

THE KINGDOM OF THE SICK

HEALTH AND SICKNESS IN CONTEMPORARY BRITISH LITERATURE

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This project seeks to present health as a contested term with a continually evolving set of principles and social relations. The nature and causes of states of health and sickness is determined not only by physical symptoms but influenced by class, gender, and race, and is perceived differently by patients, practitioners, and policy-makers. Contemporary British authors such as Ian McEwan, A.S. Byatt, Ali Smith, James Kelman, David Lodge, and Will Self offer a cultural history of the present that is united by a particular concern with the myths and metaphors that contribute to our understanding of health and sickness. Accordingly *The Kingdom of the Sick* charts a series of conditions that stand within the liminal space between health and sickness, namely: grief, anxiety, boredom, obsession, disaffection and consumption and signals the inadequacy of any understanding of health that is not culturally, historically, and geographically situated. Rather than adhering to the ontology of certainty found at the heart of scientific medicine in which disease is objective and the body reduced to the level of a mechanism, *The Kingdom of the Sick* uncovers the ways in which contemporary British authors urge us to reclaim the narrative of the individual sick person and reconsider what it means to be healthy and what it means to be sick in the twenty-first century.

The first use of the word ‘boredom’ is attributed to Charles Dickens and signals a state that takes us continually back to ourselves; in this respect it is a condition of confinement away from stimulus that results in self-reflection and the manifestation of time as an oppressive spectre. Boredom causes physical listlessness, melancholy, depression, and the loss of desire; it reduces our sense of subjectivity and can result in complete anomie and withdrawal from the world. In *The Conquest of Happiness* (1930) Bertrand Russell refers to boredom as a modern-day epidemic that afflicts the masses and reconfigures time as an unbearable presence that haunts us as a stagnant present. Meanwhile Kierkegaard argues that the cure for boredom is the cultivation of arbitrariness that catalyses creative vision. Boredom is a pervasive characteristic of Ali Smith’s oeuvre signalled through intense bursts of self-reflection and efforts taken to show how otherwise banal objects can appear interesting. Smith’s emphasis on writing and the materiality of the book, the precocious child narrators who continually devise new connections between self, signifier, and signified, the use of second-person narrators, and direct addresses to the reader all urge us to reconsider the relationship between self-reflection and engagement with the external world, or the dialectic between boredom and creativity. Most tellingly Smith’s characters typically only resolve their boredom through an encounter with an interesting, unpredictable Other. In this respect Smith’s depiction of boredom constitutes a response to the widespread abundance of disaffection, mundanity and uncertainty in the twenty-first century. Rather than an affliction to be cured, boredom appears as a stimulus to motivation, creation, and re-engagement with the world anew.

Boredom: Ali Smith

The fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) issued by the American Psychiatric Association (APA) has attracted criticism for its instrumentalist attempt to comprehensively systematise the diagnosis of mental disorders. Among other concerns the APA’s drive to classify grief as a mental illness has stimulated debate on the distinction between ‘normal’ human reactions to distress and the symptoms of real mental disorders. Although grief is typically understood to be an emotional response to loss, the etymological root of the word ‘grief’ is the Latin word ‘gravis’ meaning ‘heaviness’ and throughout the sixteenth and seventeenth centuries it referred to both bodily injuries, mental anguish and grievance, signalling that a wrong had been committed against the sufferer. These dramatic semantic shifts and large degree of polysemy signal the ways in which emotional states have been framed and constructed through particular world-views over time. Byatt’s oeuvre enriches the on-going debate about the classification of mental illness by exploring the similarities between grief and sickness while warning against false equivalences. Against instrumental or didactic uses of ‘grief’, Byatt’s work presents the state as one possessing the beauty and energy required to create new relationships between living and vital forces. This section presents Byatt’s complex and evolving portrayal of grief as an uncertain state that reaffirms the importance of storytelling and narrative traditions in the face of loss. Her work suggests that coming to terms with trauma should not be framed as an attempt to reassert order and control but a process of engagement and eventual acceptance of the arbitrary and the uncertain.

Grief: A.S. Byatt

The work of James Kelman draws attention to the ways in which cultural values and economic factors penetrate allegedly value-neutral biomedical practice and influence public perceptions of health. In particular, his work problematises the ways in which the body is codified by institutions and social practices, which can lead to the widespread disaffection of vulnerable and low-income individuals who are then alienated from healthy lifestyle choices and preventive healthcare measures. Many of Kelman’s texts portray impoverished and disadvantaged individuals struggling with the bureaucratic and linguistic challenges involved in accessing local-level healthcare and present the doctor-patient relation as a system of power in which certain medical narratives are granted greater credence than others. Kelman’s distinctive use of Glaswegian vernacular, blurring of the division between direct speech and interior monologue, and a narrative voice that is coloured and influenced by the idioms of the protagonist, each signal the ways in which discourses on health are directed, both overtly and covertly, towards the construction of particular types of subject and function as an apparatus of moral regulation that serves to draw distinctions between ‘civilised’ and ‘uncivilised’ behaviour, to privilege rationality, promote Cartesian duality, and represent particular social groups as an uncontrolled and threatening Other. These stylistic tropes raise questions not only about who speaks for the patient, but also about the relationship between the individual and the community in contemporary British society. Kelman highlights the construction of medical discourse and offers a warning concerning the culture of disaffection that can lead the most vulnerable citizens to become disenfranchised and alienated from discourses on health.

Disaffection: James Kelman

Consumption: Will Self

It is a common trope in Self’s fiction, and satiric literature more generally, to find the vaunting ambitions and pretensions of the intellect brought low by the material and biological needs of the human body. Self frequently presents readers with images of the obese, diseased, and addicted body as metaphors for wider cultural malaise, vice, and corruption and these images are typically linked to representations of the medical establishment. Historically the language of medicine has been used to produce certainties. By contrast Self removes medical language from its institutional setting and places it within a fictional context. This has the effect of deconstructing the authority accorded to medical and scientific discourse. Just as critics of consumer society have noted a shift from the purchase of services and goods based on their use-value to the production of social signifiers, so the distinction between health and sickness has shifted from physiological symptoms to signifiers of class and affluence. The notion that the state should care for the health of its citizens is increasingly replaced by the expectation that citizens should take a more active role in caring for themselves as ‘patient-consumers’ and the ethical ramifications of this are reflected throughout Self’s oeuvre. Whereas in the nineteenth century ‘consumption’ was the colloquial term for tuberculosis because the disease was perceived as ‘galloping’ through its victims, consumption today inverts this relationship so that individuals are recast as active subjects who consume the goods, services and increasingly the healthcare around us. Self’s depiction of the medical establishment is read alongside the impact of consumerism in medicine as well as the ways in which medical consumerism has fashioned our understanding of health and the body.