to use Foer’s word) is a failed dialogue. When the other’s outsidedness, otherness or alterity is not respected, it is reduced. As long as there are given categories, people tend to believe they know perfectly well what kind of person they are dealing with and that they can actually predict how and, more important in connection with the novel, *why*, he or she will behave as he or she does. Stereotyping works as a rejection of alterity and results in a dehumanizing prediction of the other, an attempt to finalize them or build a “simplified mental cartoon” of them (Goode 1978, 89).

Taking responsibility when encountering the other implies taking responsibility for an interpretation. Such an interpretation is inevitable: there is no pure absolute knowledge of the other. To illustrate this, I have already referred to James Mensch’s book on alterity in Chapter 2. He writes that any time we deal with others, we should be aware that there is a hiddenness, that is, an alterity, that cannot be overcome. If “we fail to recognize the humanity of the other” we “reduce him to a thing or an animal” (Mensch 2005, 117). In this sense, the classificatory approach is an attempt to calculate the other and therefore reduce the other’s alterity, which is incalculable. As I have argued, the reason for the denial of alterity is fear, whose foundation is the failure to comprehend the other’s alterity. When rationality denies something, it seeks to banish it, or rather domesticate it, that is reduce it or make it appropriate for a rational understanding. Derrida’s refusal to “domesticate” alterity is of the same nature: when he refuses to eliminate alterity, he wishes to renounce the philosophic aspiration to arrive at the ultimate truth, to gain an objective universal knowledge. I have called the world of domesticated alterity a void space because everything within it is classified and in its place. I suggest that instead of reducing alterity, reducing the fear of alterity should be targeted since it reveals the mechanism of classification and complicates the binary of norm and deviance. Moreover, the possibility of ambiguity or lack of closure must also be considered. Later in this chapter I will draw attention to the absence of closure in both of the novels.

Continuing with the idea of the responsibility of interpretation, it is important to note that Foer’s and Haddon’s stories include different meanings and possibilities for interpretation; however, they are, first and foremost, voices of certain individuals. Once such a voice is made to point beyond itself, that is, becomes symbolic, it is put into a single critical frame. I agree with Sarah Ray who writes about *The Curious Incident* that “the novel avoids turning Christopher into a story...
about anything else but him” (2013, n.p.). At the same time, another scholar, Sonya Loftis, suggests that both Christopher and Oskar “function in their fictional worlds as symbols for larger social concerns” and “become symbols that reflect outward”: “These autistic children stand in for larger cultural anxieties”, she continues (2015, 108). Similarly, Kravitz speaks of the “late capitalist reality of the postmodern world” and treats Christopher as a metaphor for the “autistic state of affairs” (2010, 40). Such an approach is a very tempting one indeed: it is common in traditional literary studies to search for symbolic meaning and to think that you have succeeded in finding the only possible, true meaning. The problem is that such symbolization distracts the reader’s attention from the very character of his or her own experience, which should neither be generalizable nor stand for something beyond it. It is clear that Oskar and Christopher might not belong to the range of easy graspable or easy-going characters, they might not always act responsible, yet this is what makes their behaviour human: their struggles, confusion, and fears, which extend the idea of the norm. It is interesting that Oskar seems to treat the word normal as derogatory: when he writes a letter to Stephen Hawking, he says that he “thought he [Hawking] wasn’t going to respond, because he was such an amazing person and I was so normal” (“What The”).

Loftis also attempts to make the autistic idea generalizable and, thus, turns the entire narrative on its head: “Seeing Oskar as an autistic character may help readers to see that these are problems [communication and connection] for all people, not just autistic people” (2015, 124). I suggest that things are the other way around: seeing Oskar (as well as both his father and grandfather, as Loftis does) as autistic might signal that the incommunicability of experience applies exclusively to people on the autistic spectrum. As Haddon says about Christopher, “no one is ever really a stranger. We cling to the belief that we share nothing with certain people. It’s rubbish” (2004, n.p.). He also wishes that Christopher’s “particular difference was not a source of fascination or fear for many other people” (ibid.). Loftis’s approach might increase the stigma of autism and it might medicalize the experience. I admit that the experience could be medicalized if the diagnosis of PTSD is implied, yet Loftis does not mention PTSD.

The authentic perspectives and sincere manner of both narratives are important for the deconstruction of the universal criteria of being “normal” or having a “normal perspective” on the world. The personal stories of Christopher and Oskar are devalued by interpreting them solely through the lens of normality. This results in engaging in diagnostic thinking that cannot accept a different perspective, and therefore in rendering such a perspective deviant, non-human or not valuable. “Series of interpretations” in their own right are not responsible for the devaluation of personal stories—unlike the belief that classification can help achieve an absolute truth beyond personal experience. It is the absoluteness of the ultimate diagnosis that is questioned, rather than the value of the personal experience put into story—whether it is an incoherent or a detective form, or both as in Foer’s novel. Such a
questioning is inevitable if the attitude towards the norm as something given or natural is to be challenged. Social constructions, such as normality, are most powerful if considered natural, as human experience and its interpretations can vary to the extreme. One of the main interests of deconstruction is to advance critical thinking and see how dominant interpretations tend to fit themselves into any context, thus surpassing all other interpretations. In a sense, this is what the classificatory approach to the novels generates: in the case of the personal narratives depicted in Haddon’s and Foer’s books the overwhelming dominant frame seems to be the medical one. As soon as it is applied, the diagnostic label is also applied. As a result, the phenomenological criterion of “illuminating the subject’s view and interpreting the world as it appears to him” (Matza 1969: 15-16, original emphasis) is flawed.

A non-binary approach to Haddon’s novel can throw some light on the inconsistencies that the classificatory approach may encounter. For example, it seems strange to Wooden that the ending of The Curious Incident is not a happy one: “Our sadness at the end may come from the feeling that we’ve been tricked into expecting a recognizably happy ending”. And therefore “the book feels sad and frustrating” (2011, 288). I argue that the ending would not seem paradoxical if the story had not been turned into an illness narrative. The latter type of writing typically offers a story of a cure in which the person with the illness or disorder manages to cope with it. The problem with The Curious Incident, in Wooden’s reading at least, is that it is not (and not supposed to be) an illness narrative and, consequently, no cure is possible (moreover, even illness narratives should not require a happy ending [see Couser 2012]). My view is supported by what the playwright Simon Stephens, who has adapted the novel for the stage, says: “I talked to Mark [Haddon] about this and he said that he never found the ending of the novel, he never intended the ending of the novel, to be entirely optimistic” (Ue 2014, 117). If the novel is considered in the context of human experience rather than under the medicalizing or normalizing gaze, which fails to see a human behind the “diagnostic goal”, the story does not necessarily seem frustrating or the ending “sad”.

A similar observation can be made about the ending of Foer’s novel. The reaction to it is, however, the opposite: some scholars write that the end of the novel is conciliatory, that is, it “restores broken connections and heralds a return to true normalcy” (Versluys 2009, 118). Versluys continues that the end signifies that “in an act of love, all that violence destroyed can be mended; that the lost sense of security can be recovered [… ] love conquers the suffering of generations” (ibid.) While an optimistic one, such a view of the end of the novel is controversial. The novel ends with Oskar’s act of ripping the photos of a man falling from the World Trade Center from his daybook and reversing the order, so that the man does not fall but, on the contrary, floats up into the sky. Oskar contemplates the possibility of playing all the events before the terrorist attack backwards—his father being alive and
coming home, unbrushing his teeth, singing the song backwards—and concludes: “We would have been safe” (“Beautiful and True”). These are the last words of the novel; turning time back seems to be another of Oskar’s inventions concerned with safety, every bit as impossible as the others. Thus, I would dispute the idea of an all-mending love in regard to Foer’s novel, but rather pay attention to the deconstruction of the idea that a confessional narrative completely alleviates the pain in the aftermath of a traumatic event. Thus, neither Foer’s nor Haddon’s novel present any immediate closure that can be characterized as a happy or sad ending. Both Christopher’s and Oskar’s lives continue to run their course. Loftis’s article quoted above attempts to see Foer’s novel as an illness narrative, as does Wooden’s article labelling Haddon’s novel similarly. Loftis also tries to define what the director Daldry calls Oskar’s being “somewhere” on the spectrum. The result of such a search is daunting: it seems that the main objective is to classify the boy’s behaviour whatever it takes: “Oskar’s adventures”, she writes, “have ‘cured’ his sensory issues, and that his father’s love has enabled him to overcome his disability” (2015, 116). She even calls such an ending damaging because it shows that “one can ‘cure’ oneself of autism through courage” (ibid.). A sleight of logic occurs here: in taking Oskar’s “disability” for granted the notion of a cure, possible or otherwise, has to be shoehorned in the cure is a prerogative of conventional illness narratives, or rather of the readers’ expectations of such narratives. In my reading, the idea of a cure is inapplicable to Foer’s novel for several reasons. One of them is the lack of a strictly happy ending either for Oskar or his family: Grandpa and Grandma do not manage to come to terms with their own traumas or mend their relationships.

Loftis goes further still, diagnosing Oskar’s father, Thomas Schell, and Grandpa as autistic as well: “The novel hints that Oskar may have inherited his autistic tendencies from them: certainly, both grandfather and grandson have a communication disorder, leaving a symbolic stigma on the men in the Schell family” (2015, 116). It is hard to believe that the novel could “hint” at this, as there was no intention of picturing disability from the author’s side. Grandpa’s communicative disorder and his abandonment of Grandma are presented as fully trauma-induced: he loses the ability to speak after losing his beloved Anna and family in the Dresden bombings. There is no hint about his being autistic before the bombings. As for the father, he is accused of preferring definitiveness and being “pedantic, detail oriented” (ibid., 117). It could be suggested that a search for details is central to the theme of the novel and, unless seen as a token of autism running in the family, appears to underlie the entire plot and narration. Thomas would give Oskar different clues to find something as way of learning the game. Oskar loved the game and always asked for more clues: “Can’t you even tell me if I’m on the right track? […] if you don’t tell me anything, how can I ever be right?” To which his father answered: “Another way of looking at it would be, how could you ever be wrong?” (“What The”). The latter utterance by Thomas could rather be assigned
to a deconstructionist than a person who wants everything to be definite and teaches definitivity to his son. Fond of these games, Oskar uses his searching skills when looking for the keyhole and is inspired by his father’s encouragement to never stop looking. There are other moments in the novel that point to the idea of unknowability and how language is a product of it. Oskar writes several letters to Stephen Hawking and eventually gets an answer:

> Albert Einstein, a hero of mine, once wrote, ‘Our situation is the following. We are standing in front of a closed box which we cannot open.’
> I’m sure I don’t have to tell you that the vast majority of the universe is composed of dark matter. The fragile balance depends on things we’ll never be able to see, hear, smell, taste, or touch. (“A Simple Solution to an Impossible Problem”)

Even though Oskar wants to get definite answers to certain questions, he has to realize by the end of the story that some closed boxes will not open and his father also teaches him to see the world as a riddle. Thus, shocked by the images of people jumping from the towers, he cannot but think about how his father actually died. Even though these thoughts bring extreme suffering to Oskar, he will never open this box. I will analyse the concept of death in more detail in the Foer section.

There is, however, one person who seems to favour definitiveness. There has been very little critical analysis done on the personality of Oskar’s neighbour, the more than a hundred-year-old Mr. Black. Yet, I wonder why Mr. Black is not called autistic, too, since, similarly to how Oskar wants to compile a dictionary of every possible utterance, Mr. Black has filled his flat with things collected during the wars he has served in and has also made a huge catalogue of people he met or read about. The interesting point is that every entry in his catalogue consists of a name and a just one-word biography: “Everyone gets boiled down to one word!” he tells Oskar and says that it is very helpful (“Heavier Boots”). In a sense, Mr. Black’s approach is one of extreme definitiveness, yet he does not need to create new signs like Funes the Memorious or to write continuously like Grandpa, as he manages with just one word. This reflects one of the paradoxes of language: a thousand words will fail to communicate our experience, yet just one word can express far more than we can embrace or comprehend:

> “Manuel Escobar: unionist!” “But he’s also probably a husband, or dad, or Beatles fan, or jogger, or who knows what else.” “Sure! You could write a book about Manuel Escobar! And that would leave things out, too! You could write ten books! You could never stop writing!” (ibid.)

When accused of relativism, Derrida used to point out that there can be no indeterminacy since “a word in the text is always determined” and “the text is complicated, there are many meanings struggling with one another, there are
tensions and over-determinations” (1999b, 79). However, at the same time he points to undecidabilities and to what Keats refers to as “negative capability” (Keats 1899). Paradoxically, both determinacy and undecidability come hand in hand and Mr. Black’s catalogue is a good example of any word being extremely determined but at the same time “leaving things out”.

Even if we put autism aside and contemplate whether there is any cure from the trauma in the novel, there would not be a definitive answer. Judith Herman, for example, speaks of “recovery” in her work Trauma and Recovery (1992) that unfolds in three stages including the establishment of safety, mourning and, finally, reconnection with ordinary life, when a person “is ready to engage more actively in the world” (1997, ch. 8; 10). This scheme is, in a way, applicable to Oskar’s situation, yet there is nothing mentioned about a cure, which is, anyway, too strong a word. The Oxford Dictionary explains the verb “to cure” by referring to such associations as “to relieve of” or “to eliminate” a disease, and even “to solve” (Oxford Living Dictionaries, “Cure”). All of these associations carry the idea of liquidation, returning to a person’s pre-illness or pre-trauma self. It seems that the conventional understanding of illness or trauma narratives implies that there is such a return. However, one of the common rhetorics that “reinforce conventional attitudes” distinguished by Couser, is the “triumph over adversity”, which implies that a person creates a narrative of his or her “overcoming of the obstacles posed by disability” (2001a, 80). Couser adds that this rhetoric does not represent the experience of most people, and, moreover, it appears that difference is thus presented as nothing but a problem.

As I have already shown in Chapter 6 while discussing The Shock of the Fall, the attempt to build sound bridges between the pre-trauma self and the current self is futile. Matthew in Nathan Filer’s novel does not seem to be completely absolved or “cured” of his guilt, let alone of the schizophrenia that has become a significant part of his current, post-confessional self. While addressing the selves of traumatized people, Herman mentions that “the identity they have formed prior to the trauma is irrevocably destroyed” (1997, ch. 8) and that they have to form a new self with a transformed system of beliefs. Lifton expresses a similar view, saying that “in extreme involvements” trauma creates a second, that is, traumatized self, since “one’s sense of self is radically altered” (Caruth and Lifton 1995, 136). This also affects the “doubling” that I discussed in Chapter 6 in terms of Matthew’s selves. In an interview, the director Daldry seems to speak wisdom when he says that Extremely Loud is a story about “a family in catastrophic grief who start to re-form” and adds: “I don’t think I’m talking about healing, I’m talking about a family that’s beginning to come together after that terrible loss” (Gilchrist 2011, n.p.; emphasis added). It is important to emphasize that the family is only “beginning” to reconcile, since even though Grandpa returns home, it is questionable whether there can be a true connection between him and Grandma. As for Oskar, he has achieved certain things: he has filled his father’s empty grave with letters, he has
found the owner of the key, yet it has not made him happy, as the key appears to have nothing to do with his father and he still wishes to turn back time.

In this section, I have demonstrated the dangers that extreme medicalization may involve in interpreting the unconventional narration in the two novels. Apart from giving a biased interpretation of the characters that ignores their alterity, a strictly medical approach often goes along with similar stereotyping in real life (see, e.g., Sklar 2013). By comparing similar normative attitudes towards Oskar and Christopher, I have shown how they can reduce an individual human experience to a symbol, a metaphor, or a consequence of a certain diagnosis. In the following two sections, I will provide a more detailed analysis of each novel. First, I look at Haddon’s novel and present a reading that aims to deconstruct the built-in fundamental assumptions concerning normality by demonstrating how social and linguistic conventions are challenged and their inconsistencies laid bare. This will show that there is no single perspective on difference and subjective experience. Conventional assumptions shape the interpretation of the characters, depriving them of their humanity, that is, the condition required for retaining their alterity, their right to be unique without being labelled deviant. In the second analysis, I will focus on the notion of traumatic experience in Foer’s novel and the effect of trauma on the characters’ ability to mediate their experiences by language, that is, to share and articulate their emotions.

7.2 NORM AND ALTERITY IN THE CURIOUS INCIDENT OF A DOG IN THE NIGHT-TIME

In recent years Haddon’s novel has gained almost iconic status. Consequently, scholars have approached it from various perspectives ranging from analysing the reader’s response (Caracciolo 2014) and the educational angle (Hladnik 2011) to emphasizing the importance of detective discourse (Gilbert 2005). However, all of these mentioned works take “autism” as their starting point.

Against the theoretical backdrop of alterity and responsibility presented in Chapter 2 and in the section above, I would like to analyse one emblematic issue that is important for Haddon’s text, namely the system of rules. Haddon mentions that he gave Christopher some rules and opinions, which becomes clear in the course of reading the novel. Christopher says he “likes things to be in a nice order” (ch. 47) and when he passes four red cars in a row it means a “Good Day”, five red cars in a row a “Super Good Day”, while four yellow cars in a row make it a “Black Day”. He also mentions that formulating a plan makes him feel better because “there was something in my head that had an order and a pattern and I just had to follow the instructions” (ch. 179). To stay calm, he regularly performs deep breathing, as it helps him to do things to a rhythm when he is frightened or angry.

29 A Kindle version of the novel is used in this study. When quoting, I refer to the number of the chapter. Haddon uses only prime numbers for chapters in the novel.
Christopher uses prime numbers to index the chapters in his story because he thinks that “prime numbers are what is left when you have taken all the patterns away”; “I think”, he continues, “prime numbers are like life. They are very logical but you could never work out the rules, even if you spent all your time thinking about them” (ch. 19). One critic claims that Christopher is mind-blinded because he “has a hunch that rule-based models do not suffice for recording his experience” yet cannot do anything about it (Freissman 2008, 401). This is one feature often attributed to people with autism. Freissman claims that the “fictional representation of autistic experience” is the starting point for his article, in which he further refers to the etymology of the word “autism” and to the Diagnostic and Statistical Manual of Mental Disorders, thus arriving at such notions as impairment and disorder. Therefore, Christopher is referred to as a limited narrator: “His report is honest but his perspective and his knowledge are severely limited in comparison with ordinary persons” (ibid., 396). However, one crucial thing is missing in such an approach to Christopher. The boy tries to find some inner logic in everything he sees (as he sees it), and loves order (as he understands it). But so do “ordinary persons”. It is actually the “ordinary person” who would like everything to be as easy as possible, who wishes that understanding the other is as easy and logical as prime numbers. While encountering a person, they would like to follow the already worked-out rules in an unquestioning manner. As can be seen, some readers make their judgments regarding Christopher along these lines: they treat Christopher according to the rules of medical diagnosis, and his story according to the rules of an illness narrative.

Freissman also suggests that Christopher’s interpretation of events is “disrupted”, that there is a discrepancy between his interpretation and those of others (ibid., 396, 411). Again, this begs the question: Isn’t this natural? Yet Freissman continues that Christopher’s “taking everything at face value and, thus, missing the truth” is a way of “being stupid” (ibid., 412). Here, again, it could be asked: Whose truth?—since there is never only one truthful interpretation of events, and what is described in the novel is Christopher’s interpretation and his rules, limited in the same way as all other interpretations, because they are always mediated, not absolute. To return to the theory of unreliable narration, it is noteworthy that scholars admit that the degree of the narrator’s unreliability depends on the degree to which “readers will try to relate what the text tells them to a level of ordinary human concerns, to the actions and reactions of characters constructed in accordance with models of integrity and coherence” (Culler 1975, 144). This confirms once again Nünning’s remark that the narrator’s unreliability depends on the norms and conventions that the reader holds.

Christopher says that he likes dogs because “you always know what a dog is thinking. It has four moods. Happy, sad, cross and concentrating. Also, dogs are faithful and they do not tell lies because they cannot talk” (ch. 5). The range of human emotions is much more diverse, and attempts to express the lived
experience through language are often failures, as there is no such thing as absolute understanding or transparency (Mensch 2005, 2). Yet Christopher presents a revealing image of small talk that is, in fact, governed by a similarly simplified range of emotions and results in a generalized expression of happiness or sadness: “I didn’t reply to this either because Mrs. Alexander was doing what is called chatting, where people say things to each other which aren’t questions and answers and aren’t connected” (ch. 67). Christopher’s refusal to sustain a small talk following certain rules could serve as a cause for collapsed communication described by Anthony Giddens (1987) in his book on social theory to demonstrate the anxiety that appears when the interactant fails to follow the tacit rules of interaction (see Chapter 2). In this sense, Christopher could be called an embarrassing interactant, as he refuses to follow the conventions unquestionably.

If Christopher’s perspective is limited, it does not mean that the perspective of an “ordinary” person is not limited or any “better”. At the same time, Christopher’s perspective is highly insightful since he questions conventions. A difference can be found here between the ways in which Christopher and an “ordinary” person treats the origin of rules. Christopher’s perspective can be called more explicit: Christopher definitely notes the inconsistency in people’s behaviour and does not hesitate to express his opinion or to ask questions. Christopher notices that people do break rules but in a weird manner: “In the Bible it says Thou shalt not kill but there were the Crusades and two world wars and the Gulf War and there were Christians killing people in all of them” (ch. 59). He knows his own rules well because he has created them to make himself comfortable. But he also sees that other people break rules because they are not their own, but rather imposed on them and accepted without reflection. This is the crucial thing that only a deconstructive approach can spotlight: the “ordinary person” reading the novel considers Christopher mind-blinded because of his own interpretation and his strange system of rules. The ordinary person strengthens his or her conviction that he or she is absolutely normal because Christopher is the one who is not. Thus, the ordinary person creates a certain point of reference against which to measure norm and deviance and finds the binary opposition comforting as it promises order. A question arises whether the reader’s attitude towards Christopher’s “planning” would change if the cover of the book did not mention autism at all. The reader would not be guided by the reviewer’s interpretation but would focus on the story as an immediate lived experience. It is therefore remarkable that the only mention of the notion of special needs is located far from the beginning of the novel. This idea is also debunked by Christopher himself when he says that it is stupid to say that someone has learning difficulties or special needs in his class: he mentions that his teacher “has glasses so thick that they give you a headache if you borrow them” and his father has to take pills but “none of these people are Special Needs, even if they have special needs” (ch. 71). Also, there are behavioural problems that Christopher lists himself, such as hating France, not liking being in really small
places with other people and not liking being touched. What is more, the reader does not actually know why Christopher is in this class, considering he has taken A-level maths and wants to go to university, while a boy from a standard class “is most likely to end up in prison” (ch. 47), as Christopher’s father says.

Yet another assumption that Christopher debunks is why he likes mathematics. It is generally believed that autistic people are good at maths (Baron-Cohen et al. 2007) and Christopher’s teacher tells him that “he [Christopher] liked maths because it was safe” and “there was always a straightforward answer at the end” (ch. 101). But, according to Christopher, the teacher does not understand numbers, as numbers are not straightforward at all. To illustrate the idea, he tells a story about The Monty Hall Problem and how the academic world accused Marilyn vos Savant, a woman with the highest recorded IQ, of a mistake. In graphic form, Christopher proves that she was right as she used logic instead of intuition.

Whatever the right answer to the problem is, it is difficult to claim that Christopher tries to “avoid the ambiguities of storytelling” as if likening it to “solving a mathematical problem” (Freissman 2008, 400).

What is important here is how Christopher takes time to go into the details of different opinions of the problem to demonstrate one out of hundreds of cases of ambiguity and paradox in mathematics. However, mathematicians are also interested in ambiguity and find parallels between mathematics and poststructural philosophy. Consider, for example, an interesting collection of essays Mathematics Education and Philosophy: An International Perspective (1991). The collection contains several essays on the poststructural critique of mathematical learning and the problem of closure in mathematics (Earnest 2005). It is mathematics for Christopher that demonstrates the inconsistency of generalizations. To prove his view, he tells a joke that appears to be an insightful remark that characterizes a mathematician but at the same time also characterizes stereotyping—three men on a train enter Scotland and see a brown cow: “And the economist says, ‘Look, the cows in Scotland are brown’. And the logician says, ‘No. There are cows in Scotland of which one at least is brown’. And the mathematician says, ‘No. There is at least one cow in Scotland, of which one side appears to be brown’” (ch. 181). While for Christopher this signifies the need to be observant, he realizes that even cows cannot be generalized, let alone people. People are not cows and they “do things that you don’t expect, so you have to notice everything that is in the place, and also you have to notice things that might happen as well” (ibid.). This realization makes it difficult for him to be in a crowd, feeling it to be like a jammed computer processor. It is, thus, Christopher who highlights the fact that the other’s intentions and the other’s alterity are not transparent and cannot always be calculated.

Christopher’s debunking of the notion of special needs demonstrates the crucial role of language in shaping one’s attitude towards a person. Language creates a trap that furnishes the notion of special needs with specific connotations. As a result, the word “autism” on the cover of the book and the special needs class make
Christopher “a social outcast, other” and cause “the breakup of his nuclear family—an important symbol of ‘normalcy’ in Western society” (Ray 2013, n.p.). This latter remark by Ray is important: was it the fear of stigma or, perhaps, of responsibility that made Christopher’s mother leave home? It is notable that Christopher has always found language confusing—he finds out that his father had lied to him all along: his mother is not dead as he had been told.

Christopher is suspicious of language because he observes its inconsistencies and conventional nature. “I do not always do what I am told”, he says, “And this is because when people tell you what to do it is usually confusing and does not make sense” (ch. 59). Through his eyes the reader sees the constructedness of certain assumptions and how people wish to escape the responsibility grounded in the need to explain their assumptions. Christopher asks the “why” question when something seems confusing or ungrounded to him. Christopher is told that his supposedly dead mother went to heaven; when he asks where that is, the Reverend Peters tells him that it is not in our universe. But such an answer is just a shake in the air for someone looking for an unbiased explanation. “I said there wasn’t anything outside the universe”, Christopher writes, “except that there might be if you went through a black hole. [...] I think people believe in heaven because they don’t like the idea of dying”. “Well, when I say that heaven is outside the universe it’s really just a manner of speaking”, answered the Reverend Peters, “I suppose what it really means is that they are with God” (ch. 61). When Christopher asks where God is, the Reverend Peters answers that they should talk about this when they have more time. Christopher’s desire to know more than what is presented to him as an established truth bewilders those around him, who often fail to answer his questions or explain metaphors. Christopher gives his own interpretation of the meaning of heaven, but the reverend fails to do so. Also established are certain “manners of speaking” and metaphors, which are a matter of convention. Their origin is either long forgotten or filled with very specific meanings that deprive Christopher, as he sees it, of his individuality. He knows that his name is a metaphor and has a specific meaning: “Mother used to say that it meant Christopher was a nice name because it was a story about being kind and helpful, but I do not want my name to mean a story about being kind and helpful. I want my name to mean me” (ch. 29). Similarly, Haddon’s novel aims to present Christopher’s perspective and his story, in other words, to introduce the individual character, and not an illness narrative or “a book about the limits of narrative” (Freissman 2008, 414). It should be noted here that Couser criticizes the tendency of disability narratives to “individualize the condition” and, thus, “reinforce stigma” (2001a, 89). Speaking for a “class of marginalized individuals” (ibid.) might be more beneficial for the sake of challenging the societal representation of disability. However, seeing Christopher as an individual seems a crucial thing to do in order to avoid labelling. Reading the book as an illness narrative would turn Christopher’s dislike of metaphors into a symptom of autism for, as Happe notes,
figurative language “remains a mystery” (1995, 276) for people with autism. A refusal to speak in metaphors is opposed to the “normal” ability of “mind reading” and “predicting” (ibid., 278) actions, where predicting is “making intentions about others’ mental states” (ibid., 280). However, it remains uncertain whether such “normal” intentions take the others’ alterity into account or not.

Discussing the novel, the scholar Stuart Murray claims that Haddon’s novel “does offer opportunities to be read metaphorically, but there is a crucial difference between this and creating a use of autism in such a mode” (2008, 48). While recognizing Christopher’s individuality, Murray considers him autistic a priori. Moreover, since Christopher is placed by Haddon in the centre of the fictional world, the book, which is “suffused by a disabled viewpoint”, according to Murray, “normalizes that viewpoint to the extent that […] the disability vanishes” (ibid.; emphasis added). Apparently, Murray places the novel in the disability literature section. Moreover, as Nielsen and others note, “reading with the assumption that a story is fictive” differs greatly from “reading with the assumption that the story is not fictive” (2015, 67). It seems that the awareness of the fictive or non-fictive nature of a text limits the possibilities for its interpretation and creates certain preconceptions in the mind of the reader. The same can be said about Oskar: while a fictional character, he invites our empathy in certain ways. It is known that “reading might contribute to the cultivation of empathy” (Keen 2007, 11).

Christopher also interprets responsibility in an original way: he knows he is responsible for himself and his pet rat. There is an interesting example of responsibility in a novel narrated in a style reminiscent of Christopher’s reflections—Naïve. Super (1996) by the Norwegian author Erlend Loe. It is noteworthy that the protagonist of Loe’s novel is not described as autistic on the book cover and is not treated as such by reviewers, even though his behaviour can be considered no less “unconventional” than Christopher’s. The Times, for example, claims that the narrator “recalls Holden Caulfield”, which immediately places Loe’s novel in the Bildungsroman category. Why cannot The Curious Incident be placed in the same category, instead of being read as an illness narrative? In the introduction I mentioned Mitchell and Snyder’s notion of the “inexhaustibility” of narratives of deviance; however, disability, they claim, becomes “the textual obstacle” to the open-endedness of narratives, since the narratives appear to be “closed down” and eventually metaphorized (2001, 50).

Christopher reflects a great deal on the universe and the stars and the ancient light they emit. “Some of the stars don’t even exist anymore because their light has taken so long to get to us that they are already dead”, Christopher writes, “and that makes you seem very small, and if you have difficult things in your life it is nice to think that they are what is called negligible, which means that they are so small you don’t have to take them into account” (ch. 179; original emphasis). Loe’s main

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character, whose name is not mentioned, reflects on the expansion of the universe, too. He reads in a scholarly book that “the total number of galaxies in the universe seems to be in the region of ten billion” (Loe 2011, n.p.). “These numbers are so absurd”, he says, “that I strangely enough find myself in a good mood. It’s all so immense. [...] There is so little I can do to make a difference. It is liberating. My own responsibility is decreasing considerably” (ibid.). In Christopher’s case, this realization is something that everyone can work out for themselves, without deferring to the wisdom of others. This “good feeling of freedom from responsibility” (ibid.) is not only felt by these fictional characters, for whom “the ambiguities of human interactions are a constant nightmare” (2008, 395), as Freissman insists. Freissman speaks about the “nightmare” from the point of view of an autistic person, perhaps overlooking the fact that human interaction is complex in general and that these “general” difficulties differ from the real “nightmare”. It is the reader as an interpreter, and the human as an interactant, who flees from responsibility. As a result, the relieving feeling of being small is characteristic of anyone who engages in the process of stereotyping, which stems from or leads to the abandonment of responsibility. The ambiguities of human interaction presuppose the acts of interpreting and being interpreted, taking up the burden of responsibility or otherwise, ending up with generalizations and (someone else’s) imposed determination. Irresponsibility is failing to see that the other interprets things in his or her own way, and thus both Christopher’s and Oskar’s stories are stories of their perspectives, whether they live up to the reader’s expectations or not. It is this form of irresponsibility that Christopher notices when he says that people are not cows and can do things others do not expect from them. Mensch puts it as follows: “To intend a person is, however, to expect that not all of my expectations will be confirmed” (2005, 9).

This section has not claimed that Christopher is always responsive to the others. It is clear that his words are not always in line with his actions. Christopher does not realize the trouble he generates when he leaves his father’s house, hides from the police and makes his way to London all alone. Christopher’s idiosyncratic outlook cannot prevent his acts from affecting the world around him and, as mentioned above, his acts are not idealized, either in the texts or in the current study. Simon Stephens notes that, when contemplating the creation of the play based on The Curious Incident, he searched for the “gap between things that Christopher does and the things that Christopher realizes that he does” (Ue 2014, 116). This gap between doing and imagining, he continues, is something everyone can and should recognize in oneself: “I think that’s where we recognize ourselves in Christopher’s humanity, in our own humanity” (ibid.). The main idea of this observation is that humans often act irresponsibly regardless of whether they think “differently” or in binary notions (where thinking in binaries is irresponsible indeed). Recognizing the other’s humanity is a crucial part of the form of responsibility that preserves the other’s alterity, whereas stereotyping is a
“concealment” (Mensch 2005, 11) of that humanity. Wishing for “small” responsibility is denying the other the opportunity to differ from the expected, appropriating the other’s alterity, and reducing the other to an object. “The expected” stands there for the supposedly normal, as it is understood when the dominant discourse guides one’s interpretation, thus securing that “small” responsibility.

I have analysed Haddon’s novel from the point of view of Christopher’s subjective perspective, which is illuminating in its challenging of both social and linguistic conventions. As the inconsistencies of those conventions become apparent, the notion of the norm departs from its matter-of-course nature and ceases to be part of the norm-deviance binary. I have demonstrated that medical interpretations not only neglect the non-dominant interpretations but, what is more crucial, deprive Christopher of his humanity, making his perspective a manifestation of symptoms of a developmental disorder. However, this chapter certainly does not claim that the medical approach to literary works should be utterly condemned. There are autobiographical (see Chapter 5) as well as fictional texts (see Chapter 4) that appear to be very helpful in providing insight into the minds of people with mental illness and thus assisting in the treatment of patients with similar symptoms. However, the texts analysed in this chapter are of a different nature in that they resist the medical approach, calling us not to medicalize what is not medical.

This section has aimed at doing so by revising existing assumptions concerning deviance in both public and academic thinking. In scholarly discourse there is a persistent tendency to juxtapose literary characters and certain psychiatric diagnoses. For example, Charles Harwell’s Disordered Personalities in Literature was published as far back as 1980 and Glenn Rohrer’s Mental Health In Literature: Literary Lunacy and Lucidity published in 2005. Both works accompany their descriptions of literary characters with labels associated with the DSM. Such an approach shows the sole clinical picture of the characters’ behaviour and thus reduces them to one-dimensional figures. As I have argued, such an attitude proves to be too simplistic in its proneness to the norm and deviance dichotomy.

In the next section, I will discuss in detail the trauma narrative of Foer’s novel and its positioning of the September 11 attack among the most notorious traumatizing events of the twentieth and twenty-first centuries. The idea that language fails people who experience trauma and feel a deep need to confess or somehow balance and express their emotions permeates the novel and raises crucial questions regarding the possibility and necessity of testimony. Every member of Oskar’s family and every person with the last name Black that Oskar encounters each appears to have their own story, many of which are concerned with loss and are predicated on the unspeakability of the experience. As Daldry says, “everybody’s got their own 9/11 stories”, “everybody has their own way of looking at it” and, even though it is “too much” and too difficult for some, there
“has to be a personal response” (ibid.). I think the range of personal responses to traumas is what Foer’s novel manages to outline without any explicit value judgments.

7.3 TRAUMATIC EVENTS IN EXTREMELY LOUD & INCREDIBLY CLOSE

It is interesting that the traumatic events forming the background of the novel, the Dresden bombings and the 9/11 attack, are not actually described in detail. In their letters, Grandpa and Grandma write more about their reflections after the event or, in the case of Grandma, focus more on the people around—those living with her sister Anna and also (not)living with Grandpa. The sequence of events of the terrorist attack is likewise not described and it is present only via running images on TV and Oskar’s father’s phone calls. There may be different reasons for this. On the one hand, Caruth says that the “overwhelming immediacy” of the event produces the uncertainty of the narrative (1995, 6). It could be claimed that the event is slipping away from the narrative, even though it is always undeniably present. Access to the “truth” of the events is not obvious, if offered at all. On the other hand, it might be not so crucial for the novel to give a panorama view of the events—it instead gives a panorama of the experience of the events and the overall collapse of comprehension, since, as Caruth writes, the traumatic event is not assimilated or integrated into consciousness at once (1995, 152), but is carried by the survivor and is not fully understood. The entire meaning of the event, thus, is contained not just in the fact of bombings or the death of relatives but also in its incomprehension—therefore, every narrative of trauma can be different.

Levinasian ethics deal with the original traumatism: ethics is a traumatology and “without trauma, there would be no ethics in Levinas’s particular sense of the word” (Critchley 1999, 240). Critchley explains the ethicality: “It is only because the subject is unconsciously constituted through the trauma of contact with the real that we might have the audacity to speak of goodness, transcendence, compassion” (ibid.). Scholars such as Caruth use the word trauma broadly while other scholars criticize the overuse of the term as well as the diagnosis of PTSD. Caruth speaks of a “catastrophic age” or a wound/post-traumatic culture that is determined by traumatic events involving all human beings. Vees-Gulani, on the other hand, sees such an approach as one that “trivializes” the experience and suffering of those actually traumatized (2003, 20). The role of witnessing trauma is thus reduced, so that it is differentiated from actually experiencing it. Likewise, Boulanger says that to speak of an adult trauma is “to imply that someone has actually and precipitously been confronted with their own death or that of someone very close to them” (2007, 35). Taking these controversies into account, the authors of Unspeakable: Narratives of Trauma (2014) define trauma as “an experience which
causes changes to world-view and self-view and elicits a feeling of helplessness and lost agency" (Stroinska et al. 2014, 258).

It is interesting that the most frequent word that Mr. Black uses in his catalogue is war. It may be one of those words that express something that is too much to embrace. Versluys similarly notes that “Foer explores the outer reaches of language, [...] where saying nothing and saying everything are virtually synonymous” (2009, 15). Oskar wonders why he does not have an entry for his dad:

“It isn’t fair.”
“What isn’t fair!”
“My dad was good. Mohammed Atta [one of the hijackers during 9/11] was evil.”
“So!”
“So my dad deserves to be in there.”
“What makes you think it’s good to be in here!”
“Because it means you’re biographically significant.”
“And why is that good!”
“I want to be significant.”
“Nine out of ten significant people have to do with money or war!” (“Heavier Boots”)

It is not easy to be “significant” in a time mill that grinds and mixes all the names of both victims and perpetrators together under the same instant of war or terrorism, the more so when the entire event has been mediatized. It could be that if Mr. Black was to add an entry on Oskar’s father it would read “war” as well, like in case of Gandhi: “Mahatma Gandhi: war!’ ‘But he was a pacifist,’ I said. ‘Right! War!’” (ibid.). Among other things, Mr. Black’s catalogue points to the unlimited range of meanings, associations and experiences that the word war has incorporated over the centuries. It seems that a personal response and experience can be lost in the void of signification and mediatization of the event that produces a totalizing grand narrative of 9/11, which Foer’s novel manages to “defy” by presenting a multiplicity of voices (Atchison 2010, 362). The people whom Oskar meets tell their stories, which are more often than not stories of loss, of death or divorce. As Lifton says, “lifelong experience” with death or even “death equivalents, such as separation” are all brought together with a person’s “death imagery” and can become interchangeable (Cathy and Lifton 1995, 136).

Nevertheless, the novel hints at how posters in the street or lists of names in newspapers seem to substitute for real people; Grandpa reads the lists of the dead in a newspaper: “Mother of three, college sophomore, Yankees fan, lawyer, brother, bond trader...” (“Why I’m Not Where You Are 9/11/03”). Similar lists of the dead were represented by flyers in reality: “Almost immediately after the disaster, the frantic search for survivors took the form of flyers identifying the missing” which were “pasted onto walls, mailboxes, lampposts, and phone booths” (Miller 2003,
112). Oskar’s mother makes posters, too, and Grandma comments on this in the following way:

She took the posters downtown that afternoon. She filled a rolling suitcase with them. [...] She took a stapler. And a box of staples. And tape. I think of those things now. The paper, the stapler, the staples, the tape. It makes me sick. Physical things. Forty years of loving someone becomes staples and tape. (“My Feelings”)

Such posters and flyers normally show a picture of the missing person, and so a certain decontextualization of the picture occurs: “Images ripped from photo albums and scrapbooks are reproduced to become de-contextualized” (Atchison 2010, 361). It is, thus, paradoxical that a picture with a smiling person—Miller notes that almost always people on the posters were smiling—is used in a non-smiling context. Perhaps, Grandma feels this reduction of a person to a single photo and the single word “missing” (used both in civil and military contexts, the latter implying that a person is not traced or confirmed alive during wartime [Oxford Living Dictionaries, “Missing”]). Moreover, she probably knows that the chances of finding the “missing” are extremely low. Nancy K. Miller writes that “as the hope of finding survivors faded, the distinction between the missing and the dead began to blur” (2003, 113). Thus, the posters initially carry with themselves the feeling of hopelessness and only a small chance that “missing” is not a euphemism for “dead”. In an article, Miller speaks of a project that prepared almost 2000 very short stories of the victims told by their survivors. The original title of the project was “Among the Missing”, which implied “hope of recovery”, but was changed to “Portraits of Grief” (ibid.). Unlike the flyers and posters that reduced people to one word, this project aimed at adding more personality to a portrait. Posters and images are “framed” if compared to the “specifics of personal history” (Atchison 2010, 361). Miller notes that the picturing of mass loss (that a terrorist attack entails) is possible only through such individual portraits of grief that show the smallest of things, like a toothbrush, which carry huge meanings: “The loss is so great that the only way to bring it to language is to think small, cutting it down to size” (ibid., 122-23). In this sense, Foer’s novel offers much more than a decontextualized or universalized picture of suffering—it provides the reader with the stories of several lives interrupted by events that can be found in the range of meanings that “war” has incorporated.

The “staples and tape” are not the only things that blurred the reality of the event. The role of the televised nature of 9/11 that provided the event with its unprecedented effect on spectators all over the world has been emphasized by many scholars. Jean Baudrillard, for example, writes that “terrorism would be nothing without the media” since “the media are part of the event” and of the terror (2003, 31). Moreover, the media and the images it transmits are not just part of the event, but also the weapon that gives the event its overwhelming impact.
Baudrillard points to the ambiguity of such an impact: on the one hand, there is “a diversion and a neutralization” (2003, 27) of the actual event through images, its distancing and spectacularization. On the other hand, images “serve to multiply it [the event] to infinity” (ibid.), thus, exploiting the achievements and technologies of the system against itself, which is one of the characteristics of the spirit of terrorism for Baudrillard. The actual event, in other words, appears to be both compressed in terms of time and space and extended immeasurably. The image-event is overwhelming due to the fact that the image offers the extreme or “absolute” event, as Baudrillard refers to it (ibid., 39), or “major” event, as Derrida calls it (Borradori 2003), for consumption. Easily consumed, the images stuck in the heads of the spectators with, though distanced by the medium, apparently terrifying affect. Derrida expresses a similar opinion regarding the contribution of the media to multiplying the effect of the event: “What would ‘September 11’ have been without television?” he says, “we must recall that maximum media coverage was in the common interest of the perpetrators of ‘September 11’” (ibid., 108), thus, perversely, the perpetrators of terror included both the terrorists and the target itself. “More than the destruction of the Twin Towers”, Derrida continues, “the real ‘terror’ consisted of and, in fact, began by exposing and exploiting, having exposed and exploited, the image of this terror by the target itself” (ibid., 108). Derrida’s analysis of the ambiguity of pharmakon (writing as a pharmakon in “Plato’s Pharmacy” [Derrida 1981b]) is applicable here: images of an event (e.g. the terror attack) can be understood as both a cure and a poison at the same time. On a larger scale, pharmakon can also apply to technological prowess (e.g. of the media, aviation), since distribution of the event depends on it.

There is a hint of the role of the imagery of the event in Foer’s novel. The strongest images that affect, at least, Grandma and Oskar are those of people falling or jumping from the towers and of the planes crushing into them. Don DeLillo’s well-known novel on September 11, Falling Man, deals with a lawyer who managed to escape the towers and become a survivor. Both of these images are replayed countless times and make the impression of countless attacks that never cease to occur. While Oskar’s mother goes outside with “staples and tape”, Grandma watches TV:

I lowered the volume until it was silent.
The same pictures over and over.
Planes going into buildings.
Bodies falling.
People waving shirts out of high windows.
Planes going into buildings.
Bodies falling.
Planes going into buildings.
People covered in gray dust.
It is notable that she lowers the TV volume; there is no need to listen to the image—it is self-contained and its nature is to speak for itself. The manner in which Grandma’s confessional chapter is presented reflects the clipped images that appear alternately in quick succession, making it easier to consume for the “clip” or “blip culture” (Toffler 1980, 166), yet at the same time making it never-ending, happening over and over again. The celebrated futurist Alvin Toffler said that spectators receive information in “oddly shaped, transient, and disconnected” packages, as, for example, when “the ninety-second news-clip intercut with the thirty-second commercial, a fragment of song and lyric, a headline, a cartoon, a collage…” (ibid., 167).

As for Oskar, the image of falling bodies appears to be one that traumatizes him most—he begins to wonder whether his father also died this way. This makes him anxious and in need of “inventing”. The image of a falling man also represents the point from which Oskar wants to turn back time; at the end of the novel Oskar’s flipbook is shown with the image of a falling man in reverse, and Oskar wonders if this man could be his father. Richard Drew’s photograph of a man falling from the World Trade Center has spread around the world, yet the identity of the man has remained unknown. Flynn and Dwyer, the authors of 102 Minutes, write that “more than 200 people most likely fell or jumped to their death” (2004, n.p.). While speaking to Grandpa, Oskar is conscious of his need to know how his father died and does not deny it:

“I printed out the frames from the Portuguese videos and examined them extremely closely. There’s one body that could be him. It’s dressed like he was, and when I magnify it until the pixels are so big that it stops looking like a person, sometimes I can see glasses. Or I think I can. But I know I probably can’t. It’s just me wanting it to be him.”

“You want him to have jumped?”
“I want to stop inventing. If I could know how he died, exactly how he died, I wouldn’t have to invent him dying inside an elevator that was stuck between floors, which happened to some people, and I wouldn’t have to imagine him trying to crawl down the outside of the building, which I saw a video of one person doing on a Polish site, or trying to use a tablecloth as a parachute, like some of the people who were in
Windows on the World actually did. There were so many different ways to die, and I just need to know which was his.” (“Alive and Alone”)

Even though Oskar tries to look for clues, as his father taught him, there is no solution to this problem. As Dwyer and others write, “some details remain unknowable” since “working phones were scarce” and “the physical evidence was destroyed” (2002, n.p.). Oskar’s inventions all depend on his guesses, reflecting all of the ways one could die in the towers that he can think of and his wish to eliminate death: “All I wanted was to fall asleep that night, but all I could do was invent. What about frozen planes, which could be safe from heat-seeking missiles? […] What about skyscrapers made with moving parts, so they could rearrange themselves when they had to, and even open holes in their middles for planes to fly through?” (“Alive and Alone”). Such constructions would guarantee safety so that no trauma, death or loss would be possible.

7.3.1 Death and Loss

The issue of death is crucial in the novel and particularly significant to Oskar. Even minor characters have small stories about death and loss to tell—even Ruth from the Empire State Building or Ron whom Oskar’s mother met at the support group for those who have lost their families. Due to its inevitable character, death penetrates human existence and “shapes how we live and think about temporality, possibility, action, and decision”—in short, a person’s life is “structured by death” (Carel 2016, 151). Even though death is something undeniable, it “potentially transforms anything and everything” and, as Lifton says in an interview, “to be open to a death encounter, always means reassessing what is ultimate, significant” (Caruth and Lifton 1995, 131). Death is often seen in philosophy as a certain limit (see, e.g., my discussion of Bataille in Chapter 2) or, in Levinasian terms, as an impossibility: he sees dying as opening towards the alterity of the other, which is unknowable, and to the mortality of the other (e.g., Mensch 2005). In the previous chapter, I point to the fact that, as studies have shown, children are undereducated about death because parents try to protect them from the knowledge, even though death is an intrinsic component of human existence. Likewise, Simon’s death strikes Matthew not just because of his feeling guilty, but just as an impossible nightmare that comes true.

As for Oskar, he finds his own ways to deal with death. He knows that once someone is dead, he is “dead forever” (“What The”). Some of Oskar’s inventions are touching, for example, his idea of the “enormous pockets” that are “big enough for our families, and our friends, and even the people who aren’t on our lists, people we’ve never met but still want to protect” (“Googolplex”). “But I knew”, he continues, “that there couldn’t be pockets that enormous. In the end, everyone loses everyone. There was no invention to get around that” (ibid.). This is also what Mr.
Black authoritatively tells him: “So many people enter and leave your life! Hundreds of thousands of people! You have to keep the door open so they can come in! But it also means you have to let them go!” (“Heavier Boots”). Yet he is not ready to let go of his father and thinks, for example, about skyscrapers for dead people: “They could be underneath the skyscrapers for living people that are built up. You could bury people one hundred floors down, and a whole dead world could be underneath the living one” (“What The”). Thus, his inventions are one way among others to connect the two worlds and to retain the connection with his father. Versluys writes that inventions offer a world “in which the unthinkable has not yet happened” (2009, 102); so, while many of his inventions are made based on the terrorist attacks that have happened, Oskar desires to connect the two worlds as if nothing had happened.

In one review of the novel the author seems to misunderstand the nature of Oskar’s inventions. He writes that descriptions of “underground skyscrapers and a body paint that changes color with its wearers’ moods—drive adults to the bar for a stiff drink […] there are neurological limits to some readers’ ability to tolerate a wee one who says whatever springs to mind at roughly the same speed it springs to mind” (Kirn 2005, n.p.). The reviewer misses one major point: the way the trauma operates and what form it may take. The seemingly “cute” or childish inventions point to a hard work of dealing with loss. As Versluys writes, “the playfulness […] acquires a tart edge and slowly reveals itself as a pathological condition. The inventions are an oblique way to refer to the loss of his father and an index to the young boy’s extreme distress” (2009, 102). Moreover, the invention where a person’s skin can change colour according to his or her mood carries deep meaning concerning the notion of the unspeakability of experience. It is the same kind of impossible invention as the idea of a perfect language (discussed in more detail in the Chapter 3). Oskar notes that it would be useful to realize not only what the others feel since “everyone could know what everyone else felt, and we could be more careful with each other” but also what a person feels him- or herself: “There are so many times when you know you’re feeling a lot of something, but you don’t know what the something is. […] But with the special water, you could look at your orange hands and think, I’m happy! That whole time I was actually happy! What a relief!” (“Heavier Boots”). It is also indicative that the name of the chapter just quoted—“Heavier Boots”—is the expression Oskar invented himself for want of a word that could characterize the condition of extreme embarrassment and confusion.

Oskar’s attempts to deal with death are complicated by yet another fact: as his father died in a terrorist attack, his funeral is conducted with an empty coffin. Oskar’s naughty behaviour during the funeral is understandable: as Grandma writes, “you made jokes with the driver, but I could see that inside you were suffering. Making him laugh was how you suffered. When we got to the grave and they lowered the empty coffin, you let out a noise like an animal. I had never heard
anything like it. You were a wounded animal” (“My Feelings”). Oskar tells one of the Blacks he meets that “only humans bury their dead” (“The Only Animal”), yet he is deprived of the opportunity to bury his father: “Anyway, it’s not like we were actually burying him” (“What The”; original emphasis). Thus, Oskar might be playing cunning when he says than once you are dead—you are dead forever, so the funeral is not needed. He snatches at every opportunity to connect with his father, one of them being the search for the keyhole. When Oskar finally finds the man who the key belongs to, it appears to have nothing to do with his father who just bought the vase to give it to his wife and did not even notice the envelop with the key: “I found it and it had nothing to do with Dad? I found it and now I’ll wear heavy boots for the rest of my life?” He tells Grandpa that he wished he hadn’t found it: “I found it and now I can’t look for it.’ I could tell he didn’t understand me. ‘Looking for it let me stay close to him for a little while longer.’ ‘But won’t you always be close to him?’ I knew the truth. ‘No.’” (“A Simple Solution to An Impossible Problem”). The failed and at the same time completed quest to find the owner of the key makes Oskar, perhaps for the first time, actually realize that his father is gone. Having to stop looking for clues is something Oskar cannot take. He feels that he has failed his father and the entire quest was done in vain because no mystery that could establish a connection was found. Moreover, his guilt for not picking up the phone, which I will discuss below, remains. Therefore, Oskar decides to “bury his dead”—to fill the coffin with some of the father’s belongings. This marks the end of his quest and in a way the acceptance of his father’s death. Scholars write that the “acceptance of the finitude of life leads to a transcendence of self-centred concerns” and “facilitates the management of life’s uncertainty and ambiguity” (Stroinska et al. 2014, 268-9). However, acceptance may not involve comprehension.

The emptiness of the coffin frightens Oskar, even though he has known all along that it is empty: “I was surprised by how incredibly empty it was. I felt like I was looking into the dictionary definition of emptiness” (“Beautiful and True”). Together with Grandpa (whom Oskar knows only as a strange person who rents a room at his Grandma’s house) they symbolically fill the coffin with empty letters that Grandpa kept on sending, thus underlining the ineffability of death. Despite Oskar’s longing for connectedness, he comes to understand death as something non-shareable. He wanted to learn how his father died, but he would never be exposed to what his father was exposed to: as Heidegger says in his being-towards-death analysis, “no one can take the Other’s dying away from him”, since it is each person’s “ownmost” (1962, 284). Thus, Oskar experiences not death itself, but a loss related to the death of the other: “Death does indeed reveal itself as a loss, but a loss such as is experienced by those who remain. In suffering this loss, however, we have no way of access to the loss-of-Being as such which the dying man ‘suffers’” (ibid., 282; emphasis added). What, nonetheless, can be learned from the death of the other, at least according to Levinasian ethics, is that despite the absolute otherness,
the other can become intimate through the very fact of mortality: "It is through the other—through the other’s face, that is, through its nudity, its vulnerability, its exposure to death—that I face death" (Mensch 2005, 169; original emphasis).

The attitude towards death is clear in Foer’s novel: Oskar wishes to eliminate it, to ensure total safety from it, to keep everyone he cares for as close as in a “pocket” so that they would never die and he would never need to encounter loss again. In one episode in the novel a psychiatrist asks Oskar “Do you think any good can come from your father’s death?”—a question that clearly runs counter to Oskar’s representations, compelling him to reply that his “dad died the most horrible death that anyone ever could invent” (“Happiness, Happiness”). Baudrillard contrasts this approach to death with that represented by terrorists and speaks of the “irruption of death”—symbolic and sacrificial—as something that “particularly frightens us” (2003, 17). Since the spirit of terrorism is irreversibly connected to the idea of death, “they have succeeded in turning their own deaths into an absolute weapon against a system that operates on the basis of the exclusion of death, a system whose ideal is an ideal of zero deaths”, Baudrillard continues (ibid.). Certainly, the division into “us and them” is not straightforward in this approach. Eigen sarcastically writes in his Flames from the Unconscious: Trauma, Madness and Faith (2009) about the manipulatory approach disguised by such a binary: “They are dangerous, predatory, evil. We are good. We represent freedom. We represent morality” (2009, 31). What is important is that the illusion of safety and being protected pertains to the fear of death. Havi Carel in his recent book on the phenomenology of illness and death calls the public attitude towards death “thanatophobic” (2016, 152). It is, thus, clear that the fear of death and loss is predetermined by the reaction towards death, and the reaction to the event can mainly be characterized as that of incomprehensibility and, to use Derrida’s term, unappropriability.

7.3.2 Trauma and Incomprehension

There have been a lot of attempts to characterize or find a name for the September 11 terrorist attack. What is known is that writings that deal with survivor testimonies from the Holocaust or Vietnam War are referred to as “trauma texts” and that this genre now also includes those depicting the terrorist attack on the World Trade Center (see, e.g., Modlinger and Sonntag 2011, 2). They also include texts dealing with the Dresden bombings; consider, for example, Kurt Vonnegut’s well-known semi-autobiographical novel Slaughterhouse-Five (1969). Vonnegut’s protagonist, Billy, is kept in a Dresden slaughterhouse during the bombings and is diagnosed with PTSD after 1945. It is known that Vonnegut was enlisted in the US army and was taken captive during the bombings himself. In an interview, he says: “They burnt the whole damn town down. […] It was the fastest killing of large
numbers of people—one hundred and thirty-five thousand people in a matter of hours” (Vonnegut qtd. in Hayman et al. 1977, n.p.).

This section will tackle the nature of 9/11 as a “major” event and its traumatizing effect. I will examine scholarly works on trauma theory and their view of a traumatic event. I will also address the issue of the unspeakability of trauma and provide examples of how Grandpa’s, Grandma’s and Mr. Black’s writing practices reflect the impossibility of speaking or writing trauma. Lastly, I will discuss the nature of confession as presented in the novel and its importance for Grandpa and Oskar.

I have already referred to Baudrillard’s description of the terrorist attack as an “absolute” event that is impossible to analyse by means of explanation, but only by means of “its analogon”, an analysis as “unacceptable as the event” (2003, 39). Derrida refers to the attack as a “major event” or 9/11. He sees profound meaning in using just a number to name it: we “press it to name something that it cannot name because it happens beyond language” and “repeat 9/11 without ever asking ourselves what it names” (Borradori 2003, 147). Derrida calls it a “major” event since, as he explains, it involves not just the deaths of thousands people or the collapse of “urban structures”, but also the collapse of “the conceptual, semantic, and one could even say hermeneutic apparatus that might have allowed one to see coming, to comprehend, interpret, describe, speak of” it (Borradori 2003, 93). “The event”, he explains, “is what comes and, in coming, comes to surprise me, to surprise and to suspend comprehension: the event is first of all that which I do not first of all comprehend. Better, the event is first of all that I do not comprehend. It consists in that, that I do not comprehend” (ibid., 90; original emphasis). Derrida points to the pandemic character of the event that informs its “majority”: he says that, despite the degree of involvement, “virtually every New Yorker remembers in detail what they were doing when they learned” about the attack (ibid., x). I would add that not only every New Yorker remembers it; as an 11-year old non-American citizen living in Maryland at the moment of the attack, I remember well the restrained panic with which we schoolchildren were quickly sent home. Theorists of trauma also stress the all-including nature of the event and note that trauma and speaking of trauma “may provide the very link between cultures” and serve a means of connecting with the other “in a catastrophic age” (Caruth 1995, 11).

The nature of the event as a major one also implies, for Derrida, the impossibility to name it since comprehension of the event is faltering: “What is terrible about “September 11”, what remains “infinite” in this wound, is that we do not know what it is and so do not know how to describe, identify, and even name it” (ibid., 94; original emphasis). Since the event is “incomprehensible” objectively, there is hardly any access to the “real” event: for example, Baudrillard states in his extreme manner that the event is fictionalized: since “reality is everywhere infiltrated by images, virtuality and fiction” it “has absorbed the fiction’s energy, and has itself become fiction” (2003, 28). The only way to attempt to speak about it
is to interpret it and present something more than a series of fast changing images. Foer’s novel reflects this failure of language to express the experience of the traumatic event and its resistance to interpretation. Thus, the novel demonstrates what happens if we try to name the unnameable, that is “outside the bounds of language” (Edkins qtd. in Versluys 2009, 2). Referring to Levinasian ethics, Critchley writes that similar to ethics being a product of original traumatism of the self, “the ethicality of thought is revealed in its persistent attempt to run up or bump up against the limits of language” (1999, 231). This happens because there is a paradox between the language of ethics and what it tries to say: “It is a question of trying to say that which cannot be said, or proposing that which cannot be propositionally stated” (ibid.).

Unlike the images discussed in the previous section, the experience of the characters, which is verbalized with obvious effort, is not offered for easy consumption as it is not coherent enough. My interpretation of Foer’s novel presents a story of a family who has lived through tragedy, each member coping as best they can and telling their story in their own way. As Versluys writes, Foer “explores the outer reaches of language where it borders on silence and where saying nothing and saying everything are virtually synonymous” (2009, 15). The two characters that represent this opposition of everything and nothing are Grandpa and Mr. Black; while Mr. Black creates a catalogue with one word for every person he knows, Grandpa writes millions of words that do not, however, help him to describe things any better than Mr. Black does. Whatever medium Grandpa tries to use more or less fails; no matter whether he tries communicating by writing or by numbers—none of it guarantees successful communication. Having lost his ability to speak after the Dresden bombings, the idea of incommunicability has become embodied in Grandpa. He tries to connect with Grandma while at the airport but she is unable to understand his message:

“Hello?” I knew it was her, the voice had changed but the breath was the same, the spaces between the words were the same, I pressed “4, 3, 5, 6”, she said, “Hello?” I asked, “4, 7, 4, 8, 7, 3, 2, 5, 5, 9, 6, 8?” She said, “Your phone isn’t one hundred dollars. Hello?” I wanted to reach my hand through the mouthpiece, down the line, and into her room, I wanted to reach YES, I asked, “4, 7, 4, 8, 7, 3, 2, 5, 5, 9, 6, 8?” She said, “Hello?” I told her, “4, 3, 5, 7!” “Listen”, she said, “I don’t know what’s wrong with your phone, but all I hear is beeps. Why don’t you hang up and try again.” (“Why I’m Not Where You Are 9/11/03”)

Grandpa’s “invention” of a means to communicate via the phone is not a happy one either: he imagines that he is telling his entire life story by pressing the buttons, which he has turned into a sign system, but the only thing that his interlocutor hears is beeps. Since Grandma is not in possession of such a sign system, she is unable to understand and connect. Atchison writes that the theme of
incommunicability implies that “no two people can share the same position” since language is unable to “fully represent the chaos of life experience” (2010, 363-4). The conventional language is no better than the phone beeps—writing is the only means of communication for Grandpa that others can understand, but the things he wants to communicate are still not communicated at all due to their unspeakable nature. The load of information that Mr. Black manages to express with one word (usually “war”) is non-expressible anyhow in Grandpa’s case. One of the strongest metaphors for this incommunicability is the pages from Grandpa’s journals that are unreadable: he puts new layers of writing upon the old ones, making a palimpsest of his memory. These pages also reflect the layers of memories that have all become blurred and intertwined: Grandpa can write, but he cannot tell, either literally or figuratively.

The impossibility of speaking about trauma has been widely discussed. Theorists of trauma studies often write about the healing effect of storytelling that helps to recover a person’s voice and “leave the site” of trauma (e.g. Crossley 2000, Caruth 1995). Some say that “a ritual of healing cannot take place unless a trauma story is told” (Stroinska et al. 2014, 13), yet in the novel the aspiration to tell is confronted with the inability to tell. These extreme positions imply that trauma is opposed to narrative. Lyotard writes, for example, that trauma can only be an “aporia in narrative” and that this aporia “does not say the unsayable, but says that it cannot say it” (1990, 47). Foer’s novel can be looked upon from this perspective: Grandpa’s blackened pages and empty letters as well as Grandma’s blank pages and Oskar’s daybook in general all speak not of the unspeakable but of unspeakability itself. Lyotard, however, continues as follows: “All I know how to do is to say that I no longer know how to tell this story. And this should be enough. This has to be enough” (ibid.). Whether this is actually enough is a controversial issue. Foer’s novel, in this sense, does not seem to imply that it is enough. It shows the narrative rupture and the impossibility, but in the end these construct a story. Modlinger and Sonntag (2011) also write about art and aporia that if there is no attempt at telling from the teller’s side and no understanding from the listener’s side, then the connection between trauma literature and art is pointless. “There must be something left that literature and art can do in the face of trauma”, they continue, “if not offer understanding, then at least a perspective on that which ‘we’ have not experienced” (Modlinger and Sonntag 2011, 9). Grandpa’s incoherent writing is such a perspective, as well as Oskar’s restless inventing and Mr. Black’s scrupulous cataloguing.

Mr. Black is similarly disconnected. Oskar tends to only meet lonely people who are isolated in different ways. When mother tells him that “it probably gets pretty lonely to be Grandma” he answers: “It probably gets pretty lonely to be anyone” (“Googolplex”). Oskar also notes about Mr. Black: “How could such a lonely person have been living so close to me my whole life? If I had known, I would have gone up to keep him company” (“Heavier Boots”). While Grandpa has lost the ability to
speak, Mr. Black has refused his ability to hear: “He pointed at his hearing aids, which I hadn’t noticed before, even though I was trying as hard as I could to notice everything. ‘I turned them off a long time ago!’ [...] ‘But don’t you want to hear things?’ He shrugged his shoulders again, in a way so I couldn’t tell if he was saying yes or no” (ibid.; emphasis added). Mr. Black also rejects his ability to connect by staying at home for twenty-four years. When Oskar asks him why he has not left the apartment, he answers: “There hasn’t been any reason to!” (ibid.). Thus, his current disconnectedness from the world does not bother him—what really matters to him is his lack of connection with his late wife: “For most of our marriage I treated her as though she didn’t matter! I came home only between wars, and left her alone for months at a time! There was always war!” he says and adds that he gave up reporting the war and chose her over war, though it came late. Mr. Black feels a sense of loss and guilt for being, perhaps, egoistic and paying more attention to the wars that deprived him of connection with his wife. Interestingly, he has changed the word for himself in his catalogue: “war” is crossed out and “husband” takes its place. Thus, he no longer conceives of all of the associations and connotations concerned with war as applicable to himself. When he later makes a card for Oskar he writes “son” on it, emphasizing the primary nature of family relationships over seemingly more “major” events.

The egoistic implications of disconnectedness are emphasized in both Grandpa and Mr. Black. Grandpa is concerned with the fact that the last word he was able to pronounce is “I”: “‘I’ was the last word I was able to speak aloud, which is a terrible thing, but there it is, I would walk around the neighbourhood saying, ‘I I I I’” (“Why I’m Not Where You Are 5/21/63”). When he tells Oskar about it, Oskar returns a significant question: “Does that even count as a word?” He shrugged his shoulders (“Alive and Alone”; emphasis added). Grandpa is aware of his own isolatedness and it brings him pain, he wishes he could become a different person and asks himself: “Why couldn’t I be the kind of person who stays” (“Why I’m Not Where You Are 5/21/63”). It seems that he cannot change his traumatized self—even if he wants to connect, it turns out impossible. The idea of making the impossible possible runs through the entire novel and is evident, for example, in Grandpa’s reflections: “if I’d said ‘I’m so afraid of losing something I love that I refuse to love anything’, maybe that would have made the impossible possible. Maybe, but I couldn’t do it, I had buried too much too deeply inside me” (“Why I’m Not Where You Are 4/12/78”). This opening to the impossible is part of the ethical experience in Levinasian philosophy—“an experience that is strictly inassumable and impossible” yet it defines the ethical subject founded on traumatism and alterity (Critchley 1999, 240). The impossibility of possibility, thus, becomes the essence of the ethical subject.

It is interesting that the shrugging of shoulders is often emphasized in the novel, and a couple of examples of this act have been italicized in the paragraphs above. Whether it is done deliberately or not, the gesture might indicate the desire of the
characters to avoid definitive answers—a fact that speaks in favour of lack of closure and against the idea of autism. It might be that body language can help express emotions more clearly and help the other to understand them better. Murray, for example, states in her article on the embodied language of trauma that trauma and pain are found not only in the survivor’s psyche but also in the body, therefore, he or she can use the body for healing (2010). However, the very act of shrugging one’s shoulders demonstrates a lack of desire to be involved, to search for a definite answer, and to share one’s emotions with the other. In the former example above, Mr. Black shrugs his shoulders when he does not want (or know how) to answer the question of whether he wants to hear things or not. He has not turned his hearing aid on since his wife’s death—apparently a traumatic event for him. In the latter example, Grandpa shrugs his shoulders because he regrets that the last word he uttered was “I”, that is, it is painful to speak or write about it—however, it is also painful to demonstrate this regret through body language, and he disguises the suffering behind a seemingly indifferent and unconcerned shrugging of shoulders. Therefore, neither speech, nor writing, nor body language provide direct access to the other’s experience. Neither does it help Grandpa himself to work through his traumatic experience. The impossibility of narration, thus, becomes embodied.

The words that Grandpa writes more often than even the “yes” or “no” tattooed on his palms for convenience are “I’m sorry”. He can be sorry about anything, but his main guilt seems to be not being able to cope with himself and with his traumatized self that makes him leave and not stay: he leaves Grandma when she is pregnant with Oskar’s father and comes back only when he learns that Thomas (his son) passed away. The main objective of Grandpa’s confessional letters seems to be not even asking for forgiveness but just the very urge to say that he is sorry. No matter how often he says it, “sorry” is a word he cannot fill with enough meaning or fill enough pages to express:

_I looked around the apartment this morning for one last time and there was writing everywhere, filling the walls and mirrors, I’d rolled up the rugs so I could write on the floors, I’d written on the windows and around the bottles of wine we were given but never drank, I wear only short sleeves, even when it’s cold, because my arms are books, too. But there’s too much to express. I’m sorry. That’s what I’ve been trying to say to you, I’m sorry for everything._ (ibid.; emphasis added)

If Mr. Black made a card for Grandpa, it could, perhaps, be labelled “sorry”, but apparently not “father” as that is a role that never belonged to him; and it is from there that his sorrow mainly stems.

Grandma is another character in the novel who writes or attempts to write her life. It is actually Grandpa who urges her to do it: “It was my suggestion, and at the time I thought it was a very good one, I thought maybe if she could express herself
rather than suffer herself, if she had a way to relieve the burden, she lived for nothing more than living, with nothing to get inspired by, to care for, to call her own” (ibid.). Grandpa certainly feels he has not managed to make her suffer less himself. From her own side, she knows that Grandpa’s love is her sister Anna— whenever he tries to make a sculpture of Grandma, he makes one of Anna. This dissonance and helplessness in the relationship is foregrounded by language: “The less was said, the more misunderstood”, Grandpa writes, “our unspoken agreements led to disagreements, to suffering” (ibid.). However, Grandma’s writing is not a happy one either: pretending to write on the typewriter she only leaves blank lists of paper with nothing on them: “I hit the space bar again and again and again. My life story was spaces” (“My Feelings”). When she accumulated a whole pile of paper she presented it to Grandpa as a book that she called “My Life”. It is noteworthy that Grandpa says “she and I are no different, I’ve been writing Nothing, too” (“Why I’m Not Where You Are 5/21/63”). All three attempts at expression, those of Mr. Black, Grandpa, and Grandma, are different in form yet similar in their inability to express—and yet they do, however, express and acknowledge the unspeakability of trauma.

Judith Herman writes of traumatized selves that the shattered sense of self “can be rebuilt only as it was built initially, in connection with others” (1992, ch. 3). Such a connection is something that is lacked and hardly ever achieved by any character in the novel. Even though Grandpa comes back to Grandma’s house, there is no forgiveness asked for or offered and no reconnection is achieved or even wanted. There appears to have been too much that has been turned into blank spaces and that cannot be erased or climbed over, they constitute a distance that does not allow any attachment. In a letter that Grandma nonetheless manages to write to Oskar, she regrets her life: “I regret that it takes a life to learn how to live, Oskar. Because if I were able to live my life again, I would do things differently” (“My Feelings”). She is trapped by the past, which she cannot overcome because it is essentially unchangeable, and no self-deceiving is going to make her happy. The last scene that concerns Grandma and Grandpa in the novel finds both of them sitting at the airport, “not coming or going”:

*Do you want to go home?*
*He flipped back to, I can’t.*
*Then you’ll go away?*
*He pointed at, I can’t.*
*Then we are out of options.*
*We sat there.*
*Things were happening around us, but nothing was happening between us.* (“My Feelings”; emphasis added)
Daldry’s film differs radically from the book in this sense: the film ends with the idea that it is time “to go home”, implying that it is time for the family to come together. As the quote above shows, though, going home is not possible, in either a literal or figurative sense. Grandma’s and Grandpa’s traumas and everything they have gone through force them to stay in an ambiguous middle-of-nowhere state: the past is incomprehensible and the future unimaginable. Derrida writes that September 11 as a major event also involves a certain temporal extension: “The wound remains open by our terror before the future and not only the past” (Borradori 2003, 96). The future implies the “threat of the worst to come” and the traumatism arising “from an im-presentable to come” and the impossibility of mourning (ibid., 97; original emphasis). Caruth also echoes this idea when she remarks that “it is not only the moment of the event, but of the passing out of it that is traumatic” (1995, 9), that is, survival brings the past with it far into the future in a “repeated possession” (ibid., 5) of the event.

The definition of what constitutes a “traumatizing event” has been controversial. Scholars often quote the ambiguous definition in the DSM III-R, which calls an event traumatic if it is “outside the range of human experience” (see, e.g., Brown 1995—the entire article is based on criticizing this definition). The more recent issue of the manual, the DSM-5, presents more context for characterizing trauma and diagnosing PTSD. It includes direct exposure to death or injury as well as “learning that the traumatic event(s) occurred to a close family member or close friend. In cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental” (2013, 271). Violent death is also explained and, interestingly, the definition already includes the exposure to or the death of a relative in a terrorist attack (ibid., 274). The manual also states the symptoms of “feeling detached or estranged from other people or a persistent inability to feel positive emotions” (ibid., 275) and “developmental regression, such as loss of language” (ibid., 276). This corresponds closely to Grandpa’s condition and helps to dispute autism-based analyses of the novel. He writes that the distance between him and his happiness “wasn’t the world” but himself, “the cancer of never letting go”:

Is ignorance bliss, I don’t know, but it’s so painful to think, and tell me, what did thinking ever do for me, to what great place did thinking ever bring me? I think and think and think, I’ve thought myself out of happiness one million times, but never once into it. (“Why I’m Not Where You Are 5/21/63”)

Thus, he experiences not a direct recurrent recollection of the bombings, but his own reflections on where the trauma has brought him, why he behaves the way he does, why he leaves and cannot stay, why he restlessly writes stream-of-consciousness letters—all of these thoughts seem to be just as involuntary as direct recollections would be. Grandpa writes: “I’m sitting in this library, thousands of
miles from my life, writing another letter I know I won’t be able to send, no matter how hard I try and how much I want to. How did that boy making love behind that shed become this man writing this letter at this table?” (“Why I’m Not Where You Are 4/12/78”). This last Nietzschean question (“How did I become what I am and why do I suffer from being what I am?” [1997b, 154]) is what actually tortures him. But the question cannot be answered, it becomes one of the impossible problems of the novel to which there is no simple solution, as in the case with Oskar’s key. Caruth speaks of the “impossibility of knowing that first constituted” the trauma as an inevitable aspect that traumatic experience carries with itself (1995, 10). “Sometimes it is better not to know too much”, Dori Laub says (1992, 61), echoing Grandpa’s idea that ignorance is bliss. Grandpa’s difficulty with writing trauma can also be linked with the concept of alterity, discussed in more detail below: one’s own foreignness to oneself may serve as a reason why, as Butler writes in her study on Levinasian moral philosophy, “there is that in me and of me for which I can give no account” (2005, 64). Levinasian ethics, which Simon Critchley calls a “phenomenology of the unphenomenologizable” (1999, 231), point to the irreducibility of the other or the self to comprehension or a simple concept.

As for Oskar, some of his symptoms pertaining to trauma have already been discussed, such as his obsession with safety and fear of elevators or subways. Versluys also mentions his being subject to mood swings, having trouble sleeping, and giving himself bruises (2009, 106). It is not completely clear whether the bruises are mental or physical, or whether there is an aspect of self-harm that can also be linked with post-traumatic behaviour concerned with feeling guilty, angry or anxious. Guilt seems to be one of the constituents of Oskar’s traumatized self. Oskar’s need to deal with the loss is complicated by one thing after another, such the empty coffin; he feels that he has failed his father, not spoken with him properly when he could have. This draws him repeatedly back to the phone calls he had from his father when he got home from school and to contemplate why his father said some things and not others: “Why didn’t he say goodbye? I gave myself a bruise. Why didn’t he say ‘I love you’?” (“Happiness, Happiness”). It is known that a lot of people on the upper floors of the towers tried to call their relatives (Dwyer et al., 2002). After leaving several messages, his father calls again but Oskar does not pick up the phone. After this last call Oskar hides all the cassettes with the recordings without showing them to his mother or Grandma. There can be several reasons why. He states the obvious one himself: “I knew I could never let Mom hear the messages, because protecting her is one of my most important raisons d’être” (“Googolplex”). Another reason might discredit this first reason: while talking with Grandma on the phone he says: “I couldn’t explain to her that I missed him more, more than she or anyone else missed him, because I couldn’t tell her about what happened with the phone. That secret was a hole in the middle of me that every happy thing fell into” (ibid.). This thought makes the reader think of Oskar’s wanting to “appropriate” the calls, to have this last talk for himself and to
prolong the time he can still spend with his father (remember that at this point he has not yet opened the empty coffin and “buried” his father properly, so he still feels connected—there is still literally and metaphorically “no one in the coffin”). On the one hand, the idea of prolonging is expressed clearly in Daldry’s film but is absent in the novel. In the film, Oskar says: “If the sun were to explode you wouldn’t even know about it for eight minutes because that’s how long it takes for light to travel to us. For eight minutes the world would still be bright and it would still feel warm” (*Extremely Loud & Incredibly Close*). Oskar wants to have his own eight minutes, but by the time he finds the owner of the key, time has run out. And yet, by hiding the recordings Oskar might yet get his wish to eliminate death, as if nothing has ever happened, because no one has heard the calls.

Oskar seems to live the trauma alone, yet he unconsciously looks for another to confess to and these he does find. Traumatic guilt causes virtually every character in the novel make confessions: as Silfver says, a guilty person “is motivated to confess” (2007, 171), guilt drives a person to confession. In his never-ending letters, Grandpa tries to absolve himself of his guilt of leaving: “I want you to know, at least, that it’s not out of selfishness that I am leaving, how can I explain that? I can’t live, I’ve tried and I can’t. If that sounds simple, it’s simple like a mountain is simple” (“Why I’m Not Where You Are 5/21/63”). Laub notes that there is an “imperative to tell” that can become “an all-consuming life task” (1995, 63). He continues:

> Yet no amount of telling seems ever to do justice to this inner compulsion. There are never enough words or the right words, there is never enough time or the right time, and never enough listening or the right listening to articulate the story that cannot be fully captured in thought, memory, and speech. (ibid.; original emphasis)

The novel embodies Derrida’s idea broadly discussed in Chapter 3 that “no one can confess in my place” (2000, 30) and that there is always the other who the person confesses to. In another study concerning bearing witness and listening to a trauma, Laub writes that the testimony of the trauma “includes its hearer”, since he or she “triggers” the narrative (1992, 57-58). Grandpa writes mostly to his son, Oskar’s father, even though all of the letters he eventually sends are empty. Oskar finds them in Grandma’s wardrobe: “I opened one of them. It was sent on February 6, 1972. ‘To my child.’ It was empty. […] June 14, 1963. ‘To my unborn child.’ Empty”. (“Alive and Alone”). As for Oskar, his confessions are of a sudden nature: in his search for the “right listening” he confesses to strangers by letting them listen to the recordings of his father’s calls. He does not give the recordings to his mother or Grandma, but as soon as he meets the tenant for the first time (not knowing it is his grandfather) he asks him: “Can I tell you my story?” (ibid.) and runs to bring the cassettes. He also tells Grandpa about his search for the key owner. This is Oskar’s way of confessing: to have someone else listen to the recordings, so that someone
else knows that time is running out and shares the knowledge that his father actually died. Oskar goes even further with his other confessor—William Black, the owner of the key who Oskar finally finds. Oskar tells him what he did not tell Grandpa—that he did not pick up the phone—and asks Black to forgive him:

I asked him, “Do you forgive me?”
“Do I forgive you?”
“Yeah”.
“For not being able to pick up?”
“For not being able to tell anyone”.
He said, “I do”. (“A Simple Solution to An Impossible Problem”)

It is interesting that Grandpa seeks forgiveness for himself in his confessions, while Oskar seeks forgiveness for the thing that he has done. As Derrida asks, “does one forgive something, a crime, a fault, a wrong, […] and at the limit does not become confused with the guilty” or “does one forgive someone, absolutely, no longer marking the limit between the injury, the moment of the fault, and on the other side the person taken as responsible” (Borradori 2003, 142). Oskar tells William Black that his father asked eleven times “Are you there?”, which makes him feel even guiltier, as if his father knew he was standing there unable to pick up the phone. Once again, this cannot be called childish or autistic behaviour, since being afraid to pick up the phone is being afraid to hear traumatizing news and is connected to social anxiety and phobia. The very ringing of the phone can be a source of anxiety and apprehension (see, e.g., Doctor 2000).

Oskar thinks that by concealing his father’s calls he is, first and foremost, protecting his mother. Likewise, he does not tell her that he has found a key and that he spends every weekend visiting strangers’ flats. Several times it occurs to him to ask why his mother does not ask about his comings and goings, but he either does not dwell on the thought, or thinks that she has given up on him:

What was so weird, and what I should have tried harder to understand, was that she never asked anything else, not even “Out where?” or “Later when?” […] So why was she suddenly starting to forget about me? Every time I left our apartment to go searching for the lock, I became a little lighter, because I was getting closer to Dad. But I also became a little heavier, because I was getting farther from Mom. (“Googolplex”)

Both of Oskar’s feelings were, however, misleading: the key has not brought him closer to his father and he has not drifted far from his mother. I suggested at the beginning of this chapter that the novel presents a deconstruction of confession. I have already demonstrated this with Grandpa’s confession: having outlived his son and buried all of the empty letters in his coffin, he stays at the airport with nothing
happening. The deliverance promised by his confession is not attained—his fear after the Dresden bombings of losing someone he loves has come true once again, but there is no one to confess to anymore. Oskar’s confession does not bring closure either: he thought that by hiding the cassettes had protected his mother and had suffered the trauma “alone”. Yet, at the very end of the novel he finds out that she has known all along—both about his father’s death and his quest for the key:

She said, “Dad called me from the building that day.”
I pulled away from her.
“What?”
“He called from the building.”[…]
“What did he say?”
“He told me he was on the street, that he’d gotten out of the building. He said he was walking home.”
“But he wasn’t.”
“No.” […]
“But he knew you knew.”
“He did.” (“Beautiful and True”)

Therefore, Oskar’s involvement in the mystery and his need to find a confessor who would stand for his mother or Grandma both turn out to be meaningless. It might be that Oskar’s idea of protecting his mother’s feelings was a cover story used to buy more time with his father. It is, however, noteworthy that the mother did not tell Oskar about his father’s call, either. Even though she says she “knew”, she still went outside with “staples and tape”, but then it was her who insisted on having the funeral. This is perhaps one of Nancy Miller’s (2003) examples of when “missing” starts to mean “dead”. Perhaps by picking up the phone, Mother, unlike Oskar, used her “8 minutes” and accepted the death.

Whatever interpretations of the narrators’ confessions may be given, there is no apparent closure or decisive answer to the questions that are left in the aftermath of the traumatic event, and there is no single resolution of the reflections that follow it. In this section, I have analysed Foer’s novel giving special attention to the notion of trauma and different ways of coping with it. I have examined the media representation of the traumatic event and the way it is opposed to the reflections given in the novel and demonstrated the unspeakable and incomprehensible nature of the event that determines the incoherence of the narrative. The novel brings into sharp focus the limits of language: through Mr. Black’s and Grandpa’s writing it, on the one hand, confirms Derrida’s idea that “before me, the signifier on its own says more than I believe that I mean to say” (2005, 224) and, on the other hand, says less, as the unspeakable is unspoken. Priority is given to neither speech nor writing—Grandpa’s muteness rejects the idea of the primacy of speech but does not give it to
writing, since it is not a panacea either, and both of them, as Derrida would argue, are relational and determined.

Although the two stories I have focused upon are markedly different in their content and context, they are united by the sincerity and individuality of the presented perspectives. I have argued that it is important to read stories in an unbiased manner, not taking the label given on the cover as a point of departure for interpretation and stereotyping. It is noteworthy that the autism community criticized the theatrical version of Haddon’s book for choosing a non-autistic actor to play Christopher (Connor 2015). Such an attitude is another way of appropriating and, thus, turning the story away from being a story about Christopher, “about seeing the world in a surprising and revealing way” (Haddon 2009, n.p.). The autism community’s version of the story would thus turn Christopher into a symbol of something else beyond himself, reducing him to only “fulfil a narrative function” (Ray 2013, n.p.), that of juxtaposing his perspective against the “normal” one. I have highlighted the inconsistencies of such an approach that bases itself on defining Christopher’s “normal thinking”. The best actor to play Christopher would be Christopher himself, except that he is a fictional character, who, however, seems to be very real and very sagacious, just as Haddon wanted him to be (“I thought that if I could make Christopher real to me then he’d be real to readers” [Haddon 2009, n.p.]).

Neither of the narratives is intended to be judged or framed within a single context, whether medical or political. Neither Foer’s nor Filer’s novel is monolithic in its demonstration of human experience: both stories are so full of ideas and variety of human behaviour that it would be limiting to judge Oskar’s and Christopher’s narratives as autistic and dismiss Grandpa’s narrative as incoherent and the entire novels in general as frustrating. The novels are also valuable in presenting stories of individual people and families—to use a metaphor, they try to give a name to the falling man in the photo and individuality to the running images of planes and people jumping from the towers. In this way, the novels offer to make sense of a traumatic event and of the world in general with its myriad conventions, contingencies and inconsistencies. It is useful to examine the novels from the deconstructivist point of view, since they are open to such an approach—they pay attention to “the singularity of the other, the singularity of the situation, the singularity of language”, as Derrida does in his work (1999b, 78). “A decision”, Derrida says, “is something terrible” (ibid., 67), meaning that undecidability is not a negative condition—on the contrary, it opens the way to possibilities.

Neither of the novels provides closure—the endings do not signal the end of the story. The end of the search for a dog killer and for a keyhole already anticipates other potential adventures. This lack of a single happy resolution makes the narratives more life-like and, in case of Extremely Loud, also debunks the myth of confession as an absolute cure that can turn back time and pretend that the trauma never occurred and that the self was never traumatized. Oskar’s flipbook with a
falling man at the end of the novel reflects the impossibility of coming back or "coming home" if home is a place that has not been changed. Similarly, Grandma’s longing for a chance to do everything differently is futile. Van der Kolk and Van der Hart remark in their work on Holocaust survivors that “the traumatic experience/memory is, in a sense, timeless”, which means that it is not “placed in time, with a beginning, a middle and an end” (1995, 167). I have read both novels in a similar way—they are both told in a manner that does not presuppose a happily-ever-after ending. In Foer’s novel the lack of closure can be paralleled with the ultimate not-knowing of the nature of trauma. Caruth claims that literature is used to describe trauma because literature “is interested in the complex relation between knowing and not knowing” (1996, 3; emphasis added)—this is precisely the relation that the lack of closure in the novels provides.
This study has pursued several objectives, the main one being an attempt to draw attention to the importance of narratives of mental illness in order to challenge the idea of what constitutes the norm and deviance from the norm. Such literary narratives influence the way mental illness is regarded in both the academic and public spheres. Scholars from the social sciences often imply that to analyse an interview in order to draw certain conclusions from it is to take on a great responsibility of interpretation. This cannot be denied, but the responsible interpretation of stories concerns not only social but literary studies as well. One of the goals of my research was, above all, to demonstrate that stories presented in literature (whether autobiographical or fictional) are no less significant than those told in interviews; and the responsibility of interpretation of the stories by the reader is equally as significant to that of the interviewer.

I intended to demystify the concepts of literature and literary studies as a discipline dealing with artificial and abstract issues. This study has shown that literature, after all, proves to be much more than an “ivory tower”. Derrida, whose deconstructive approach provided a useful background for the study, links literature to a certain kind of democracy, that is “authorized to say everything”, it has “the unlimited right to ask any question, to suspect all dogmatism, to analyse any presupposition, even those of the ethics or the politics of responsibility” (1995c, 28).

I have discussed the issue of responsibility of interpretation at length, drawing on the works of such theorists as Levinas, Mensch, Bakhtin and Derrida, which form the philosophical theoretical background of the study. The idea of the non-red cement of alterity, one of the central concepts in the study, as well as the ideas of unfinalizability and response to the other, were used to demonstrate that the idea of deviant is often constructed on the basis of fear of the other. In the study, I have shown that if a labelling attitude is expressed towards a fictional character, it is likely that a similar attitude will appear when a living person is concerned. For the purpose of demonstrating this idea, two main things have been done in the study. First, I have presented an overview of sociological theories concerning the idea of deviance and convention in Chapter 2. These theories complemented the general philosophical background intrinsic to this study. It was necessary to turn to Erich Goode and Erving Goffman for a social perspective, since the philosophical ideas of the norm, morality and their transgression needed a societal dimension, that is, the demonstration that norms and conventions are rooted in society, not nature, and,
therefore, are socially constructed. Second, this study is based on the general concept that a story can include both fictional and autobiographical narratives. Each of the story types discussed in the study, postmodern included (Chapter 4), adds its own dimension to the analysis, thus, broadening the research. Chapter 3 addressed the interrelations of truth in fictional narrative and fiction in autobiographical narrative, showing the truthfulness of autobiographical narrative and the fictional nature or “untruthfulness” of fictional narrative to be highly ambiguous. The ideas of responsibility of interpretation, labelling, morality, identity in writing and, finally, norm and deviance were put into practice in Chapters 4 to 7 with six texts as case studies.

Chapter 4 addressed the metaphorical concept of schizophrenia concerned with liberation and deterritorialization (according to Deleuze), on the one hand, and with capitalist logic, loss of space and time identifiers and paranoia (Jameson and Baudrillard), on the other. My reading of Will Self’s novel *My Idea of Fun* showed the link between Ian’s promotion in the world of marketing and his dependence on and addiction to the grotesque figure of The Fat Controller. The postmodern schizophrenic condition is shown in the novel with the help of several techniques affecting the perception of time and space (Carrollian techniques, perpetual present, Moebius-strip space). My reading of Self’s novella *The Sweet Smell of Psychosis* has shown the manipulative role of media, its addictive character and superficial nature. I have applied the Bakhtinian concept of carnival to the media society presented in the novella and argued that the transgressive character of carnival proves to be questionable since it does not challenge order and authority (of Bell in this case) but rather solidifies it. In a sense, this proves the link of metaphoric schizophrenia to and its dependence on the logic of global capitalism.

Chapter 5 analysed a collaborative family memoir of coping with schizophrenia. It is hard to overestimate the importance of the three perspectives on the illness presented in *Henry’s Demons*: Henry’s own narrative attempts to recollect the experience as precisely as possible, providing an invaluable source of first-hand reflections; Patrick’s narrative gives insight into the roots of schizophrenia and how common the illness actually is; Jan’s narrative, although scarcely presented, illuminates the mother’s perspective on combining her work and constant care for Henry. However, such a collaborative approach can also be questioned: the possibility of truth and self-transparency in an autobiographical narrative, which is theoretically discussed in Chapter 3, is analysed here in the context of collaboration. Since the work is autobiographical and, more so, collaborative, the questions of editing and truth concerning Jan’s diary and also Henry’s writing occur. Therefore, an autobiographical narrative does not promise a reliable narration of truthful events and experiences. As Ulric Neisser remarks, “not all self-narratives are true” because “even when people strive for accuracy, what they remember may not be just what happened” (1994, 2). The remembered self, he continues, is “not the historical self of yesterday, but only a reconstructed version” (ibid., 8). Moreover, I
have discussed the issues of stigma and self-stigma and shown their interconnectedness with biased understanding of what constitutes the norm and morally appropriate behaviour.

In Chapter 6 I discussed Nathan Filer’s novel *The Shock of the Fall* and how the issues of guilt, trauma, memory and confession are presented there in connection with schizophrenia. I have also introduced the concept of empathy and shown how its difference from the concept of sympathy affects the reader’s interpretation of a character: if Matthew is “othered” he is pitied as inferior and no empathy, thus, takes place. I have read the novel as a narrative of trauma and confession from a deconstructivist point of view: Matthew’s memory is apparently “fictionalized”, that is, in his search for forgiveness he often intentionally questions and transforms his painful memories to reach the ultimate goal of confession—clarity and purification. Thus, the boundary between fact and fiction in memory and writing is approached as blurred. I have also addressed guilt as a common (that is, not “othered”) human feeling that triggered Matthew’s schizophrenia. A further insight into psychiatric research conducted on this link would be beneficial.

Chapter 7 deals with two unconventional protagonists in the novels by Mark Haddon and Jonathan Safran Foer. Since norm, deviance, and mental illness are the key topics of the study, I analysed the two novels by referring to the medically framed interpretations of Christopher’s and Oskar’s behaviours. The dominant classificatory schemes that are applied to the interpretation of the characters and that are meant to label their behaviour as being on the autistic spectrum proved to be unstable when a non-classificatory approach was applied to interpreting the characters. The effect of a biased and classificatory interpretation (even though it is applied to fictional characters) can be harmful in the sense that it adds to the demonization of mental conditions and stigmatization of those with mental illnesses. When one publishes a biased interpretation of a character, it produces a biased perception of that character in the public eye—this is even more stigmatizing when an academic publication is concerned. However, the impact of the media image of the mentally ill is no less important: in chapters 3 and 6, I have discussed how both ignorance and spectacularized images of schizophrenia produce a demonized image of the illness as being the most stigmatized.

All of the stories discussed in the study seem to be connected by at least one thing of principal importance, the idea of lack of closure. This lack can be characterized by such concepts as suspicion and ambiguity. The current study has demonstrated a suspicious attitude towards classificatory interpretations (Chapter 7), the amount of collaboration in a collaborative narrative (Chapter 5), the revelatory nature of confession (Chapters 6 and 7), and suspicion towards language itself (Foer’s novel, in particular). As for the ambiguity, it would be limiting to provide value judgments and final statements concerning the novels. Chapter 4 states the possibility of different readings of Will Self’s texts since the texts themselves do not impose any particular reading—this is one of the reasons they
can be called transgressive. A similar case is represented by Cockburns’ memoir and Nathan Filer’s novel: what matters most in both texts is the narrated experience of schizophrenia—by the family in the former case and by the medical worker in the latter. Both stories lack an ending: neither Henry nor Matthew are completely cured, as readers of conventional illness narratives might expect (see Couser 2012). Haddon’s novel does not offer any coherent end either—this is a source of disappointment for those who treat the novel as an illness narrative (see Chapter 7.1. for the discussion). Derrida writes, continuing his discussion of literature as democracy, that in literature there is an “exemplary secret” that gives “a chance of saying everything without touching upon the secret. When all hypotheses are permitted, groundless and ad infinitum, about the meaning of a text [...] then the secret impassions us” (1995c, 29). Decisions cannot always be made and the ambiguity of the text should not be reduced to a single intention or interpretation. This idea is in line with the post-structuralist tendency to read what is written: “The reader’s task is to read what is written rather than simply attempt to intuit what might have been meant” (Johnson 2004, 346). For example, Derrida adds that the secret can be that there is no secret, and that one can “make out that there is something there when there is not. One can lie, cheat, seduce by making use of it” (ibid., 30). It seems that classificatory approaches to literary works (Haddon’s or Foer’s novels) and labelling attitudes towards the characters aim at proving the presence of disorders when there are none, or even if there is a disorder, such a proof overlooks what is most important about the characters’ experiences—their humanity. This is exactly the reason why the medical humanities has come to serve as an important background for the study.

It can be asked, then, if narratives use unreliable language to convey experiences that are also unreliable, can narratives of mental illness be actually helpful and worthy of discussion? This is one of the most important questions tackled in the post-structuralist reading of narratives. My answer is definitely yes, but we must return here to the idea of the responsibility of interpretation. This paradox is expressed clearly in post-structuralism: even though a person does not create the language that they use themselves, they are in any case responsible for what they say or write. Similarly, they are responsible for how they interpret what is said or written. Referring to Dwight Fee, I wrote about the social and media bias that might be present even in the ways that authors describe their experiences in autobiographical narratives. It is certainly reckless to suppose that writing can eliminate what Derrida calls différance, and provide a well-structured coherent narrative. However, according to Derrida, speech is hierarchically no higher than writing in the sense of immediacy, since the signs used by speech are no less arbitrary than those used in writing (signs of body language have proved to be ambiguous as well, as in the case discussed in Chapter 7.3.2). “Writing is not a sign of a sign”, he writes, “except if one says it of all signs, which would be more profoundly true” (Derrida 1997, 43).
It was argued in Chapters 2 and 3 that one’s self should not necessarily be coherent and, therefore, is not necessarily bound to produce a truthful narrative. This is even more the case when the idea of truth is relational. Cavell writes that “we use symbols, tell stories, see the same thing under different descriptions” and “the number of ways in which any of us can see a particular thing or event is potentially infinite” (2006, 18). The idea of using symbols for telling stories is significant here: both linguistic and graphic symbols are arbitrary, but the story can be told (that is, narrated orally or in writing) by using symbols known to the reader. This can be seen also in an episode in Foer’s novel discussed in Chapter 7. When Grandpa, being mute, tries to reach Grandma on the phone, he uses buttons and beeps to convey his message but the message cannot be received, since these are not symbols that Grandma can comprehend. Cavell also notes that language is necessary for many emotional states and “it is language that allows us to articulate the world more finely” (ibid.), that is, stories need to be told in language that can be at least comprehended. Otherwise, they would be just a collection of symbols or beeps. Language appears to be the only appropriate, conventional, that is, agreement-based mediator of one’s experiences.

The idea of coherence can also be referred to the discussion of whether it is possible and productive to speak of mental illness or any “transgressive” experiences using the discourse of reason as addressed in the Foucauldian idea discussed in Chapter 1. For example, echoing Foucauldian theory, Bracken and Thomas refer to postpsychiatry (the discipline focused on a narrative rather than biomedical approach) as an approach that “means an end to the ‘monologue of reason about madness’” (Bracken and Thomas, 2005, 2). Deleuze speaks of the artists’ transgressive experiences and highlights their “incorporeal metaphysical crack”, their reaching the “bottom of schizophrenia” and their always taking risk in following their own labyrinths: “Are we to speak always about Bousquet’s wound, about Fitzgerald’s and Lowry’s alcoholism, Nietzsche’s and Artaud’s madness while remaining on the shore?” (1990, 157). Imagining a world where “man will no longer know what madness was”, Foucault thinks about Antonin Artaud and remembers his appearance on the stage, hoping that in such a world “Artaud will then belong to the foundation of our language, and not to its rupture” (2006, 541). He hopes: “In a different kind of world, one free of the infernal recurrence of transgression and guilt, perhaps the poet on stage that night in 1947 would not have acted like a drowning man. […] Perhaps he would no longer have suffered for being what he was” (Miller 1993, 122). This feeling of drowning appears to be produced by those very requirements for coherence and appropriateness dictated by conventions that often do not have any foundation (for example, criminal law) other than morality confused with natural or common sense (the discussion on the difference between natural, criminal and moral laws is presented in Chapter 2). What I have tried to demonstrate in the study is the idea
that even though one is not self-transparent, one does not stop experiencing and, therefore, needs and is needed by others to share the experience.

This study has dealt with the idea of norm as relational. In his essay “‘Guilt,’ ‘Bad Conscience,’ and the Like”, Nietzsche writes that the ideas of “just” and “unjust” exist, accordingly, only after the institution of the law”, which means that “to speak of just or unjust in itself is quite senseless” (1989, 76). I have shown in this study that it might be “quite senseless” to speak of what is normal and deviant in itself—these categories make sense only because a constructed norm has been established in society. Similarly, the idea of difference implies the idea of a norm or standard in relation to which a person can be either different or not different (see Davis 2014). Attempts to categorize or name present an apparent problem: if the constructedness of the norm is taken into account, it becomes difficult to give a concise universal definition that anyone can use in order to make “judgments”. Chapter 2 has sought to provide different perspectives that throw new light upon the ways in which the norm can be perceived. I have shown that scholars tend to coin new, often odd, terms in order to break free from the idea of a clear-cut binary that the construction of norm entails. However, definitions and diagnoses may be said to come hand in hand. Similarly to what Nietzsche writes about his confrontation with morality, that “I deny morality as I deny alchemy, that is, I deny their premises” (1997a, 60), one can talk about the premises of the norm. Particularly, the premises that make the norm not liable to any questioning. Even though the foundation of morality or norms is often thought of as natural, they are the product of the Sartrean gaze of the other and societal relations that favour stability, coherence and a one-size-fits-all attitude, and all that is involved in normalization. Hell is still other people.

This study has its limitations. As Foucault once said, “when I no doubt wrongly believe that I am saying something new, I am nevertheless conscious of the fact that in my statement there are rules at work, not only linguistic rules, but also epistemological rules, and those rules characterize contemporary knowledge” (Chomsky and Foucault 2006, 23). I have mentioned that the literary narratives discussed can be biased since the narrators are affected by stigma and media representations of mental illness, just as their readers are. Miller and Mason write that, according to the stereotype, a person with schizophrenia is “out of control, dangerous, retarded, homeless” and this stereotype affects both those who are diagnosed and those who are not, since patients are assured that they will be retarded, unable to marry or have children (2005, 214). It can be added that under the influence of societal attitudes they might regard themselves as immoral or beyond morality (see my discussion in 2.4.). Even Nathan Filer, a writer and a medical worker, makes in his radio programme an “uncomfortable admission”: his novel *The Shock of the Fall* (Chapter 6) “might also contribute to the violence myth” (Filer 2017, n.p.). Although there is no hint at violence in the novel, one never knows what stigmatizing interpretations might occur. Also, language that is
intended to be academic can end up being ambiguous. Moreover, language ambiguity is found at three levels there: this study is presented as a narrative that discusses narratives that concern human experience. All writing contains ambiguity and a certain bias, and this cannot be completely eliminated in academic writing, either. Discussing the advantages of Nietzsche’s genealogy over a totalizing history, Foucault claims that the problem with the latter is that it tries to disguise the fact that it is biased, to present itself as a given universal truth that provides insight into human nature, while genealogy confirms the fact that the perspective is situated in a certain context (Foucault 1977b). Therefore, this study is itself contextualized, as are the analysed literary texts. In my reading, the texts present the characters’ or the narrators’ personal experiences in given personal circumstances. The ultimate essence of experiencing mental illness cannot be captured—this is the myth of Husserlian phenomenology that has been opposed by post-structuralism. The literary texts provide subjective experience, even though it can be influenced discursively. However, there is a way to deal with this possible bias. In his study on memoirs, Larson writes the following: “The best way to deal with the tension between fact and memory, as one uncovers the tension in the course of one’s writing, is to admit to the tension—not to cover it up” (2007, 25). Accordingly, I too admit to this tension—one that is mainly concerned with conventions of language and writing.

Since the study has argued against the presence of closure in the discussed literary narratives, it rejects closure for itself as well and is, therefore, open to the possibility of expansion. The topic of norm and deviance theorized here is broad and applicable to a wide range of problematic issues in literature and society at large. However, if the focus on the issue of mental illness is retained, the tensions of language, memory and interpretation can be dealt with in different types of narratives. Although several sources pertaining to psychiatry and neurology were used for the argumentation (such as publications in The Lancet, Journal of Mental Health, Psychiatry Research and others), the study could benefit from deeper insight into psychiatric research and further collaboration with scholars in the medical profession. Thus, even though it has been addressed, the problem of the roots of mental illness remains unresolved: in Henry’s (Chapter 5) or Matthew’s (Chapter 6) cases it is not clear whether art discourse or genes eventually contributed to Henry’s illness, or what accompanied guilt as a source for Matthew’s. It is known that life events affect people differently and that, even though guilt is a common human experience, the guilty are not necessarily diagnosed with schizophrenia. This means that the prerequisites for diagnosis are versatile and may include personal family history as well as different social and cultural aspects, such as social encounters, migration, political or “major” events—all of them frame and determine the individual characteristics of how the individual encounters and lives through mental illness. The multiplicity of the prerequisites confirms that there is no single essential experience of a given mental illness. Moreover, this multiplicity
of experience can be expressed effectively in a narrative that tells an individual and detailed story of coping with personal challenges, whether in the face of a “major” event or not.
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Norm and Deviance in Contemporary Anglophone Fiction and Autobiography explores the problem of the border between norm and deviance in mental health as it is reflected in contemporary Anglophone literature. By combining post-structuralist, phenomenological and medical humanities approaches, the study demonstrates the constructedness of the notion of the norm and analyzes how the discourse dominating in social and cultural environments has generated such a conventional label as deviance.