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Illness has unequivocally shaped society—our health and condition of mind and body often dictate the ways we live, think, and write about ourselves. In Illness as Narrative, Ann Jurecic examines how contemporary writers “compose” illness throughout history. In this in-depth study, she includes narratives which make meaning of “at risk, in prognosis, and in pain” (4). While personal accounts of illness were once harbored, the illness narrative has emerged as a prominent force in public personal accounts. While the genre is indeed prominent, illness narratives pose a unique issue in the critical realm. In six thoughtful chapters, she closely observes how readers have responded to these narratives, and ultimately asks how illness narratives—those deeply personal and painful accounts of confusing and frightening experiences—fit into literary studies as a genre for critical examination. By channeling the works of Bruno Latour, Veena Das, and Susan Sontag, among many others who show an overall dissatisfaction with “critical detachment” (98), Jurecic seeks to chart out ways to renew what Ricoeur calls criticism’s “willingness to listen” (27) when dealing with the illness of others.

In chapter 1, Jurecic traces the rise of illness narratives whilst bringing forth questions about the fragile matter of critical work on illness narratives. She describes how events such as the changing role of the patient and the explosion of HIV/AIDS gave life to the practice of making meaning of illness through the written word. While illness narratives began to proliferate, the ways in which critics can examine them became problematic. Jurecic asks: “How can we define critical practices that are grounded in everyday life, practices that are rigorous, compelling and, at the same time, socially engaged and thoughtfully empathic?” (17). How does one “combine a willingness to suspect with an eagerness to listen” (Felski 22 qtd. in Jurecic 17) while responding critically to personal accounts of inconceivable disease and pain?

Illness as Narrative, then, works to understand how critical readings of such works function in a way that is dually critical yet considerate.

In chapter 2, Jurecic describes how authors make personal meaning of life “at risk” (18) in risk narratives, focusing on examples of those conceiving of life through narrative while “in prognosis” (21), before prognosis with a genetic risk of developing disease (26), and through “literary risk” (29), or those accounts narrated as literary autobiographies. While the approaches of the authors vary, Jurecic traces the emergence of the memoir, claiming that it “is no accident that the age of the memoir emerged with the age of statistics” (21). She cites Lennard J. Davis and Kathleen Woodward, who describe the ways the use of statistics in risk assessment of health issues creates both a “normalcy” and an “otherness”—Woodward asserts that statistics functions
as a type of “biopower, which controls bodies and populations” (20). Jurecic then proceeds to examine several contemporary narratives about risk from authors of varying backgrounds, such as Stephen J. Gould and David Rieff, in the end creating an understanding of how both writers and readers parley with existing narratives in order to make meaning of statistical risk.

Chapter 3 focuses on the problems of responding to the pain of others, as it is incredibly complex to do so when analyzing the work of writers living fully embodied, social lives (66). Jurecic first declares that “pain is everywhere” (43) in literature; the paradox, of course, is that pain is communicable for some writers, but not for others. For some critics, communicating pain is simple beyond the limitations of language—how can we truly “feel” one’s reality of such a torturous experience? Elaine Scarry’s influential work on pain asserts, “physical pain does not simply resist language but actively destroys it” (44). Questions regarding the many notions of pain and how to communicate them are the focus of this chapter—memoirists have continually questioned how to make readers receptive to their personal recollections of horrifying bodily experiences. Further, how do we judge the work of writers who attempt to communicate the intricate depths of pain? Jurecic explores the work of a range of writers, including Duadet and Manto, among others, to show how writers have worked to encourage readers to be “rigorous and responsive, to exercise reason and emotion, to be willing to suspect and listen, to acknowledged what is not known, and also what is” (66) when dealing with the complexities of pain narratives.

In chapter 4, Jurecic focuses primarily on the work of Susan Sontag, the prolific writer of *Illness as Metaphor*. Jurecic claims that Sontag has “done more than any other single writer to bring attention to how literature documents and shapes the cultural meaning and experience of illness, pain, and suffering” (67). Jurecic examines one core analogy of Sontag’s *Illness as Metaphor* as one of the “most misread or misinterpreted metaphors” present in contemporary work on illness (68). She then focuses on several of Sontag’s works on illness and suffering, centering closely on the “evidence of uncertainties that underlie her performance of certainty” (68). Sontag’s work aligned at times with critics skeptical of determining meaning and other times with humanist critics who understood the performative function of illness narrative; Jurecic ultimately uses Sontag’s work in this realm to represent the central struggle of those who write, read, or criticize work on suffering.

Chapter 5 centers on theory’s “aging body”—or the aging progress of theorists and its impacts on critical work—at first tracing the initial role of the critic as one who must show “disinterestedness” (Arnold qtd. in Jurecic 92). Jurecic problematizes the critic’s true function and the attitudes that surround such work in the context of illness narratives. She considers the work of Stephen Greenblatt, citing work which shows “evidence of the divide between theoretically informed critical practice” (94) and illness narratives. Jurecic reminds readers of writers’ calls for listening. Michel Foucault, Jurecic asserts, is a prime example of how “mortal illness” can
impact critical interests. As he died from AIDS, Foucault “faced his actual
death by thinking about how lives and selves can be made into works of art”
(101). His impending death, Jurecic explains, “prompted a reconsideration
of the relationship between social, historical, and cultural coercions, on the
one hand, and the possibility of composing the self through the reflection
and caution on the other” (102). Jurecic also discusses the work of Judith
Butler, Eve Kofsofsky Sedgwick, and Jean-Dominique Bauby, among oth-
ers, in the end exerting a warning of caution and sensitivity to those who
criticize the writing of others who faced unbearable pain and evidence of
human’s fragile mortality.

In chapter 6, Jurecic explores Sedgwick’s notion of “paranoid practices”
in critical work (113). She uses Anne Fadiman’s work on medical suffering
as a case study for examining whether practices which are “not governed by
trust or suspicion… attentive—perhaps even reparative—… can be taught”
(114). She explains that in Fadiman’s illness narrative (as is the case with
many) “the ailing body points to culture, pain points to philosophy, language
points to consciousness, and all point to what is still to be learned about our
fragility, our mortality, and how to live a meaningful life” (131).

As a whole, Jurecic’s text is successful in exploring contemporary works
on pain and illness and the critical response they elicit. *Illness as Narrative*
seeks to draw wider attention to the illness narrative and to argue for new
approaches to both literary criticism and teaching narrative in a way which
balances the fragility of human life—it delivers. She asks that we consider
why writers compose stories of illness, how readers receive them, and how
both use these narratives to make meaning of human anguish, encourag-
ing a practice that’s both critical and compassionate in an otherwise often-
distrustful critical context. In a time where illness pervades society more
than ever before, *Illness as Narrative* is timely, considerate, and thought
provoking—it is a helpful review of writing about illness and critical re-
sponse to such narratives, one that reminds us that, in the end, we are all
mere mortals ourselves.

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