



## Reconstruction of the Self and Illness Narrative

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### Abstract

Illness narrative is both used as an occasion to recollect one's life, and as a lens through which new perceptions of that life is generated. *My Year Off: Recovering Life After a Stroke* (1998) is Robert McCrum's first-person accounts of illness, in which he made a claim for the self-change as the result of the stroke. This article focuses on the relations between the sense of self and illness. Through the textual analysis of his autobiography, this article tries to find how the stroke influences his sense of self and how McCrum regains the knowledge of self through telling stories of illness. Illness narrative provides an alternative way for him to access to personal experiences and find the meaning of the life.

**Key words:** Illness narrative; Autobiography; Sense of self; The stroke

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### INTRODUCTION

Illness has long been discussed in the biomedical research, which thinks the patients as nothing more than an object. Illness narrative, however, offers an alternative understanding of illness. It places the individuals at the center, and explores the subjective experiences of individuals with illness, which invokes changes both in their biological and psychological dimensions. Serious

illness is a loss of the destination and map that had previously guided the ill person's life (Frank, 1995, p1). McCrum's autobiography accounts that how the stroke sets the body apart from the others, and alters the way he perceives himself and the outside world, and as well as distorts his sensations of time. Both the somatic existence and his social identity are at risk. In order to absorb his new experiences, he tends to write stories about illness through which the wounded body comes to resume functions and the correlations of the outside worlds are reconstructed. Illness narratives are not just about illnesses, but they are significant means for studying illnesses in the context of the social construction. McCrum's autobiography not only affords him a right to speak for his own stories in his own words but creates empathic bonds between himself and his listeners, and therefore the circle of shared experiences widen, and voices of the wounded people can be heard, and their experiences can be appreciated.

### 1. SYMPTOMS OF LOSING SENSE OF SELF

#### 1.1 The Disintegrated Body

The body is material, guaranteeing the primary existing conditions of the self. Without a body, no one can be said of a human being. The body is the prime site of identity. The correlations among different body parts and the combination of various sensory inputs generate a unified self. The sense of the self implies a spatial unity of the self and the body. The body is witnessing and experiencing changes happening in a person. And in turn, the way a person perceiving himself is simultaneously shaped by his bodily image. Illness attacks the integrity of the body, and distorts the bodily images, and leaves the patient in temporary or permanent injuries. Illness casts shadows on a person's whole lifetime, and he must mourn the

lost part of himself. Robert McCrum at the age of forty-two suffered a stroke, making his left body temporarily paralyzed. During the whole period of illness, he realized that the rest of his life is always accompanied by illness and death, and he can never escape death for good. The stroke knocked him down, confined him in a wheelchair, and destroyed the way he felt about himself.

The immediate result caused by stroke is unbearable physical pains. Survivors of stroke would be left with permanent severe disability especially in neurological system, including impaired sensation, paralysis, blindness, and language problems. McCrum went through a period of physical retardation. "My left leg was immobilized and my left arm hung from its socket like a dead rabbit; the left side of my face, which drooped badly for about a week, felt frozen, as if Mr. Glynn had just given it a massive Novocaine injection. I could not stand upright, my speech was slurred..." (p.24) Because his left side body lost its basic functions, he was reduced to an almost vegetable-- "I feel oddly detached from the outside world. My image of myself during these days has been of a beetle or cockroach without a leg, flailing helpless and covered in dirt, on the brink of extinction" (p.57). Incomplete bodily images prevented him from knowing himself-- "the body" was used to refer the damaged body parts, and "I" the self. The affected body parts became alien, as if it no longer belonged to the whole body. The body remains mute when it metabolizes well, as results of an integrated self in regards to the carnal existence. However, illness intrudes into the biological balance in the organism, and leaves devastating impacts on the human body, mediated by sensations, such as anger, and depression. The physical dimension is the metaphor for the mind, and illness challenges the notions of the self: "As adults we forget that we live in our bodies. The unexpected failure of the body is a shocking catastrophe that threatens the flimsy edifice that we call the 'self'." (p.48)

## 1.2 The Damaged Social Relations

A man is more than an individual at the root of biological being but he is a man living through his experiences and his relations with people around him and the outside world. Intersubjective experience plays a key role in the continuation of self as the subject, in other words, subjectivity of immediate experience is source of knowing. In his forties, McCrum had a happy marriage, and was successful in his career, as an editor of Faber & Faber, one of the world's great publishing company. The stroke disrupted the pace and continuity of his life, transforming him from an energetic middle-aged male into a patient of the stroke. Suffering challenged his claim to be a self-contained, rational individual, who was required to be strong and independent. But even the trivial daily routines, such as taking a bath, or shaving he could finish alone threatened his masculinity. Tremendous changes had taken place in the marriage. His wife Sarah was

sensitive to changes in marriage, concerning about their future-- "I'm so scared that what we've had together-- the wonderful flushes of first love, but hardly years of time built up together to cushion blows like this-- will all evaporate now, and that our life together will never be good again" (p.70). The former harmonious life gone away and dreams of the future was fading. The role they played in life had changed from a couple relying on each other, and sharing happiness into two separated unities coming to resonate with pain, and agony. Sarah became melancholy, and resentful, and so did McCrum. Lying in the hospital, he was resentful to his lot, was fragile in body and mind, easy to cry. Moments of joy were rare, the life was overshadowed by frustrating disability. In the hospital, McCrum was required of playing the role of a passive patient during his convalescence. The clinicians has no sense of respect for privacy and dignity. He found that "There is a curious intimacy in a hospital--nobody has anything to hide. Once you are here you have to expose every part of your body to the nurses. There's no privacy. As well as this, you are weak and they are strong. This can make nurses seem like sadists or authoritarians" (p.91). Once setting feet in the hospital, patients are tagged with labels of impotence, passivity, and even stigma. Medicines are vital to their health, but medical staff who have access to medicines are in actuality their life saviors. Doctors analyzes illness in the context of biological phenomena. "Medicine's reductionism narrows its gaze, eliminating that which proliferates around the biological phenomena of sickness in a patient's always generative and teeming life" (Charon, 2006, p27). In the opposite, the patient responses to illness within the while scope of his entire life. The patient is longing for doctors who comprehend what he goes through and who stay the course within them through his illness. In the eyes of McCrum, the hospital had no difference from a prison, the doctors were spying on him and scrutinizing him. No consolation or comfort can be felt living in the hospital.

## 1.3 The Distorted Perception of Time

The dimension of time is vital to daily life and survival. The awareness of the passage of time and perception of its duration, and these experiences are intertwined with the molds of knowing the self, and responding to the outside world. It has been suggested that bodily processes lie at the core of human time perception and that intertwined affective and interoceptive states create the experience of time (Wittmann, 2013, p217). Instead of keep a static situation, the body is always involved into constant changes in aspects of fitness, and physique. Illness distorts the bodily images, resulting in the biological damages, and meanwhile, it harms the psychological health, provoking negative emotions, or serious emotional problems. And the patient walks into a new territory, the kingdom of sick, where he accesses to a new position, and new experiences, and changes his sense of time. McCrum was imprisoned in

the hospital, and an ordinary day of twenty-four hours was condensed into a new routine: morning check, exercise, and lying in the bed, which altered his time perception. “I also discover that my sense of time is very peculiar: I often can’t tell the late afternoon hours from each other—or the morning hours, for that matter.”(p.76)

The sense of the self is constructed in experiences during the whole course of lifetime. The body asserts the corporal existence, witnessing the challenges and changes of self-assertion as result of illness. Kathryn Conway in her instructive book *Beyond Illness* (2013), summed up three phrases of the damage of illness to the body and sense of self. The sufferer first feels distracted by the body’s discomfort, that is, the diminished sense of self accompanies the illness. And the integrity of self is at risk, and gradually the pained self becomes the only self. At the end of the phrase is the total loss of self one experiences when near death. The disturbance of his body image compromises his ability to know himself. Excruciating pain, toxic treatments, and loss of basic functions constantly reminded him of losing the control of the life and therefore, made him lost in a land of darkness without any order. Besides, the recognition of self is realized through the interactions with others, others work like a mediator by which people have the connection with the outside world. People identify their existences through reflections of self in other persons’ mind. The other is central to self-consciousness, and is the indispensable mediator of knowing the self. A series of changes taking place in interpersonal relationships damaged his self-confidence, blurred his self-perception. McCrum and Sarah’s marriage was overshadowed by his inability and emotional turmoil. He as a son could not take care of his parents. As a knowable chief editor in Faber& Faber, he faces the career Waterloo. All these changes have severely disturbed his daily life. Losing the track of time he failed to link the past memory with the illness experiences and to see immediate future.

## 2. THE RECONSTRUCTION OF SELF THROUGH ILLNESS NARRATIVE

### 2.1 The Rebuilding of Memory

Illness often creates a great chasm between the self-in-illness and self-in-life. Experiences in the course of illness neither belong to the whole life course but are buried in the deepest site of a person’s memory. Illness is a crisis of self in the specific sense of an uncertainty. Unless the patient is willing to talk about the illness experience he cannot absorb it.

Narrative has its own healing powers. It provides means for self-knowledge and communication. Through writing and reading a text, people acquire the knowledge of themselves and others, and share stories with each

other. A published narrative of an illness is not the illness itself, but it can become the experience of the illness (Frank, 1995, p22). Illness narrative, placing the individual at the center of the narrative, records the illness experience and voices the ill person’s changing identity. Besides, it draws out the meaning of the author’s experience. Illness disrupts a patient’s selfhood. It detours into the ordinary life which makes a patients hardly connects the past life with the present, and no future can be found in his life. Stories have to repair the damage that illness has done to the ill person’s sense of where she is in life, and where she may be going (Frank, 1995, p53). Illness is a disruptive event which leads to a loss of destination and map of one’s life, and as for a patient, being ill means living with perpetual interruption. But illness calls for stories because through telling the story one can bind together the events, feelings, thoughts, and sensations that occur during an illness into an integrated whole. Narratives have two sides: personal and social. Personally, the telling of illness familiarizes the self to the lost body. Socially, storytelling invokes listeners whether they are present or not. And these stories can guide others who follow them and will pass on to affect others’ stories.

Illness narrative helps to rebuild a patient’s memory. Cathy Caruth in *Unclaimed Experience* (1996) stated that trauma often occurs so soon that the survivors cannot realize it when it happens. The onset of the stroke is too fast to be fitted into the full cognition, which experiences seem impossible to the consciousness. Lying in the bed in the hospital, McCrum often felt at lost. He had no sense of time and did not even remember what happened before he was sent to the operating room. While, he decided to write the diary. Diary is chronological, and it records the daily routines which seems vital, but it is helpful to his to recovery his memory. What he had achieved during rehabilitation are recorded in the diary, which units pieces of time together and then makes up a whole picture of his experiences in illness. Wounds produced in the body is retained as the memory of the event. However, memories of traumatic events and feelings can never be registered unless they are narrated in the oral or written forms. Such memories of fear, pain, and anguish are left apart from the experience of the self, which counters the notion of the self as whole. McCrum was writing the diary and reading the diary by his wife. The diary keeps the memory, and produces the memory. It is used as a machine to go back into his experiences of illness, and bridge the past and the present as that it gives him a comprehensive window to remain himself. The body records the events, and the diary assists to revisiting a time when the illness happened. Repressed memories, nevertheless, blocks the passage of the time, not accessible to the normal life, but traumatic experiences associated with the pain, were finally available to McCrum, who came to know himself: “So it came as a physical punctuation mark, a reminder from my

body to pause and to take stock... I needed to get in touch with myself again..." (p.151).

## 2.2 The Regaining of Social Identity

Disability in movement, and failure in speech alienated McCrum from the outside world. In the hospital, and even at home, he had to surrender to social death. Owing to writing stories of illness, he turned from a patient to a survivor of the stroke, a new identity. As for him, survival did not include any particular responsibility other than continuing to survive, which correspondently stimulated him to tell what happened. Ryan and his colleagues (2009) wrote that:

Writing enables an individual with dementia to explore and express a renewed social identity that is built upon positive traits, roles and personal controls. This helps individuals to move beyond 'suffering' to truly 'surviving'.

Storytelling alleviates sufferings, and pains, and meanwhile provides one person with a rich, constant grasp of another person's situation as it unfolds in time. Readers thinking with stories are called for attentions to the biological conception of disability, and to the ethical knowledge of what is going through. In his autobiography McCrum introduced and explained causes of the stroke, and both temporary and permanent damages on the body and the mind. However, American culture is dominated by the myth that emphasizes strength, success, and independence, but tends to gloss over illness difficulties and obstacles of experiences. The culture is hiding suffering from the public attention. What he provided were not just scientific data, but was an accounting for a sense of responsibility to live for others. storytelling is reciprocal that he offered himself an opportunity to reconstruct his own map, and as much as guided others who is facing the same situation, or will fellow him in that the voice of wounds is embedded in a specific person, but it is equally social. The way in which he told his story and his readers listen to such traumatic events constitutes a process through which facts are contained on one personal experiences, and perceiving reality, which represents and asserts his own existence.

Illness narrative promotes the coherence across different life phrases, and increases a new awareness of self in the present, and the past, and as well as the future. The act of making stories of personal experience highlights moments of success and failure, an emotion turmoil and finally an evaluation. Experiences within the form of personal storytelling can gradually lead into the action of the self-consciousness to which its significance is both personal and social.

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## CONCLUSION

The paper is designed to gain insight onto how the stroke influences selfhood from Robert McCrum's first-personal accounts of illness. The stroke may change his sense of self, but through narrative he gains the knowledge of the self. The paper shows how McCrum with the stroke loses the sense of self due to a loss of physical functions, the perception of time, and interactions with others. And, it highlights that McCrum uses narrative as the site for self-construction. Through this study, I hope to contribute a more holistic view to illness and to advocate for the importance of the public health, and the social sciences.

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