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Re/Presenting Disability and Illness:
Foucault and two 20th Century Fictions

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Michel Foucault's *The Birth of the Clinic* outlines the origins of modern medicine, how the "science" of medicine moved from a biological study of species to a social study of anatomy. Foucault describes an Enlightenment thinking that has influenced how contemporary Westerners regard the role of medicine and, subsequently, illness. Medical practice, through its microscopic stare into isolated body parts and cellular membranes, has managed to associate and conflate progressive diseases with healthy disabled bodies. It is this process that I wish to focus on here; as well, I shall discuss how a Foucauldian reading of institutionalized medicine and care allows for an analysis of the institutionalized body - constructed and contained by the hegemony of the institution - even when such a figure may not, ultimately, be hospitalized.

By focusing on a contemporary novel by Alan Lightman and a mid-twentieth century short story by Flannery O'Connor, I shall look critically at ill and disabled characters, especially in terms of how Foucault's theories of social construction lend themselves to literary analysis that shows such characters to be classified, constrained, isolated and excluded. Foucault's writings about power as pervasive suggest a reading of everyday practices (such as, in my two literary cases, interaction with family and strangers) in the way such practices structure human subjects. His investigations into the history of medical practices and his analysis of the experiences and perceptions of mental and physical health lend themselves to a fruitful analysis of the physically challenged body, and also to a crucial analysis of the intersections between the physical and the cultural.

I shall explore, in this paper, how contemporary narratives (including the subtexts of contemporary fiction) dictate that the technological world can be read as "bad" for individuals to the point of causing debilitating illness and bodily ruptures. Such cultural assumptions not only interfere with medical attention to actual disease by assuming illness as merely metaphorical for a greater social "ill," but also blame "progress" for increasing numbers of undiagnosable illnesses.

Disease and disability, in such a reading, are not simply

bodily realities, but transform into moral allusions about the technology that surrounds the able body. Paradoxically, these moral allusions pertaining to able or "healthy" bodies are represented on the image of the disabled or diseased body. In this way, a character presented as "less" than able is not only a moral marker of social ill but is also a physical embodiment of cultural blunders.

Focusing on the "rational discourse" that permeated eighteenth-century France, Foucault examines the semantic turn or "mutation" in medical language, wherein seeing and saying ceased to be considered the same activity for the patient and became the act of seeing (objective observation) and naming (medical judgment). Rather than the patient telling a doctor what was wrong (the assumption previously being that patients have thorough knowledge of their own bodies, what they can easily see and discern), the doctor simply asks what hurts (where, in the body, the problem can be located) and then observes with an objective eye the pathology that is the patient's scrutinized body. The rise of this model of sight parallels the way in which contemporaneous medicine has reorganized disease according to patterns of syntax. The eye has become the word.

As Foucault says:

At the beginning of the nineteenth century, doctors described what for centuries had remained below the threshold of the visible and the expressible, but this did not mean that, after over-indulging in speculation, they had begun to perceive once again, or that they listened to reason rather than to imagination; it meant that the relation between the visible and invisible—which is necessary to all concrete knowledge—changed its structure, revealing through gaze and language what had previously been below and beyond their domain. A new alliance was forged between words and things, enabling one to see and to say (xii).

With the beginning of the Enlightenment, says Foucault, the

gaze is no longer reductive, it is, rather, that which establishes the individual in his irreducible quality. And thus it becomes possible to organize a rational language around it. The object of discourse may equally well be a subject, without the figures of objectivity being in any way altered (xiv).

In *The Birth of the Clinic*, Foucault evaluates the system of medical care during the late 1700s and early 1800s. He introduces into historical research the ways in which medical discourse organizes itself in relation to other power structures (social, cultural, economic). Enlightenment physicians, in looking for symptoms in the body of the patient, shifted their medical practice to one of an observant eye gazing at the ill body, to a dissecting eye gazing into

the body, what Foucault calls the "privileges of a pure gaze" (107), one which "refrains from intervening: it is silent and gestureless" (107).

Skin, tissues, organs, blood have become the locational sites of illness, the repository for disease that travels along the map of the body. In this model, anatomy becomes the science of cartography, with the physician as both cartographer and medico, and microscopes the technology that invites doctors to gaze into the unexplored regions of the patient's body. This silent seeing invites the physician to know his patient's body as he observes it: "The clinical gaze has the paradoxical ability to hear a language as soon as it perceives a spectacle" (108). As in unexplored territory, what is observed is invisible and what is invisible becomes, through the medical gaze (a gaze aided by the technology of stethoscopes and microscopes), comprehensively visible.

By subjecting Enlightenment medicine to its own interpretative gaze, Foucault questions the language that constructs power relations between patient and doctor. Operating on "the principle that the patient both conceals and reveals the specificity of his disease" (105), doctors gazed onto and at the body with an appraising eye "that knows and decides," an "eye that governs" (89). At the same time, Foucault perpetuates a patronage of perception by invoking this doctor's gaze as symptomatic of the new clinical field.

Newly developing medicine observed and evaluated the body as in the process of dying. Each "symptom" of affliction was a sign of pathological progress: the body decomposing from its original whole and natural state. The process, then, was one where the original body - free of sin - moved away from its pristine state towards ultimate death and decay.

The contaminated body became a marker for moral decay, exteriorizing the process of death. In this way, illness and disability both indicated a disreputable body, one that asserted its individuality through ultimate demise. In Foucault's analysis, death shifted from its role as moral equalizer, in the centuries preceding the 18th century, to becoming another marker of individuality. And the diseases and disorders that led to death became symptoms of that mappable decay: "Disease breaks away from the metaphysic of evil, to which it had been related for centuries; and it finds in the visibility of death the full form in which its content appears in positive terms" (198). Disease, ultimately, manifests itself as the "positive" presence of death. As each death is individual, so too is each malady a story of singular decay.

One of the phenomena I wish to look at critically is the conflation of disease and disability. An example of this conflation is how Deaf people have been scrutinized by a medical establishment that focuses on remedy despite the absence of any disease. A deaf subject who pre-eighteenth century would likely present he/herself as healthy, under the new model becomes a silenced symptomatic map onto and into which the physician gazes (and subsequently judges).¹ As Rosemarie Garland Thomson says in her book about extraordinary

bodies, "The medical model that governs today's interpretation of disability assumes that any somatic trait that falls short of the idealized norm must be corrected or eliminated" (79).²

Such a narrative of "cure above all" generates from the stories, the folklore, and the narratives that continue to perpetuate a sense of what I call the "problem body."³ Such narratives arise from the Rational idea of the body as an instrument in constant need of care and adjustment. This recent approach to a degenerating body in need of constant maintenance instigated a view of individual "health" as a social responsibility integral to the larger society, and led to what Foucault calls in *Power/Knowledge* a "Politics of Health" (166), announcing a strategy of "cure" rather than assistance.⁴

The following two literary texts portray the prevalent societal urge, either to "cure" physical disability through medical intervention or, more importantly, to represent societal moods or failings through increasingly debilitating disease. Both stories represent disability or illness as a means for giving the reader a message, a clue, a symbol that guides a reading for the subtext: namely, that bodies betray what minds cannot fathom. Too often, in fictional narratives, bodies mean, as allegory, as portent, or even as evidence/clue to the ongoing investigation that is medical practice.

Flannery O'Connor's short story, "Good, Country People," depicts a woman, overeducated and unhappy, with one wooden leg. The story focuses on Mrs. Hopewell and her daughter Joy (who later changes her name to Hulga). Mrs. Hopewell despairs that her daughter will be disabled not only by her artificial leg, but by her outward appearance and manner; Joy refuses to embody a traditionally feminine demeanor.

Indeed, Joy invokes an entirely different narrative structure by relating to a Classical male figure, ugly yet powerful: "She had a vision of the name [Hulga] working like the ugly sweating Vulcan who stayed in the furnace and to whom, presumably, the goddess had to come when called" (174). That is, Joy mistakenly believes that, like Vulcan, she has a lame leg, but has the power to call forth great beauty, dedication, and love in another.

The narrator repeatedly describes Joy/Hulga in the text, each time drastically differently from the last, scathingly detailed, description. The narrator says of Joy/Hulga that she is "a large blond girl who had an artificial leg" (170), "thirty-two years old and highly educated" (170), and a "poor stout girl in her thirties who had never danced a step or had any normal good times" (173). Most tellingly, at one point the narrator says Joy/Hulga is, "someone who has achieved blindness by an act of will and means to keep it" (171), suggesting that her disabilities (she is not actually blind, but does also have a severe heart condition) are both controllable and deliberate.

The title of the story, "Good, Country People," comes from Mrs. Hopewell's snobbish description of people she considers beneath her, yet whom she is willing to designate as

good, simple, and honest. Mrs. Hopewell feels sorry for a travelling Bible salesman because he has a heart condition in a way she does not feel sorry for her daughter (who also has a bad heart). Unlike Mrs. Hopewell's attitude to her daughter's artificial leg (which marks both Joy's physical disability and technological solution), her attitude to her daughter's weak body part is of the Enlightenment model which suggests that "nobility" and "gentlefolk" have a moral duty to remain healthy (15-19).

The title also ironically describes Joy's own views of her mother and friends; people she disdains in part because she has a Ph.D., yet desperately - for her own sense of superiority - needs to believe are both simple and good (ie. simple and easily manipulated). When the door-to-door Bible salesman, Manley Pointer, befriends her, Joy/Hulga thinks that she will seduce and shock him, but that he is too innocent for her to corrupt him.

In fact, it is country folks' unquestioning decency to which she needs to feel superior: only one as wise in the world as she would recognize its corrupt nature. Her new friend, using Joy's own gullibility against her, tricks her into climbing into the barn loft and removing her wooden leg for show-and-tell. He then grabs it and strands her so that he will be long gone by the time someone finds her. The con man leaves Joy/Hulga in a place that literally occupies higher ground, and also humiliates her.

Rosemarie Garland Thomson argues that the fact that "anyone can become disabled at any time makes disability more fluid, and perhaps more threatening" to those who identify themselves as possessing normative bodies than do "seemingly more stable marginal identities as femaleness, blackness, or nondominant ethnic identities" (14). Since the category of disability is one into which any (dominant) able-bodied person can shift, those invested in hierarchies based on the body (white and male, for example), create fictions to explain another's disability. Not only has a "simple" man deceived Joy/Hulga, but he has left her in a compromising position: rolling in the hay, waiting for a man who has stolen a piece of her body. Joy/Hulga's "predicament" becomes one which the "average reader" must not identify with, in order to find amusement at the story's conclusion.

O'Connor has herself admitted that paraphrases such as the one I just presented make her story sound simply like a "low joke" (in Geddes 831). She says of her own story that, "[t]he average reader is pleased to observe anybody's wooden leg being stolen" (in Geddes 831). This statement perhaps says more about what O'Connor thinks about the "average" reader than it does about her knowledge of disability, but it certainly admits to a perverse humor and satisfaction that emerges from reading about someone else's disability that - apparently - could never happen to "you" the "average reader."

O'Connor's short story, however, does far more than simply present a joke in bad taste by letting the wooden leg accumulate meaning. Early in the story, we're presented with

the fact that the Ph.D. is spiritually as well as physically crippled. She believes in nothing but her own belief in nothing, and we perceive that there is a wooden part of her soul that corresponds to her wooden leg. (in Geddes 832)

Although the narrator never refers to Joy/Hulga as "crippled," O'Connor nevertheless decides that a metaphorical presentation of moral character is best served through the complicated ways in which the "average reader" relates to, or identifies with, disability. As Simi Linton points out in her book *Claiming Disability: Knowledge and Identity*, "[c]ripple as a descriptor of disabled people is considered impolite, but the word has retained its metaphoric vitality, as in 'the exposT in the newspaper crippled the politician's campaign'" (16).

The story contains Joy/Hulga through the idea of herself as crippled or damaged (the leg had been "literally blasted off" [174]), despite the absence of this label. Joy/Hulga - like the groups Linton describes as "reviving" the term "crip" in order to label themselves through an identity that (to quote J.P. Shapiro) "scares the outside world the most" (in Linton 17) - gives herself an "ugly" name to exteriorize her understanding of and identification with her own body.⁵

In this way, Joy's body symbolizes an undesirable aspect of her "inner" character. O'Connor sets up the story so that the "average reader" will find amusement in Hulga's distress, partly because she herself has been conned by belief, partly because the narrator presents her as a "damaged" human being, warped and disfigured by her own "misshapen" cynicism as much as by a con man who steals body parts for his "oddities" collection.

His parting words suggest that he never was the innocent country bumpkin both Joy and her mother snobbishly assumed him to be, but rather, a devious con man with his own agenda. "'I've gotten a lot of interesting things', he said. 'One time I got a woman's glass eye this way. And you needn't to think you'll catch me because Pointer ain't really my name'" (195). Just like Hulga, he has changed his name to suit his purposes: she to reject a name that implies standard feminine beauty, and he to escape retribution for his bodily thefts.

The construction of the over-aged daughter as both awkwardly out of place and clumsily dependent secures her position as an unlikable and unsympathetic character. Garland Thomson says that "gender, ethnicity, sexuality, and disability are related products of the same social processes and practices that shape bodies according to ideological structures" (136). In this way, the text represents the disabled main character in the story as physically "weak" through both ability and gender, yet "superior" in economics and education. Her physical "inferiority" and her class snobbery combine to form a character who gets what she deserves and deserves what she gets. Readers cheer for the rogue salesman because he has overturned the status quo - at least the economic one. In all other categories, this character remains what Foucault designates as the modern ideal

of the "norm" to Joy/Hulga's marginalized body. Readers thus celebrate a character who bests the upper classes and who still embodies a "normal" body.

The Bible salesman, Manley Pointer, gets Mrs. Hopewell's attention by lamenting that "People like you don't like to fool with country people like me!" (179). This calculated statement makes her immediately want to distance herself from a perception (although accurate) of snobbery. He confesses that, unlike others, he does not sell these Bibles in order to get into college; in fact, he's only interested in devoting his life to "Chrastian" service. He confesses further: "I got this heart condition. I may not live long. When you know it's something wrong with you and you may not live long, well then, lady..." (180) Mrs. Hopewell's snobbish attitudes prevent her from regarding this man as a suitable "match" for her daughter, but she aligns the two of them because of their afflictions, and hopes Joy might learn a more positive outlook from the salesman.

Joy/Hulga, though she thinks this man entirely inferior to her (186), does see a connection between them; indeed, she trusts him with her wooden leg and with her own naiveté. Culture intersects with physical reality in the intersection of Joy/Hulga's disability with her gender. "Disabled girls and women," say Rubin Jeffery in a "Foreword" to *Women with Disabilities*, "are the denizens of this apparently worst-of-both-worlds combination of being female and being quintessentially unattractive through disability" (ix).

Despite the patronizing pity O'Connor's "average reader" may feel for someone physically hampered at the conclusion of the narrative, the story indicates a certain triumph - of the uneducated over the learned and of the country-bumpkin over the snob. Perversely, the story also maintains the status quo by offering the "average reader" a triumph of the able-bodied over the disabled, and of male over female. Interestingly, most readerly satisfaction with the ending of this story is derived from the "underdog" character swindling an overly confident and rude woman. The story depicts his conquest as "exceedingly hilarious" because a low-class man has put an uppity woman back in her place, and a "normal"-bodied character has revealed the disabled character for the "abnormality" she "truly" [deeply, fundamentally, and essentially] must be.

David Mitchell and Sharon Snyder agree in their Introduction to *The Body and Physical Difference* that, "The bridge constructed by the ideology of the physical seeks to lure the reader/viewer into the mystery of whether discernible defects reveal the presence of an equally defective moral and civil character" (13). O'Connor herself glibly suggests that a physical "flaw" or "defection" necessarily announces a corresponding moral "defect." The "average" reader laughs at Joy/Hulga and with the devious Bible salesman because - despite his obvious disregard for the religion he peddles - she is the morally bankrupt character, she is the damaged soul, as signified by her wooden leg and her "deficiency"

without it.

In the final scene of the story, Mrs. Hopewell, watching Manley Pointer head for the highway, remarks: "'Why, that looks like that nice dull young man that tried to sell me a Bible yesterday.... He was so simple ... but I guess the world would be better off if we were all that simple" (195-196). The wooden leg that - for entirely practical purposes - once belonged to Joy/Hulga, has been triumphantly looted by a swindler who appropriates the leg for his own purposes, namely as a curiosity and souvenir, representative of his devious and superior intelligence [once again, the leg "means" more than it is]. The Robber has won, the Lady has been humiliated, and the Fact of the disability has been abandoned up there in the hayloft, along with any semblance of a character who might, with the proper prosthesis, make her dignified way home. The story does not present to readers a woman disabled by a rogue preacher when he steals her leg. Ironically, she is ultimately punished and humiliated by the very symbol of her ruin - her prosthetic leg - which ultimately "means" more than the rest of her body.

Much as a dis-abled O'Connor character is subtext of an ablist gaze that seeks to disempower her mental capacities by reducing her character to one that is entirely located in her physical attributes, so too does the character in Alan Lightman's *The Diagnosis*, a middle-aged, middle-class white businessman whose body is gradually overtaken by paralysis.

Bill Chalmers becomes the object of a medical gaze designed to objectively evaluate the body and at the same time as the process of this gaze dismisses the individual subject. The plot of this 369-page book is even simpler than the O'Connor 27-page short story. A junior executive, Chalmers - overworked and far too dependent on the technological - goes from an episode of short memory loss to numbness, to almost complete paralysis by the novel's end. The story consists mainly of his (and a multitude of doctors') attempt to diagnose his "illness." The book closes, as it began, with a character disconnected from his job, his family and social life, disconnected from his own *raison d'etre*. Like many horrific and gothic parables, such as Kafka's *The Trial*, this book is a modern allegory, replete with warnings about power, science, technology, and money.

Describing the shift from nosological medicine [biological classification] to anatomical study, Foucault reveals common eighteenth-century doctrines. Extracting evidence from a medical book by Dr. S.A. Tissot, published in 1770 at the time of the discursive shift, Foucault states:

Before the advent of civilization, people had only the simplest, most necessary diseases. Peasants and workers still remain close to the basic nosological table; the simplicity of their lives allows it to show through in its reasonable order: they have none of those variable, complex, intermingled nervous ills, but down-to-earth apoplexies, or uncomplicated attacks of mania. (16)

Remarkably, this analysis of the 18th-century approach to disease typifies contemporary attitudes to the (often undiscovered) causes of disease. Continuing to draw from the Tissot text, Foucault says: "As one improves one's conditions of life, and as the social network tightens its grip around individuals, 'health seems to diminish by degrees'; diseases become diversified, and combine with one another; 'their number is already great in the superior order of the bourgeois; ... it is as great as possible in people of quality'" (16-17). This appears to be the exact "theme" of the Lightman novel: as "our" lives get more and more complicated, so, too, do our diseases; ultimately becoming untreatable (and even unrecognizable in the Foucauldian sense of the word).

In a recent book discussion on Canadian national radio, reviewers agreed that Lightman's novel symbolizes a growing dependence on, and fear of, technology. The Diagnosis is "about a guy who has a big fat breakdown because he's overwhelmed by our high-tech, high-speed world," about "an American executive who breaks under the strain of modern living" (CBC). Yet, the body is (supposed to be) an efficient machine. The implication in Foucault's research and Lightman's novel is that pampered upper-class bodies suffer greater (and more complicated) diseases because of their affected lives and "artificial" social environs.

Contained within structures of power, discipline, and domination, the "working man" in this book is an over-extended businessman. Although nobody directly controls staff working hours, each businessman monitors his own hours and productivity⁶ in their corporative panopticon. The company motto, "maximum information in minimum time" demands speed, money, efficiency and information.

The Diagnosis, ironically named after the medical information Chalmers so desperately seeks, is predominantly a narrative of loss: Chalmers loses his memory, motor control, and perhaps even his mind. Each of these characteristics cannot physically be "lost" [i.e., disappear], but I believe this metaphor of relinquishing that which one once so capably held firm, to be significant within disability studies.

Loss implies the shift from "normal" to "abnormal": a woman who "loses" her sight, or a man who suffers the "loss" of his hearing suggest that their bodies no longer function to the same degree they once did. But the discourse of loss also offers a subtle reproach of the person who has undergone this bodily shift. We lose important papers or money or shopping bags when we don't pay enough attention, when - instead of gripping tighter - we loosen our hold on a precious item.⁷ A particular bodily ability is perceived as "lost," and then that loss is marked-imposed upon the previously "normal" body.

Such language indicates that the "normal" bodily function was once in existence, and it has been accidentally lost or deliberately discarded. At the same time as an able body is the original wholeness which gets "lost" by degrees, so too is normalcy the default standard to which any abnormalcy is

perceived as an addition. This metaphor shows the complicated ways in which a body "loses" ability, but "gains" abnormality. The fault, ultimately, lies with the loser, and the disease - rather than the acquisition of an unequivocal diagnosis - represents the "loss" of a fit and sound body. Ironically, after his first (and most drastic) memory-loss incident, Chalmers remembers "the most minute detail" (66) of his nightmare encounter with doctors in charge of experimental laboratory machinery.

During the night of a series of painful tests and humiliating examinations, Chalmers cannot recall his name, his family, his work place, or any detail about his life besides a vague recognition that he is a businessman devoted to meetings and faxes and cell phones. Brought to Boston City Hospital by police, Chalmers experiences a surreal night of cat-scans and microbiology, and the ominous "CGA" which the doctors assure themselves is "state of the art" (29) and "beautiful" (31). Two doctors anesthetize him, strap his head to their precious contraption, and grind a giant needle into his skull - only to discover something is wrong with the machine. "He's okay," says one doctor to the other. "I'll examine him later. But something's wrong with the machine" (32).

Once he flees from the Kafka-esque hospital, however, he recalls each excruciating minute with no respite from memory. His body - and the mind once safely ensconced there - has already begun to betray him, deleting vital information, and restoring intact what he desperately wishes would collapse into oblivion. Chalmers, contained and isolated by his Emergency Ward institutionalization, becomes the surveyed body into which scientific technology literally probes.

Bizarrely, this story of a progressive and debilitating paralysis begins with a breakdown of the function of the mind, leading readers to wonder/conclude that Chalmers's ultimate and total "loss" of body movement is the result of his mental breakdown in the first chapter. It is important to note that many physical diseases rely upon mental health, and that the intersection between mental and physical illness is often interdependent and complicated. But this narrative suggests that, for Chalmers, the loss of both memory and bodily command indicate a loss of spiritual control in his life, a control that - no matter how many doctors and therapists he visits - will continue to elude his grasp.

Chalmer's body, through its incremental paralysis, exhibits Foucault's notion of the body as a functioning machine that records upon its surface the everyday practices of power and discourse. In this case, Chalmers - a man at the hub of big business activity - notices his body shift from one which, daily, has the power to command authority and power (his working world is almost entirely male, and most female characters appear as "wives" only), to one which belongs less to him than it does to the medical narratives that wish to wrest knowledge from its malfunction.

In Lightman's novel, the narrator implies that Chalmers's "problem" is one of artificiality; in other words, his life

has become dominated by a technological push and pull both professionally and personally (his son spends his free time reading about Socrates on the internet and his wife is having a non-corporeal email affair). Chalmers sees even the progress of his disease as that of a machine collapsing - still attached to its power source, but no longer an uncontrived physical entity. The narrative suggests that Chalmers has disrupted his "natural" bodily functions and being, that his body is no longer a body, because it does not function as it should: "The bony legs, the stomach, the white buttocks in the bathroom mirror were not body but merely numb things attached to his brain stem" (320). Rather, the essence of North American "lifestyles" has caused his disease, and, morally, unless "we all" retreat from modern technology, then and only then will someone like Chalmers (the new-age canary in the technology minefield) stop becoming ungovernably ill.

Lightman's novel is about the "knowledge" doctors have about what they cannot see - that disease that permeates the character's body to such an extent it is both invisible and debilitating. Foucault says: "We are doomed historically to history, to the patient construction of discourses about discourses, and to the task of hearing what has already been said." (xvi) So that, "to see and to say" (xii) become the modern language of diagnosis, the judgment upon the failing and over determined body.

Despite Chalmer's paralysis which develops at a shocking rate, readers insist on interpreting this novel as pure allegory. One reviewer says that "once the doctors fail to diagnose his problem ... there is progress ... with the beginning of paralysis, he starts trying to stop and smell the roses" (CBC). The book invites such a glib reading of illness as "lesson" by persistently presenting Chalmer's as a character sinning through technology, a man fallen from original grace. According to Foucault, in the years

preceding and immediately following the [French] Revolution saw the birth of two great myths with opposing themes and polarities: the myth of a nationalized medical profession, organized like the clergy, and invested, at the level of man's bodily health, with powers similar to those exercised by the clergy over men's souls; and the myth of a total disappearance of disease in an untroubled, dispassionate society restored to its original state of health. (31-32)

In *The Diagnosis*, there are more and more layers of medical personnel observing and offering diagnoses, but they only repeat what the character and reader already know, and offer no new knowledge to help the patient. Bill Chalmers goes from one specialist to another, each one thinks his problem is biological, neurological, psychological, etc., yet no one wishes to state categorically from which specific affliction the main character suffers. In fact, the only diagnosis Chalmers gets in the entire novel is from another patient:

"My fingers are numb," Bill said. He slapped his hands viciously against the center table.

"Anything else numb?"

"Both hands and arms."

"I see," said Bineas, shaking his head gravely. "You are quite right to see a doctor."

"What do you think I have?" asked Bill.

"You could have a pinched nerve. Or possibly some kind of tumor or disease. But we laymen can only guess at these things." (114)

Unlike the fictional doctors who do not even offer as much as a guess, the other patient has taken on the Cartesian medical language of asking the patient to point to problem areas; he then offers "objective" interpretation. Chalmers, desperate for a word to explain his bodily changes refuses his own knowledge of his body, and grasps at the simple (and vague!) observations of an opinionated other.

Both O'Connor's and Lightman's narratives allow the reader to "blame" characters who are increasingly distressed by the modern world (Chalmers tries to "keep up" in a losing rat race and Joy/Hulga disdains anyone who has not achieved her level of education). Disturbingly, though Lightman's novel may lead a reader to sympathize more with Chalmers than O'Connor's story does with Joy/Hulga, the texts depicts both characters as recognizably deserving of their fate; indeed, they invite it. The danger of this "narrative of cure" for any bodily circumstance outside the domain of healing, is that such a narrative places blame onto the body of the disabled or ill subject.

Conflating disability and illness makes them into one and the same experience. With the same gesture, mental illness and physical illness (or even high-tech stress and long-term infirmity) can be combined into one, simplified package, coercing disability to mask as illness, and disease to represent itself as a "loss" of wellness and ability. Reader, then, will have a much easier task of "interpreting" a complex representation of dis-abledness, which in these narratives operates metaphorically much more than literally or even allegorically.

Both narratives "surprise" the reader, not so much with a twist ending, but with a textual uncovering that indicates a path towards the "real" or "true" defect in character that has caused each particular physical representation. The reader, like a clinical doctor, has become literary and medical "detective," who observes and gazes upon the "patient"/disabled character in order to decree a solution/cure. Each narrative of these two fictions offers more power to the reader/viewer than to the character/patient who has become not only object in this investigative narrative, but embodied clue; and, in the form of clue, that body has been caught in the process of the medical gaze that insists (through medical judgement) upon curing the extra-

normative bodily function that, ironically, has been "lost" from the normal body. Joy/Hulga, then is an immoral (or at the very least amoral) character whose missing limb signifies her lack of mental health. And Bill Chalmers is the progressively regressing invalid, incapacitated by his own inability to "figure out" his declining moral fibre.

Though these texts are written decades apart, they both convey distrust for technology and for anyone intellectual. The evils of the body reflect the evils of progress, of the mind that believes itself independent of its physical container, of consciousness divorced from the everyday social networks that play themselves out on the body (ie, the physical and sensual roles each character has of daughter and lover, of husband and father). The "gaze" in each of these two literary texts becomes a verb that embodies a process of "seeing into" the soul, the essence, the moral core of characters who lack such an integral center.

The investigation, then, includes the discovery of no invisible secret hidden in the recesses of the body's tissues. Instead, the secret clue to each character's "flaw" displays itself overtly in the character's physical "defectiveness." Both texts - one through illness, the other through disability - elucidate how "othered" bodies invite "average readers" to interpret their differences as their entire significance; in both cases, the body "betrays" the character, allowing societal pressure to infect from the inside out the delusions about he/r place in he/r world that each character reluctantly comes to accept.

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Notes

1. For example, many Deaf adult have become deaf by catching scarlet fever as a child and all trace of that childhood disease has subsequently disappeared. Yet many scientists and physicians maintain the rhetoric of cure even when approaching someone who most likely considers h/er so-called "illness" to be, instead, membership in a recognizable community.

2. Falling into this rhetoric of cure, Christopher Reeve - perhaps the most famous celebrity to shift from an able body to a disabled body - achieves repeated media attention for his dedication to "finding a cure"; again, despite not actually having contracted a lingering sickness.

3. For a more detailed discussion of this concept, see my introductory essay, in the feminist literature journal, *Tessera*. "Coincidence of the Page. Vol 27 (Winter 1999): 6-15.

4. See Rosemarie Garland Thomson's chapter, "Theorizing Disability" in *Extraordinary Bodies* for a more thorough historicizing of disability theory.

5. I do not wish to suggest that Joy/Hulga believes herself to be unattractive because she has an artificial leg; rather, her recognition of standard beauty leads her to discard conventional images and labels of femininity. In fact, she herself is usually protective of her prosthesis: "she was as sensitive about the artificial leg as a peacock about his tail." (192)

6. One of the company's executive partners, Harvey Stumm, goes to the office on weekends and after midnight simply to keep up with the plethora of electronic memos that come in daily. Stumm has the power to fire Chalmers when it appears he is not keeping up with email memos and exercise lunch hours, yet he himself must bring his wife to work after hours (253-257), not so much for fear of a similar fate, but because the politics of the company motto is that it is governed and managed by all its subordinates.

7. In another sense, we "lose" our minds - "I just lost it today" - which indicates an excuse for exhausted, bizarre or even careless behaviour.