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CALL FOR PAPERS

Special thematic issue of *Medical Humanities*: constructions of self in health and illness

F Rapport, P Wainwright

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In his new book, *Making Stories: Law, Literature, Life*, Jerome Bruner claims that the “self is a perpetually rewritten story”. We are all constantly engaged in “self making narrative”, in the end becoming “the autobiographical narratives by which we ‘tell about’ our lives”.¹

Galen Strawson, Professor of Philosophy at the University of Reading, reviewing the book for *The Guardian* newspaper takes a very different line. Strawson says:

“Every conscious recall brings an alteration, and the implication is plain: the more you recall, retell, narrate yourself, the further you risk moving away from accurate self understanding, from the truth of your being. Sartre is wrong to say that storying oneself is a universal trait, but he’s right that it is extremely common, and he is surely right, contrary to the tide of current opinion in the humanities, that the less you do it the better.”²

If, as Strawson claims, the idea of self as constructed through narrative “has come to dominate vast regions of the humanities and human sciences—in psychology, anthropology, philosophy, sociology, political theory, literary studies, religious studies, and psychotherapy”, the time is surely ripe for the medical humanities to pay this some attention. Indeed, the division between the technical account of personhood, popular since Locke, and the social construction of self of which Strawson is so critical, might be seen as a kind of paradigm case of the type of problem with which the medical humanities tries so hard to engage. The disagreement between the positions adopted by Bruner and Strawson might be explained, in part, by differences between disciplinary camps. It seems difficult to locate the individual human experience of life, illness, and suffering in the taxonomic account of “self” conceived by the analytic philosophers. Similarly, both the self of the health care practitioner and the *notion* of self that is at stake in dealing with patients, the self of the patient, as understood within the world of the health care practitioner, appear to demand a fuller account than they have received in the past. The self is something more than just what John Locke called a “conscious thinking thing (whatever substance made up of, whether spiritual or material, simple or compounded, it

matters not) which is sensible, or conscious of pleasure or pain, capable of happiness or misery, and so is concerned for itself, as far as that consciousness extends”. Is the problem one requiring an attempt at interdisciplinary working?

A special edition of *Medical Humanities* will be devoted to the problem of the narrative self and its place within medical humanities, seeking to combine contributions from academics within and without the field of the medical humanities, and from health care practitioners from any discipline. Their common concern should be an interest in “constructions” of narrative selves. Papers are invited with regard to:

- our understanding of the self in the broadest context of illness, health and medicine;
- the relationship between self, health, and illness from the perspective of the person or persons experiencing these states;
- the relationship between self, health, and illness as perceived by third parties, and;
- the experience of self as a health care practitioner.

Manuscripts should be sent to the journal in the usual way, but marked “for Special Edition on ‘constructions of self’”. They will be forwarded directly to the issue editors. The issue editors welcome informal enquiries prior to submission and can be contacted by email at the addresses given below.

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