

**Traumatic Representation: The Power and
Limitations of Storytelling as “Talking Cure”
in Michael Ondaatje’s *In the Skin of a Lion*
and *The English Patient***

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Recently, studies of trauma have drawn attention to the status of language as a form of representation in the face of overwhelming experiences. Responses to the issue of narrative representation, particularly the capacity of language to represent traumatic events, are polarized, however. Two parallel yet contradictory contentions regarding the efficaciousness of language and narrative as modes of representation have emerged. On the one hand, scholars such as psychologist and social critic Judith Herman argue in favour of the power of language and narrative, particularly the model of storytelling that we commonly refer to, following psychoanalysis, as the “talking cure.” Although the process of representing trauma is often demanding, Herman argues that language or the act of telling the trauma story as a “talking cure” has the capacity to render the elusive traumatic event, an act of representation that ultimately has therapeutic benefits, offering “relief of many of the major symptoms of post-traumatic stress disorder” (183). From another perspective, Dori Laub, a psychoanalyst who works with Holocaust survivors, and literary critics, such as Shoshana Felman and Cathy Caruth, consistently draw attention to the limitations of language and storytelling. Trauma is defined by these critics as an overwhelming occurrence that is so complete, literal, and pure it demands a vocabulary and syntax incommensurable with what went before it. As Laub puts it, “there are never enough words or the right words [...] the story [...] cannot be fully captured in *thought, memory, and speech*” (63). Dominick LaCapra, however, has recently noted the dangers of this approach, arguing that it has engendered a “psychoanalytically based fatalism” (151) in current theories, where “mourning itself may always seem fatalistically to

come back to an endless melancholy” (151). This critical perspective, La Capra posits, “eliminate[s] possibilities of working through” the traumatic event, or fails to “provide much insight into them” (150). What exists, then, is a critical impasse that addresses not only the subject of language but also, as Laub describes it, storytelling, particularly in the form of talk therapy. Storytelling is situated as both powerful and redundant: it can give representation to an incomprehensible event and engender cure, while it simultaneously threatens to collapse under the strain of a traumatic episode. In effect, storytelling disallows even the prospect of working through trauma to promote psychic healing.

The impasse described here is not only apparent in theoretical works on trauma; it is also evident in contemporary fiction that deals with issues of trauma, storytelling, and representation. It is a preoccupation particularly shared by Canadian author Michael Ondaatje. He has indirectly suggested his interest in these issues in an interview with Eleanor Wachtel, where he reveals that the subject of healing is a central concern in his second novel, *The English Patient*: “It is a book about very tentative healing among a group of people. I think it is that most of all” (255–56). Ondaatje is not taking on the role of physician or even psychotherapist here; rather, I believe his interest in healing is decidedly literary. Specifically, both *The English Patient* and its antecedent, *In the Skin of a Lion*, explore the issue of traumatic recovery in concert with an investigation of storytelling in the form of the “talking cure.” Like current theorists of trauma, Ondaatje explores the capacity of storytelling during talk therapy to represent and, by extension, reconcile trauma. Unlike the medical discourses that often influence discussions of trauma and narrative, however, reconciliation for Ondaatje has less to do with clinical efficacy than with broader aesthetic, political, and cultural issues, such as representation, humanism, and identity politics.

If Ondaatje is interested in “healing” and, by extension, the capacity of storytelling to heal by representing trauma, he is implicitly implicated in the previously discussed debate that characterizes current thinking on traumatic representation. Where might we situate Ondaatje’s fiction within these debates? In this essay, I argue that Ondaatje’s works over the course of *In the Skin of a Lion* and *The English Patient* enact this polemic

on the efficacy of language and storytelling as forms of traumatic representation. Ondaatje, then, oscillates between two theoretical perspectives. Literary representations of the “talking cure” in both works reveal that Ondaatje is initially committed to the power of storytelling as a method of depicting trauma and satisfying both humanist and political imperatives. And yet, Ondaatje’s later novel *The English Patient* indicates a shift in critical perspective, for storytelling in the form of talk therapy is revealed as a highly limited mode of representation. This shift indicates not only Ondaatje’s developing disillusionment with talk as cure but also his increasing commitment to identity politics. This essay ultimately posits that even though Ondaatje draws attention to the limitations of narrative as a form of traumatic representation, his works do not reinforce the impasse that is apparent in current theories of trauma. Ondaatje’s disillusionment with storytelling does not lead to the “psychoanalytically based fatalism” described by LaCapra. What we have in *The English Patient* is not merely “endless melancholy” engendered by the inability to represent trauma but a concerted commitment to “working through” the traumatic event despite the limitations of language and narrative. Before I trace the ways in which Ondaatje both enacts and complicates current debates regarding the efficaciousness of storytelling as a mode of traumatic representation, I want to define the “talking cure” as the specific narrative paradigm used to render the trauma story in these works.

Usually, mention of the “talking cure” conjures up images of couches and repeated psychoanalytic consultations. Indeed, literary representations of this model of therapy in Canadian fiction certainly support these assumptions. Keith Oatley’s *The Case of Emily V* and Margaret Atwood’s *Alias Grace* dramatize the “talking cure” as a psychoanalytic process; indeed, these works parody Freudian psychoanalysis, and ultimately subvert many of the controversial elements of *Dora: An Analysis of a Case Study*. This conflation is nonetheless problematic, particularly in light of Anna O.’s case in *Studies on Hysteria*, the account where the term “talking cure” is coined and the procedure first described. There, Sigmund Freud and Joseph Breuer reveal that the process only involves recollecting, relating, and reliving traumatic memories in the presence of an attentive listener, and does not include any form of analysis. This

regimen, Allan Young clearly indicates, should not be confused with Freud's later psychoanalytic projects: "In abreaction ["talking cure"], events must be remembered [...] but their specific nature and significance are, in themselves, irrelevant to the clinical process. The therapist simply listens to the patient's memory; he has no motive for helping him interpret it" (74).

The "talking cure" can, of course, exist outside the formal therapeutic contract. What we are often confronted with, then, is not so much a professional therapeutic encounter but rather a narrative paradigm that serves a therapeutic function by representing overwhelming experiences. Anna O. was, after all, informally telling a story about traumatic events in her personal life. As a narrative model, the "talking cure" is characterized by distinct aesthetics. Generally, it is a retrospective narrative that takes the form of a story and is often related by the speaker in the confessional mode. It is also addressed to an attentive listener, what Dori Laub has termed an "*addressable other*, an other who can hear the anguish of one's memories and thus affirm and recognize their realness" (68), and so can be termed a *dialogic* narrative. Current theorists of trauma, such as Dori Laub and Judith Herman, have also pointed to the communal, political, and ethical dimensions of the "talking cure." In effect, definitions of talk therapy need to be refined in light of recent discourses, which recognize its status as a testimonial.

1. Affirming the Power of Narrative Representation in *In the Skin of a Lion*

We are given a literary representation of the "talking cure" at the close of *In the Skin of a Lion* during the scene in which Patrick Lewis, the novel's central protagonist, offers his cathartic confession regarding the death of his lover, Alice Gull, to Commissioner Harris, the authority figure Patrick associates with the exclusive wealth against which Alice protested. This penultimate scene is approached circuitously; although we are made privy to the eventuality of Alice's death earlier in the novel, the text takes approximately ninety pages to reveal its specifics during Patrick's confession to Harris. The narrative structure here suggests that the trauma of a loved one's death cannot be faced immediately, but only

tentatively and indirectly. Despite these difficulties, Patrick does ultimately render the episode to an attentive listener, engaging in a form of the “talking cure.” In an attempt to satisfy Alice’s socialist beliefs, Patrick clandestinely swims through the tunnels of the water filtration plant, a site that represents both the decadence of the wealthy and the exploitation of working class immigrants, and sets a series of dynamite charges. Before he can detonate the explosives, however, Patrick encounters Commissioner Harris, who stalls him through conversation. Initially, Patrick continues to fulfill Alice’s socialist agenda, relying on political rhetoric when he tells Harris of those who suffered and died building the Waterworks to be later disregarded by public annals (236). But, ultimately, he satisfies his own mandate, leaving aside “the language of politics” (122), which he disavows earlier in the novel, and opts for the “the private,” and “the Human” (135), that have always been his priority. When Patrick exhibits reservations, he is prompted by Harris to tell his personal narrative: “I don’t want to talk of this anymore. Then it will always be a nightmare [...] Patrick, talk to me” (239). Harris’s encouragement is not, of course, altruistic; although his register is that of a concerned therapist, he prompts Patrick to speak in order to deter him from destroying the plant. Despite his ulterior motives, Harris is an attentive listener, someone who Laub would call “an *addressable other*” (68). What ensues is an intimate and graphic depiction not only of Alice’s death at the hand of an “anarchist” but also Patrick’s emotional response to it, particularly his anger. Initially, Patrick’s narrative is rendered in the first-person, but when he begins to describe coming upon Alice’s dying body, there is a shift in narrative voice; the scene is related in the third-person omniscient and is focalized through Patrick: “Then I heard the explosion.... Then nobody moved, Patrick remembered” (240). This narrative transition performs trauma’s imperviousness to representation; the horror of Alice’s death is so overwhelming that Patrick is without a vocabulary of grief that will allow him to articulate the event in his own voice. Despite these difficulties, the novel suggests that Patrick does ultimately represent the episode to an attentive listener; the ellipses that separate the shift from the first- to third-person speech in this passage imply that Patrick continues to tell his story within the novel’s diegesis;

indeed, the oral dimensions of the interaction further suggest Patrick's continued articulation of his trauma story to Harris. Ultimately, the scene is a literary representation of talk therapy: although an unorthodox manifestation, it shows two people engaged in a *dialogic* narrative that unearths and represents personal trauma.

In this episode, the "talking cure" is idealized as a mode of traumatic representation, offering immediate, uncomplicated relief. At the close of his speech, Patrick falls asleep, and so indicates that he is emotionally appeased by this cathartic confession. As Frank Davey aptly suggests, "structurally, this memory transforms Patrick from bomber to bomb-victim, from someone angry and aggressive to someone aggrieved and comforted. Rather than detonating the charges he has planted he falls asleep" (154). Patrick does not simply fall asleep; he does so in Harris's presence. The "talking cure," then, both emotionally satisfies Patrick and facilitates a redemptive bond based on trust between two people who had once been enemies. In effect, this narrative act satisfies an innate humanist imperative to unify and coalesce: Patrick's emotional state is balanced and a bond between adversaries forged through the act of storytelling.

Talk therapy not only offers a sense of "very faint, very human" order (Ondaatje, *Skin* 146); it is also highly politically correct. Christian Bök has argued that Ondaatje's earlier works, particularly *The Collected Works of Billy the Kid*, *Coming Through Slaughter*, and *Running in the Family*, valorize violence enacted for purely idiosyncratic reasons, usually death or madness, whereas his later pieces begin to reevaluate the ethics of such violence. Davey's earlier assessment of Patrick's confession implies that the destruction of the Waterworks can be read as an emotionally unstable act that is in keeping with the volatility that defines Ondaatje's earlier characters. Although Patrick seemingly convinces himself that by detonating the explosives he can satisfy Alice's socialist cause, this strategy can also be read as Patrick "acting-out" on feelings of anger linked with her death. Rather than having its central protagonist unconsciously and irresponsibly act on these extreme emotions, as William Bonney, Buddy Bolden, and Mervyn Ondaatje often do in the earlier works, *In the Skin of a Lion* exhibits an appreciation for the politically problematic dimensions of violent emotional outbursts in the form of

terrorism by having Patrick Lewis opt for diplomacy and dialogue, not destruction. In another essay on the novel, Bök argues that by leaving the Waterworks intact, the novel exhibits its lack of support for violent socialist revolutionary action. Although Ondaatje romanticizes the labour movement, Bök contends, the text “privilege[s] visionary idealism over dialectical materialism, the *theorin* of utopia over the *praxis* of reform” (“Secular” 13). By having Patrick communicate his grief rather than destroy the Waterworks, the novel not only disavows aggressive revolutionary tactics. If we interpret Patrick’s potential act of violence psychoanalytically, designating it an irrational and unconscious emotional outburst to trauma, the novel also repudiates reckless emotional violence and affirms, even idealizes, the role of storytelling, designating it a politically sound form of emotional appeasement.

By seamlessly satisfying both humanist and political imperatives, however, narration almost seems too efficacious at the close of the novel. As a plot device, the “talking cure” here is a little too expedient. It satisfies an innate humanist imperative to heal, offering Patrick redemptive sleep and forging alliances between enemies, and it simultaneously recognizes important political dimensions by affirming dialogue and diplomacy over terrorist violence. Indeed, talk therapy appears to justify the resolutions exhibited at the close of the novel. Patrick is rewarded for talking rather than detonating, that is to say, working through his emotions rather than acting them out, at the novel’s close with the spoils of the romance narrative. Although, as Linda Hutcheon and others have recognized, the novel is regularly weary of teleological narrative structures, Ondaatje’s work is not left entirely unaffected by the romance plot. By the novel’s close, Patrick journeys towards his previous lover, Clara, who left him for the millionaire Ambrose Small years earlier. Small has been removed as an obstacle, dying a lonely and deranged death, leaving Clara and Patrick free to unite and re-establish a family unit for Hana, Alice’s orphaned child. In this context, Patrick’s final word in the novel, “lights” (244), signifies the rebirth afforded by the romance narrative. Ondaatje not only exhibits his commitment to talk therapy by situating Patrick’s confession as both personally and politically redemptive. The novel generally espouses storytelling, peppering its plot with episodes of intimate

narration, where “each person [...] assumed the skins of wild animals, when they took responsibility for the story” (157). As Hutcheon has noted, these personal narratives serve an innately counter-discursive function, writing back to public historiography, which often precludes mention of personal stories. Ondaatje makes this political objective clear in his epigraph to the novel by John Berger: “Never again will a single story be told as though it were only one.” The linear, teleological structures of both history and realism imply the existence of not only objectivity, but also finality, suggesting that their renditions of reality are complete, unified, and singular. By offering a series of personal narratives, Ondaatje reveals that experiences, both historical and ‘real,’ allow for multiple versions and cannot be reduced to a single account.

Ondaatje’s critique of narrative models that depend on linear structures does not, however, extend to the “talking cure.” In his work with Anna O., Joseph Breuer notes that her “talking cure” does not simply depend on articulating the story of trauma but doing so in reverse chronological order:

Each individual symptom in this complicated case was taken separately in hand; all occasions on which it had appeared were described in reverse order, starting before the time when the patient became bed-ridden and going back to the event which had led to its first appearance. When this had been described the symptom was permanently removed. (89)

What Breuer suggests here is that the “talking cure” is an inherently linear structure that depends on an exact chronological sequence in order to be effective. In her analysis of Pierre Janet’s model of talk therapy, what he termed “psychological analysis,” Jill Matus points to a similar aesthetics (25). Matus is right to recognize that these narrative structures are problematic in light of the kinds of reservations voiced by New Historicists:

It is perhaps disturbing to note that the orderly and coherent narrative that [...] Janet posits as an indication of cure bears a close resemblance to the ‘classic’ realist narrative, whose conceptual framework includes the consistency and continuity of the subject [...] Characteristic of the realist narrative is its will

to coherence, the suppression of its discontinuous and disruptive elements, and its insistence on closure as the reinstatement of intelligible order. Along the same lines, one would want to remark the emphasis in accounts of trauma recovery on continuity and coherence, which overlooks the way the category of history and traditional narratives of history have been problematised by recent theorists. (25–26)

Hutcheon’s analysis of the postmodern dimensions of *In the Skin of a Lion* reveals that Ondaatje certainly confronts “the conventions of the realist novel (and so-called objective history writing)” (93). Nevertheless, this confrontation does not extend to the orderly and coherent narrative that formulates Patrick’s talk therapy with Harris. The narrative that relates the story of Alice’s death is not scrutinized in the same way other linear composites, such as the realist narrative and historical accounts, are questioned by the novel. For instance, realist narratives construct their subjects as reflections of the narrative’s vision, namely as transcendent and non-contradictory. As Ondaatje recognizes, however, these ordered formulations of subjectivity are reserved for those at the center of power, white, wealthy, men, such as Harris and Small, and not those, whom Hutcheon has termed “ex-centric,” residing on the margins of social power. Ondaatje’s novel often foregrounds these elided subjects during various descriptions of labour and social interaction. But, while the unified subject is critiqued in response to realist narratives, s/he is not subjected to the same scrutiny in relation to narratives produced during talk therapy. As a reflection of the linear, coherent narrative he ultimately articulates to Harris, Patrick is situated as unified and whole; in other words, he is healed. In the context of Matus’s earlier comments, it appears that, like recent trauma theorists, Ondaatje is also unwilling to subject linear traumatic narratives to the sorts of political readings he confers on realist fiction and history writing. This omission in Ondaatje’s work, a novel that is so self-reflexively aware of the political dangers inherent in linear narrative structures, is perhaps the most telling example of his commitment to storytelling. Ultimately, narrative representation, in this instance, appears to take priority over the identity politics with which the novel is generally preoccupied. These priorities

reveal Ondaatje's tacit commitment not only to humanism but also to narration, particularly to the power of storytelling to represent trauma.

II. Exposing the Limitations of Narrative Representation in *The English Patient*

In *The English Patient* Ondaatje continues to explore the representation of trauma. The novel tells of a group of four fragile characters who reside in a bombed Italian villa that serves as a sanctuary from the horrors of the Second World War. Two appear as protagonists in *In the Skin of a Lion*: Hana, now a nurse, and David Caravaggio, a thief turned spy. The others include a nameless, unidentifiable patient burnt beyond recognition who is supposedly English and an Indian sapper, Kirpal Singh. Because each suffers the effects of shell shock, none of these characters, David Williams concedes, "is whole in either body or soul; each is a casualty of this desperate age, in this 'strange time, the end of the [Second World] war'" (40). *The English Patient's* response to telling trauma, particularly in the form of the "talking cure," is, in some respects, in keeping with Ondaatje's previous novel. The status of Hana's letter to her stepmother Clara as redemptive suggests Ondaatje's continuing commitment to narrating trauma. Throughout the novel, Hana "is unable to write to [Clara] [...] after all that has happened to her. She cannot bear to talk of or even acknowledge the death of Patrick" (92), her stepfather. By the novel's close, however, Hana finds her voice; she is released from this muted state by communicating the reality of Patrick's death, together with her responses, to an active listener. Her epistle to Clara is situated as redemptive; it offers personal and practical reconciliation, allowing Hana to begin the process of bearing witness by asking integral questions, "*how was my father burned?*" and "*how did Patrick end up in a dove-cote, Clara?*" (29–30), as well as paving her way out of war torn Europe.

However, although this missive is designated as efficacious by the novel, the "talking cure" and, by extension, storytelling is not generally situated as an uncomplicated mode of traumatic representation. Unlike Ondaatje's response to storytelling in *In the Skin of a Lion*, *The English Patient* does not normally celebrate the restorative value of telling trauma. It is the English patient's narrative that most apparently

reveals Ondaatje’s disillusionment with the “talking cure” as a mode of representation. Here, we are offered a reproduction of Ondaatje’s earlier depiction of talk therapy in *In the Skin of a Lion*: again, “in [a] circuitous way” (89), the text approaches a scene where a protagonist is encouraged by an auditor with ulterior motives to relate a traumatic narrative regarding the death of his lover, falling asleep at its close. Caravaggio like Commissioner Harris prompts the patient to tell his story, but, whereas Harris merely encourages through insistence, Caravaggio coerces the confession with the intervention of a “Brompton cocktail” (166), a mixture of morphine and alcohol. In keeping with Ondaatje’s earlier depiction, Caravaggio has ulterior motives for his actions: like Harris, his survival depends on inducing this narrative. Although he is not confronted with the sort of immediate danger faced by Harris, Caravaggio’s psychological and emotional survival relies on the patient’s confession. Because he believes the English patient to be Count Ladislaus Almásy, an English-educated Hungarian whose shifting war-time allegiances made him inadvertently responsible for his torture, Caravaggio hopes the patient’s self-explanatory narrative will allow him to make sense of his own suffering (163–5). In the face of coercion, the patient, like Patrick, does ultimately articulate a narrative that tells of the death of a lover. And, as in Ondaatje’s previous work, the narrative ends with its teller “asleep” (265). This time the patient’s sleep is bereft of the redemptive dimensions apparent in the scene that sees Patrick asleep with Harris. It does not suggest personal reconciliation; rather, the patient’s double negative when asked if he needs anything at the close of his speech, “no [...] nothing” (261), defines the episode: the patient is personally unaffected by the narrative, receiving no cathartic relief and nothing that can reconcile his wounds. Indeed, Hana’s rendition of “Marseilles” in the following scene, which shows Caravaggio and Kirpal celebrating her birthday, enacts the transition that has taken place between novels. Ondaatje’s representation of talk therapy in *The English Patient* is not invested with the optimism of his earlier work; in much the same way, Hana’s rendition of the song lacks its former “passion,” “singing it as if it were something scarred, as if it couldn’t ever again bring all the hope of the song together” (269).

It is not only the patient's response to his account but also the very structure of his narrative that indicates the failure of the "talking cure" as a mode of traumatic representation. The patient's narrative is broken and unreliable; we are told that he "speaks in fragments" (96) and the patient's "apocryphal story" (248) needs to be reordered and historically contextualized by Caravaggio in order to command any authority. Indeed, even Caravaggio is occasionally unable to legitimize the patient's account: "He is still amazed at the clarity of discipline in the man, who speaks sometimes in the first person, sometimes in the third person, who still does not admit that he is Almásy" (247). The narrative collapses under the strain of traumatic memory, and implicitly reveals its limitations as a form of representation. Indeed, critics such as Carrie Dawson have suggested that the structure of the patient's narrative indicates its status as a *testimony*. Theorists such as Cathy Caruth, Dori Laub, and Shoshana Felman all recognize the "literality" of the traumatic event renders it impervious to representation (Caruth 5–6). It is these implacable dimensions of trauma that Ondaatje explores in the English patient's account, the ways in which traumatic narratives exhibit the impossibility of knowing trauma. Dawson particularly recognizes that this dimension of the patient's narrative suggests it is a *testimony*, as defined in current studies, as opposed to a confession. Although critics such as Judith Herman and Dori Laub argue that narrative paradigms such as the "talking cure" can be confessions as well as testimonies, Dawson's analysis adheres primarily to Shoshana Felman's findings, which situate the two in mutual exclusion:

The narrative offered by the patient is not the confession he [Caravaggio] expects. It is not a confession at all. It is, rather, a testimony. Confession, at its most generic, is a self-explanatory and referential narrative that traces a path from fall to redemption. Testimony is neither continuous nor transparent. Shoshana Felman defines it this way: "As a relation to events, testimony seems to be composed of bits and pieces of memory that has been overwhelmed by occurrences that have not been settled into understanding or remembrance, acts that cannot

be constructed as knowledge nor assimilated into full cognition, events in excess of our frame of reference.” (56)

Dawson continues to offer a convincing psychoanalytic reading of the patient’s narrative, designating its fragmentation and unreliability as aesthetics of trauma; that is, stylistics that suggest the symptoms of a mental wound that cannot be represented and an historical event that cannot be fully known, only unconsciously repeated. By further considering the difficulties involved in representing trauma, Ondaatje’s work exhibits a newfound sensitivity to the limitations of narration, particularly in the face of trauma.

The marked differences between the structure of Patrick’s and the patient’s narratives not only suggest Ondaatje’s disillusionment with narrative as a form of traumatic representation; they also indicate Ondaatje’s growing commitment to identity politics, particularly as they relate to issues of subjectivity. In the earlier novel, the humanist imperative to represent a cured subject as the reflection of a coherent narrative is paramount. In *The English Patient*, however, this priority is questioned. Ondaatje’s developing preoccupation with identity politics supersedes the humanist call to unify the subject and, by extension, to heal in this particular instance. It is more important for the patient’s narrative to remain fragmented and unreliable. In other words, it is imperative that the patient remain an open-ended model of subjectivity. This destabilization of coherent subjectivity is apparent, in part, by the implications of the narrative structure: the fragmentation, allusiveness, and unreliability that characterize the patient’s account suggest that he speaks from an unstable, pathological subject position. In fact, the novel’s ending further reinforces the indeterminacy that surrounds the patient’s subjectivity. The close of the novel disallows definitive teleology; there is no absolute scene that marks the patient’s death, and instead, we are offered mere speculation about future burial rites: “if and when the patient dies, Caravaggio and the girl will bury him” (286). In effect, this absence of definitive death and, by extension, closure, further suggests the status of the English patient’s subjectivity as indeterminate. The recovery narrative that characterizes Patrick Lewis cannot be ap-

plied to the English patient, for he is not approached as ontologically realized, that is, as a knowable, existent being; instead, he is a spectre, a “ghost,” or a site of transference beyond the realm of conventional existence and so impervious to traditional forms of reconciliation. This notion is encouraged by the patient’s lack of identity; he “doesn’t know who he is” (28), and is further reinforced by the ultimate dismissal of the importance of his identity (165, 251, 255). For Hana, Kirpal, and Caravaggio, he is a blank slate on which they can project their desires. Hana sees him as a substitute for her stepfather, Patrick, who also dies of extensive burns. Kirpal needs the patient to be English, to act as a representative of the colonial powers that make the atomic bombing conceivable. On the other hand, Caravaggio needs the patient not to be English, to be the Hungarian Almásy, so he can hold him answerable for his suffering. As an indefinable, unknowable spectre, the English patient ultimately resists reconciliation because he denies the model of subjectivity informed by Cartesian rationality. Significantly, this refutation allows for political commentary. The subject informed by Cartesian logic tends, as Hutcheon has pointed out, “to be [...] bourgeois, white, individual, western ‘Man’” (159), and so supports exclusive hierarchies that ultimately serve to elide minorities. In a novel that critiques cultural hierarchies and colonizing initiatives, a fragmented, illusive subject that disrupts humanist assumptions used to validate imperialism takes precedence over traumatic cure. As David Williams concedes, the English patient “martyrs himself to a postmodern ideal of a plural self, and to a post-national ideal of collective identity” (51).

This configuration of the English patient’s subjectivity as fractured and indeterminate not only implicates him in the identity politics of the novel; his overt critiques of nation and imperialism further align him with this imperative. Inherently, *The English Patient* questions imperialism by exploring manifestations of two contradictory modes of resistance, strategies that Robert Kroetsch has appropriately termed “naming” and “un-naming.” “Naming” involves telling the previously neglected or suppressed narratives of a once colonized nation (Kroetsch, “Conversation” 63), whereas “un-naming” connotes deconstructing the hegemonic discourse of the colonizer. As Kroetsch attests, “at one time

I considered it the task of the Canadian writer to give names to his experience, to be a namer. I now suspect that on the contrary, it is his task to un-name” (“Unhiding” 17). The English patient is committed to an extreme form of “un-naming.” Throughout the novel, the patient explicitly draws attention to his personal preference for the removal of identity: Catherine, his lover, accuses him of “slid[ing] past everything with your fear and hate of ownership, of owning, of being owned, of being named” (238). A coefficient of this rejection is his dismissal of demarcations, most explicitly geographical borders. He embraces the desert because “in the desert it is easy to lose a sense of demarcation” (18). For the patient, this strategy of “un-naming” by dissolving borders is inherently a method of resisting the colonial enterprise, particularly the expansion of nation states by encroaching borders and asserting ownership through the act of naming. Naming, the novel suggests, is not only a form of resistance but also an imperial strategy, and is implicitly linked with gaining “the points on a map that colonists push against, enlarging their sphere of influence” (141). By removing boundaries that define nations, by engaging, in other words, in a process of “un-naming,” the patient suggests that the aims of the colonizer will also be undermined. His need to destroy maps, “all I desired was to walk upon such an earth that had no maps” (261), is an extension of this rationale. Ultimately, he explicitly calls for a post-national universe to counter the disastrous effects of imperialism:

I came to hate nations. We are deformed by nation-states [...]
All of us, even those with European homes and children in the
distance, wished to remove the clothing of our countries [...]
Erase the family name! Erase nations! I was taught such things
by the desert. (139)

In effect, both the status of the English patient’s subjectivity as indeterminate and fractured as well as his overt commitment to a post-nationalism suggest Ondaatje’s developing preoccupation with identity politics; the redundancies of humanism are denied by the patient’s subjectivity and the strategies of imperialism negated in his vision of a world devoid of nationalism.

III. Refusing to Opt for a Fatalistic Vision: A Commitment to Working Through

Although *The English Patient* indicates that Ondaatje has shifted his focus, considering the limitations of language and narration rather than their efficaciousness as a form of traumatic representation, the novel does not subscribe to the “psychoanalytically based fatalism” (151) that Dominick LaCapra suggests characterizes current theories. Because trauma is depicted as an implacable wound that cannot be captured by speech, LaCapra posits that “in certain forms of contemporary theorizing, whereby working through is simply seen in an extreme Pollyanna redemptive mode, mourning itself may always seem fatalistically to come back to endless melancholy [...] the mourning that is affirmed is virtually indistinguishable from [...] a kind of repetition compulsion” (151). Ondaatje does not opt for either definition of “working through” in this work: it is neither a form of transcendent, immediate redemption facilitated by narration nor a fatalistic methodology that suggests trauma is implacable. Healing as a complex dynamic beyond the repetition compulsion that can be tentatively resolved is a central concern in *The English Patient*. Nevertheless, Ondaatje’s exploration of the limitations of storytelling in this work suggests that narrativization is no longer the primary means with which reconciliation can take place. Instead, the text explores an alternative method: namely, the role of inter-personal connections in working through trauma.

Although the text indicates that personal relationships can be unproductive, even dangerous, it also recognizes their efficacy, particularly in its depiction of the relationship between Hana and Kirpal. Ondaatje’s novel, then, subscribes to Herman’s mandate that “recovery can take place only within the context of relationships; it cannot occur in isolation” (133). Initially, when Hana helps Kirpal detonate a difficult explosive, their relationship resembles the bonds formed in combat between troops, ties that trauma theorists Abram Kardiner and Herbert Spiegel recognize were “the strongest protection against overwhelming terror” (qtd. in Herman 25) in both the World Wars. At the same time, Hana and Kirpal’s romantic relationship predominantly defines their union, and in many ways characterizes the villa as an Edenic space where har-

mony, particularly inter-racial concordance, can tentatively prevail. Often, Kirpal is no longer "the foreigner, the Sikh" (105), "some kind of loose star on the edge of their system" (75) when he is with Hana. But, even this emotional bond is not encoded with the same sort of transcendent optimism apparent in *In the Skin of a Lion*. Despite his connection with Hana, there are numerous references to Kirpal's physical and emotional isolation from his colleagues and the occupants of the villa that suggest Ondaatje's continued commitment to the individualism that characterizes his earlier works. Kirpal's self-imposed segregation suggests he is deeply conflicted in his affections for both Hana and the Europeans who surround him. Indeed, Hana's tendency to fetishize Kirpal's brown skin (123) suggests that the relationship is also loaded with colonial implications.

Despite Ondaatje's tentative vindication of this bond, it remains a connection that is ultimately sacrificed for the sake of postcolonial politics. The apocalyptic atomic bombings of Hiroshima and Nagasaki that close the novel force Kirpal to recognize the colonial implications of the act: "they would never have dropped the bomb on a white nation" (286). Finally understanding his brother's reservations, realizing he can "never turn his back on Europe. The deal makers. The contract makers. The map drawers" (284), Kirpal takes political action by embracing his cultural heritage. In other words, he adopts the political strategy that Kroetsch has described as "naming"; that is, telling the previously neglected or suppressed narratives of a once colonized nation ("Conversation" 63). Kirpal's commitment to this political method is made explicit when he renames himself, disregarding the nickname, Kip, given to him by the English: "His name is Kirpal Singh and he does not know what he is doing here" (287). As Dawson points out, by changing his name, Kirpal "also rejects his nominal affiliation with a textual tradition (Kipling) and a cultural tradition (kippers) that cannot, in light of the recent event, be his own" (63). There are, however, costs accorded this strategy. The final scene in the novel laments the loss of the bond between Hana and Kirpal after it is severed by Kirpal's removal from the villa and return home to India. Although some metaphysical connection might be suggested when Hana drops a glass in Canada and

Kirpal picks up a dropped fork “an inch from the floor and gently passes it into the fingers of his daughter” (302) in India, the scene, as Glen Lowry suggests, ultimately implies disconnection (231). Kirpal does not catch a glass but a fork, a disparity that reminds us of the pair’s permanent separation. Ultimately, by leaving us with this image of disconnection, the novel also laments the loss of a relationship between two people which had to be sacrificed in the face of public politics.

This tension in *The English Patient* distinguishes it from Ondaatje’s earlier work. *In the Skin of a Lion* closes with Patrick’s confession to Harris, a narrative act that satisfies both humanist and political imperatives. In contrast, as Lowry has noted, *The English Patient* does not allow for this concordance: the therapeutic bond between Hana and Kirpal does not satisfy both these imperatives and ultimately tells of the tension between the two:

The core of the novel is the irreconcilable break between humanism—Hana’s need to heal herself, her desire to come to terms with her own suffering and guilt [...] and the devastation of the nuclear holocaust—Singh’s unwillingness to accept the official rationale for the bombing of Hiroshima and Nagasaki, his inability to accept the myth of progress on which the history of these catastrophic events depends. (225)

Lowry goes on to argue that the novel ultimately disavows this humanist narrative or the “need to heal” (225) when confronted with the political implications of the atomic blasts: “For Singh, the bomb is ‘a tremor of Western wisdom’ and as such it enacts a complex unraveling of the humanist narrative [...] a narrative represented but *ultimately discarded* in Ondaatje’s novel” (230, emphasis added). Although Kirpal privileges politics over cure by returning to India as a political statement against the atomic bombings and, in effect, breaking a therapeutic connection, unlike Lowry, I do not believe this act ultimately suggests a repudiation of humanism, of healing. Kirpal might disavow his relationship with Hana and, in effect, their therapeutic contract by returning to India, but he does not disregard the need for healing in doing so, as on his return, Kirpal becomes a doctor, a professional healer. In the figure of

Kirpal, the novel suggests that healing can still be a priority for those taking political action; Kirpal is both a clinician and a social critic. The novel simultaneously recognizes that they are two imperatives that are not easily reconcilable. Aware of the shibboleth of authenticity that customarily accompanies humanist ideologies and its inherent dangers, *The English Patient* attempts a precarious balance between seemingly divergent imperatives.

Ondaatje not only exhibits a continued commitment to recovery; he also indicates his tentative support for the rehabilitative value of language and narrativization, particularly narrative works of art. Throughout the novel, art generally functions as restorative. Kirpal is particularly able to locate in art substitutes for the comforting relationships he has left behind: in a painting he finds “contemporary faces” or “parental figures” (280). While waiting for the sappers to turn on electricity that might result in a fatal explosion, Kirpal sleeps in the damaged church of San Giovanni a Carbonara before a biblical tableau, finding “comfort” there as he “trusts his surroundings” (280). The only comfort Catherine Clifton, the patient’s lover, finds as she dies from the injuries sustained in a plane crash is the tribal art painted on the walls in the Cave of Swimmers and her lover’s copy of Herodotus’s *The Histories*. The protagonists at the villa are particularly appeased by literature. Literary art forms, such as Kipling’s *Kim*, often offer a sense of order and structure: for Hana, *Kim* serves as a template through which she comes to understand her relationship with the English patient and with Caravaggio. Joseph Pesch has recognized that in general literature in the novel “confirm[s] the coherence and significance of [the protagonists’] apocalyptic experiences as antidote to complete nihilism and despair” (122). Ondaatje’s work, therefore, consistently situates language and narrative art forms as rehabilitative. In light of his developing disillusionment with narrativization, particularly psychoanalytic models of talk therapy, however, his writings reveal an inherent paradox. Ondaatje’s later works question the efficacy of narration, and so expose its limitations, but they simultaneously rely on the narrative which formulates the novel, the work of art he suggests is restorative, to do so.

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