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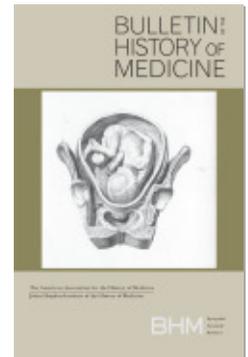
*Life Writing and Schizophrenia: Encounters at the Edge of  
Meaning* by Mary Elene Wood (review)

Gail A. Hornstein

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heritage has a strongly conservative valence that explains if not defends the status quo, Benjamin thought that the continued existence of infinitesimal traces of the past could pose a radical alternative to the dominance of urban industrial capitalism.

The development of mass media technologies has greatly increased the disruptive potential of the past. Photography, audio recording, and cinema not only exponentially increased the number of historical representations available in the present; they opened up past experience to technical manipulation. All of these technologies allowed for a magnification of sensory detail that revealed new facets of reality, challenging the idea that our simple sense experience and individual memory could produce an adequate rendering of the past. Scanlon argues that the digital revolution and the expansion of the World Wide Web have so accelerated these processes that the surfeit of available past experience threatens to overwhelm the present. The distinction between past and present, between memory and forgetting becomes blurred and undermines any possible sense of tangible reality. We now longer live lives tightly tethered to a particular time and place, but skim along the surfeit of experience, dipping in where and when we please. Scanlon is ambivalent about this new way of living. He sees the potential for playful engagement with the world, but worries about a deepening culture of forgetfulness.

Scanlon's book is a useful entry point into the growing scholarship on history and collective memory. For historians of medicine, such work poses a challenge to connect historical accounts of the reductive focus on individual memory as recall in the neurosciences to these broader sociocultural meanings of memory.

Jesse F. Ballenger  
Drexel University

Mary Elene Wood. *Life Writing and Schizophrenia: Encounters at the Edge of Meaning*. *Clio Medica: Perspectives in Medical Humanities* 90. Amsterdam: Rodopi, 2013. x + 353 pp. \$120.00 (978-90-420-3684-0).

This is an important book, advancing the study of first-person narratives of madness and demonstrating the substantive contributions that literary scholars can make to medical history. Wood succeeds in her goal to "write respectfully about the often startling mental phenomena that are a part of human experience" (p. x), partly by taking her own account and that of every person she writes about equally as objects of inquiry. With "stories of schizophrenia" her explicit focus, she makes clear at the outset that these include "stories written by those living with it and stories written by those who study and treat it" (p. 1). Wood understands clearly the key challenge faced by all scholars of madness narratives: "How do those living with schizophrenia write about their lives given that the diagnosis defines them as unable to tell a coherent story?" (p. 2).

Chapters are organized around a thought-provoking set of exemplars—from the heavily constrained personal accounts published by the medical journal *Schizophrenia Bulletin* and the “shadow narratives” hidden in doctors’ casebooks to the more familiar hospital memoirs and fiction that Wood and others have previously analyzed and finally to the unwritten story of her own mother, who struggled with schizophrenia throughout much of her adulthood. This last is a daring choice for a careful scholar like Wood, fully aware of the ethical and empirical challenges of constructing and interpreting a parent’s life story. Less intimately, another chapter addresses the metaissue of a “narrative engaged in an encounter with another narrative” (p. 121), focusing on the case study that Freud based on Schreber’s memoir and Bateson’s introduction to Perceval’s narrative. (Helpfully, each chapter is individually referenced so it can stand on its own; several would be excellent as supplementary course readings.)

Wood’s choices reflect the key insight of this book, expressed clearly in its title—that life writing and schizophrenia “encounter” one another at “the edge of meaning.” She is not afraid to defend patients’ right to have their own perspectives count, both for ethical reasons and because psychiatrists have so little basis on which to assert their claims as authoritative. But she positions herself on complex epistemological ground, critiquing Freud for “distort[ing] and appropriat[ing] the patient’s words” while praising “the seriousness with which he took them” (p. 126) and the “multivocal narrative” he created as a result (p. 127). Wood avoids the trap of taking first-person accounts as any more or less layered than those of doctors—never simply “true” or “invented” or “metaphorical” but all those things and many more. She analyzes an impressively diverse range of narratives and reads them equally closely. But in the end, she seems reluctant to challenge “schizophrenia” itself, constantly referring to it as “the disease” as if this terminology were not itself at issue.

In analyzing the brief personal accounts in *Schizophrenia Bulletin*, Wood does emphasize how “contributors are asked to write themselves up as case studies” (p. 80), conforming to the expectations of doctors by, for example, “shap[ing] stories to emphasize the effectiveness of medication in reducing symptoms” (p. 89). She draws attention to the revealing fact that “there is no dialogue with or acknowledgment of these writings in other sections of the journal” (p. 80), even though one such account has been included in each issue since 1979.

Perhaps the most astute chapter in this very astute book focuses on the *DSM-IV* casebook. Wood shows how the patient’s voice appears in “‘shadow narratives’ [that] interrupt the narrative of [the] schizophrenia diagnosis, exposing it as the story-telling that it is” (p. 226). Calling attention to the details the doctor chooses to include or omit in a case example, she reveals the “universalizing sweep of the diagnostic gesture” (p. 236) and explores diagnosis as narrative, a topic rarely considered in the burgeoning literature on the *DSM*.

Wood draws creatively on literary theory, disability studies, history of medicine, cultural history, psychiatry, feminist theory, medical humanities, and sociology, and scholars in any of these fields have much to learn from this book. Detracting slightly from its many strengths is the somewhat tedious analysis of Janet Frame’s

*Faces in the Water* and the lack of a conclusion offering the author's integrative reflections on so wide ranging a work.

Gail A. Hornstein  
Mount Holyoke College

Zrinka Stahuljak. *Pornographic Archaeology: Medicine, Medievalism, and the Invention of the French Nation*. Philadelphia: University of Pennsylvania Press, 2012. viii + 338 pp. Ill. \$75.00 (978-0-8122-4447-2).

Described as “a cultural history of medical medievalism” (p. 3), Zrinka Stahuljak's *Pornographic Archaeology* explores the ways in which fears and fantasies about medieval sexuality were invoked by nineteenth-century medievalists, philologists, and physicians to construct discourses of French nationhood. When conceived as the “origin of a continuous civilization that led to the present of the nineteenth century” (p. 10), the nation's medieval past posed certain challenges for the formation of French national identity. Containing some key ingredients of the nation's “civilizing mission,” notably the chivalric code, the Middle Ages also featured a number of elements that seemed opposed to them. Thus, as Stahuljak notes, “if the Middle Ages were invented by nineteenth-century nationalist desires, they were also invented by nineteenth-century opinions, fears, and fantasies about medieval sexuality” (p. 13). This fraught encounter with medieval sexuality would shape French national identity as well as the academic study of the Middle Ages in the twentieth century.

This detailed and well-researched book is divided into three parts consisting of two chapters each. Chapter 1 examines how hereditarian medical discourses relied upon historical knowledge that allowed doctors to trace the biological origins of the French “race” to the Middle Ages while engaging with mounting concerns about national degeneration. This convergence of medieval history and medical knowledge was clearly articulated during the consanguinity debates of 1856–66, the focus of which were aristocratic families that intermarried over the centuries. Chapter 2 continues this focus on hereditarianism in a more theoretical vein by examining the complex ways in which medieval understandings of “blood” included a material dimension ensuring biological continuity over time as well as a moral side that was more psychological in nature. In a Foucauldian sense, then, medieval “genealogy” was in fact irreducible to heredity; “what is ‘seminal’ is really ‘semiotic’” (p. 67).

In addition to interrogating continuities and changes within France over time, medical medievalism repeatedly engaged with non-Western “others” by considering the cultural exchanges effected by the Crusades. Chapter 3 describes how nineteenth-century relationships between colony and metropole were triangulated by references to the medieval past, in this case the Knights Templar, whose