

Kafka's inverted desert journey. A case study in narrative medical ethics

H. Zwart (1993) *European Philosophy of Medicine and Health Care*, 1 (1), 23-26.

During the past two decades bioethics has grown into a well-established field. A sense of discontent in bioethics, however, emerged as well. A growing number of participants adheres to a quest for an alternative approach. However divergent their efforts may appear at first glance, some important similarities can be pointed out as well. The alternative approach is to be *case oriented*, rather than principle oriented. It is to focus on *interpretation*, rather than application. And it is to emphasize the importance of the individual's *moral environment* rather than his moral autonomy. Furthermore, several contributors consider the concept of narrative extremely helpful in elucidating the moral aspects of contemporary medicine, and point to its significance in clinical situations. My contribution - an exercise in narrative medical ethics that will take the patient's perspective - is aimed at two objectives. First, I want to present a schematic account of narrative as an interpretative tool by means of which the patient tries to come to terms with his situation, and with the illness that has befallen him. Secondly, I want to elucidate this account by means of a case study concerning the novelist Kafka who, in his diaries, took recourse to narrative to deal with his fatal illness.

THE PATIENT AND HIS ILLNESS

From a narrative perspective, one should not reduce the patient's illness to its physiological or medical aspects. The human person should not be viewed as a disengaged, dispassionate observer of facts, but rather as someone who tries to capture the meaning and significance of his situation - and if he is a patient, of his illness. The patient is viewed as a moral *agent* engaged in interpretative efforts, aimed at attaining a moral evaluation of his situation that goes beyond the medical or physiological account.

Three aspects must be distinguished. The first aspect concerns the medical and physiological *facts*. These facts contain significant cues that will trigger the patient's interpretative efforts. The second aspect concerns the process of constructing a picture or, rather, a *story* from these cues. And the third aspect refers to the way the patient, while engaged in these interpretative efforts, draws upon resources available in his cultural environment. Within a narrative approach, these resources are regarded as narrative *scripts* that enable us to recognize and evaluate the moral aspects of a particular situation. A narrative script serves as an interpretative and evaluative tool by means of which the patient tries to come to terms with his illness. These scripts should not be viewed as unalterable and the patient is not committed to them for ever. Rather, he will revise and adapt them to his particular situation. In certain cases, the patient will even move beyond the script on which he initially embarked, and opt for an unexpected turn.

The patient's cultural environment provides him with a huge collection of narrative scripts. In a traditional society, the moral subject, engaged in interpretative efforts, is supplied with narrative material that is rather univocal, stable, and complete. Contemporary culture, however, is haunted by strong centrifugal tendencies that render the narratives it contains plurivocal and fragmentary. To retain a sense of direction in such a bewildering environment, the human subject finds himself forced to continually make innovative efforts that open up new connections between the narrative fragments he encounters.

With regard to the meaning and personal significance of illness we often discern a strong affinity between serious illness and the patient's sense of personal identity. While suffering from a serious illness, he will ask himself why this illness has befallen him. The illness distinguishes him from others and attaches a special significance to his life. In some cases, a serious illness will incite the individual to contemplate on the meaning and purpose of his personal existence. It will point at some special task or obligation which he tacitly felt imposed upon himself and which now presents itself more clearly before him. That is: the illness attains a positive value in that it elucidates hidden aspects of personal existence which would otherwise have remained unexamined. Let this suffice as a

schematic account. In the next section I will try to elucidate it by means of a case study.

A CASE STUDY: KAFKA'S ILLNESS

Kafka died of tuberculosis. The letters and diary entries he produced while being ill, are referred to by Susan Sontag (1979) as a compendium of speculations about the meaning of his illness (p. 33). According to Sontag, such efforts are to be deplored. She seems to deny the patient the right to speculate about the personal significance of the illness from which he is suffering. Illness does not have a meaning and the most truthful way of being ill, she claims, is one most purified of, and most resistant to, efforts to attach significance to it. It goes without saying that, from a narrative perspective, Kafka's interpretative efforts are evaluated in a less pejorative way.

On October 17, 1921, Kafka points to a possible resemblance between his illness (that is: his physical decay) and an important aspect of his personal existence, which he refers to as his 'lack of involvement with life'. He considers himself 'singled out' by this lack of involvement with life from other human beings (January 30, 1922). The illness, a 'symbol' of this aspect of his life, seems to point to a sense of purpose. It is in accordance with his objective to remain undiverted by the 'joy of life' that characterizes the healthy individual. The attempt to live up to his calling as an artist demanded that he detached himself from everyday human interaction and its many responsibilities and obligations. His illness, signifying his lack of involvement with life, complies with his sense of obligation as well as with his sense of personal identity.

In short, we encounter the physiological *fact* (physical decay), as well as the patient's interpretative effort: the *story* of his life in the service of art. Finally, we also encounter the source from which this story was derived. The fact of his physical decay is connected with a culturally available narrative *script*: that of the hero-artist who eventually must pay with his life for the privilege of being among the elect.

This narrative is joined by another narrative that emerges in Kafka's diaries. On January 28, 1922, he notes that now he has become a citizen of

'this other kingdom', which is to the ordinary world as the desert to agricultural land. The narrative that emerges is that of the Two Kingdoms, the kingdom of the ill and the kingdom of the well. Sooner or later, each of us will become a citizen of this other world, but Kafka does so rather early, and in a special way. For the story of the Two Kingdoms is connected with another narrative, available in the cultural environment in which Kafka was raised: the journey of the Jewish people through the desert to the Promised Land. The Kingdom of the ill is identified with the desert, the kingdom of the well with the inhabited agricultural land. Two narratives merge. Kafka notes, however, that he travels the other way around. He finds himself engaged in an 'inverted' desert journey ('umgekehrte Wüstenwanderung'), from the inhabited Kingdom to the desert. This exemplifies what has been said above about the individual's ability to revise culturally available narratives. For although it is a traditional story which he is entering, this does not imply that the plot of his life story is predetermined by it. Rather, the narrative script is adapted to his personal situation. It serves as the starting-point from which the personal narrative is constructed.

In short, we have the *facts* of physical hardship, and we have the *story* of the inverted journey, which is a personal adaption of a culturally available *script*. It is the adaption that conveys the meaning. By emphasizing the fact that he is engaged in an inverted journey, he once again expresses his sense of being singled out from others. The inversion points to his sense of obligation and personal identity. Life has plotted a special route for him, inevitably connected with his calling.

LITERATURE

F Kafka, *Tagebücher*, Frankfurt am Main: Fischer, 1968.

S Sontag, *Illness as metaphor*, New York: Vintage Books, 1979.