

Fictions of Dementia: Narrative Modes of Presenting Dementia in Anglophone Novels, by Susanne Katharina Christ. Berlin, Boston, De Gruyter, 2022. Pp. 524. €99.95 (Hardback), €99.95 (Ebook).

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Literary imaginaries of forgetfulness and cognitive decline have—textually or para-textually—existed in a long line of representations of older age and madness since the ancient Greco-Roman traditions. It is impossible to think of literary representation of neurodivergent minds without thinking about Shakespeare’s infamous King Lear or the Struldbruggs of *Gulliver’s Travels*. It is not exactly surprising then that the latest interest in literatures of psychological realism has been on the depiction of neurological disabilities. Dementia, which is one of the more common neurological illnesses of older age, now appears in an impressive portion of illness narratives (including life-writing and fiction) that have emerged as a genre on their own. And while the subject has been widely discussed by scholars from various disciplines, Susanne Katharina Christ’s *Fictions of Dementia*, is a necessary addition to the corpus of existing narratological takes on fictional representations of dementia as it seeks to “carve out textual prerequisites of narrating dementia and to develop a model” of structural narratology by not just studying focalizations in narration but also adapting existing narratological vocabulary to “find a new language to describe the narration of dementia in fiction” (11).

Christ situates her work at the intersections of dementia, culture, and literature and builds her taxonomy by diving deep into the Theories of Minds, which may be roughly understood as “a set of assumptions about the possible behavior of others” (21). While narrating other minds is, naturally, a task rife with ontological and epistemic gaps, Christ highlights the special status of dementia in further complicating this dilemma. As impossible as it is to know another person’s subjective experience as an outsider, fiction is able to bridge this gap to an extent that perhaps no other representational medium can. She dubs dementia as a “narrative-epistemological paradox” in her introduction

(35)—one that can be adequately addressed only through fiction because of its ability to tap into readers' familiarity with experience, empathy, and imaginative license. She identifies the different levels on which this paradox operates: the affected individual who becomes effectively wordless because of their illness, the diegetic others like family members who cannot know what dementia actually feels like, and the omniscient narrator who remedies this paradox to some extent but still falls short of narrating the dementia-affected person's "inability to narrate" (36). Yet, dementia remains an important subject of interest for authors and audiences because it raises questions of alterity, epistemes of illness, and the human condition in general.

Christ further develops her taxonomy for reading fictions of dementia by analyzing the plethora of narrative perspectives that are used by authors in their endeavors to represent dementia. This is an interesting starting point as it opens up narratives of dementia to an application of narratology where the relation between the affected character and the narrating instance takes center stage. This second chapter in Christ's framework also moves away from the preceding chapter's elaborate discussion of the narrative-epistemological paradox that dementia presents, to develop approaches and strategies that address this paradox in literary narratives. Her model initiates discussions on "narration with dementia" (a phrase she uses to mean the characters living with dementia) that entails in-depth engagement with consciousness representation techniques, narrative (un)reliability, and epistemic (in)stability (71). She pronounces this mode of narration as a confrontation with the narrative-epistemological paradox that foregrounds the potential and value of cognitive difference, both within a narrative text and beyond it. Christ, then, maps the onto-epistemological profile of the "secondarily affected character" narrator (including caregivers, family members, etc.) (128) who brings to light intersubjectivities and the vicissitudes of care relations. Such a narrative mode, in Christ's reading, frames dementia in a wider socio-historical milieu, broadening its narrative scope and connecting it to the world outside. She deftly examines two more narrative modes, namely the multiperspectival and the inspective non-character narration that invite further complexity by

enabling comparative readings of narrative voices and the cultural embeddedness of dementia. This delineation of the different narrative modes sets the direction and purpose of the later chapters of the book, providing an adequate theoretical stronghold to the textual and narratological analyses that follow; complete with clear-cut figures and tables, her practicable framework lends a scientific weightage to narratology itself.

The four subsequent chapters of the book present us with analyses of specific texts: readings of family relations and narrative ambiguities in Emma Healey's *Elizabeth is Missing* (2014); care practice, limits, and possibilities of memory and imagination in Stefan Merrill Block's *The Story of Forgetting* (2008); character proximity and indeterminacy in Naomi Kruger's *May* (2018); and medical knowledge and reader engagements in Lisa Genova's *Still Alice* (2007). While the novels chosen for analysis have all received almost equal amounts of critical acclaim from audiences, each addresses specific problems around dementia through a different narrative mode that neatly aligns with the paradigms of Christ's project. The first of these chapters opens with a short overview of *Elizabeth is Missing*, following which Christ proceeds to discuss the narrative strategies that Healey uses to bring the character of Maud Horsham to life. The novel is read as an exposition of what living with dementia entails even while the narrative carefully traverses this ambiguous terrain without risking either epistemic stability or relinquishing plot structures. Arguably, the novel stands as a counter narrative or "antithesis" to the narrative-epistemological paradox (294) while Christ's analysis also tangentially acknowledges the narratological affordances that the emerging fields of literary gerontology and affect studies bring to Healey's experimental novel.

In chapter four, Christ moves on to the secondarily affected character's narration (read as caregiver, family member, or any character in close proximity to the character living with dementia) in Block's *The Story of Forgetting* that focuses on the epistemological exchanges between the affected parties, working through the negotiations of meaning and representations of ontological and temporal distances. By this point, it is clear that Christ's strength lies in her keen attention to the subtle consequences of each

narratorial choice along with her sense for organization of the arguments she puts forward. The succeeding sections round out the myriad ways in which cultural contexts inevitably seep into the crevices and shape the structures of narration, with the conclusion that Block makes “dementia communicable by translating it into language, metaphors and a story” in his novel (357).

The next chapter considers Naomi Kruger’s *May* in the light of multi-perspectival affected character narration of dementia. Christ reads this novel as a mosaic of five narrative strands that seem to adapt Arthur Frank’s delineation of the chaotic illness narrative (1995). As multiple characters are added to the mix, the ontological boundaries and differences become more prominent, unsettling expectations of linearity and narrative closure. She identifies, in *May*, an expansion of both temporal scope and relationalities among characters, generating a web of perspectives around the primarily affected character May. Kruger’s narrative form is also taken to show a pointed interest in dismantling the metanarrative in favor of micro-narratives which Christ calls “small stories” (367) (after Bamberg and Georgakopoulou, 2008) and in simulating dementia at the risk of further defamiliarizing it for its cognitively privileged readers.

In chapter six, Christ’s model reaches its culmination with an analysis of the inspective non-character narrator in Lisa Genova’s *Still Alice*—a narrator akin to the conventional omniscient and heterodiegetic narrator who enjoys an “epistemic surplus” (407) over homodiegetic narrators. The novel stirs away from the memory narration usually available in the other novels, but it deftly bridges the chasm between medical discourse and personal accounts of dementia. Christ’s assertion is that in *Still Alice*, “dementia is the plot” (432), unlike the other novels discussed concurrently in her study. While the novel is comparatively less experimental, and Genova herself wondered if it rang true to the lived experience of dementia, its engagement with conceptions and representations of illness (after Kleinman 2020) and personhood, raises important questions regarding the continuity of the self, the saturated usage of common disability and illness tropes, and debates around id, ego, and superego. And yet, Christ concludes that the text salvages dementia from its

apparent incomprehensibility and that it succeeds in its venture to support those looking for helpful and accessible material on caregiving and coping with dementia in real life. Christ's study, however, does not shy away from making comparisons between individual texts to draw a rounded picture of each text's strengths and weaknesses as fictions of dementia.

Christ's penultimate chapter rounds out her arguments by once again commenting on the power of fiction as a tool for making meaning and bridging onto-epistemological gaps. As each of the four preceding chapters analyze one fictional text to examine the different approaches that might facilitate narration, representation, and comprehension of dementia, Christ summarizes the results of her analyses not simply by gauging the texts on narratological parameters but also by situating them in a larger socio-cultural system of meaning making. This and the concluding chapter together provide a quick overview of the entire book in a final reflection of the utilitarian aspects of emerging dementia fictions and admits the limitations of applying fictional models of dementia to real-life situations. The book concludes with the acknowledgement that though fiction cannot cure dementia, it can provide new language registers to meaningfully talk about the subjective experience of dementia and indirectly foster change through empathy. Thus, *Fictions of Dementia* is an important contribution to the existing body of dementia scholarship and definitively succeeds in its endeavor to formulate a distinct (and perhaps indispensable) narratological taxonomy for reading emerging dementia fictions across the globe.

WORKS CITED

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