CANCER NARRATIVE WITH A DIFFERENCE: ELAINE FEENEY’S AS YOU WERE

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Abstract. Elaine Feeney’s novel As You Were offers the story of a terminal cancer patient who forsakes any medical treatment. Narrating the final moments of her protagonist’s life, the author breaks with the traditional cancer novel formula in which a bellicose stance is prescriptive. Instead, the heroine’s stay at a hospital ward with other female patients constitutes Feeney’s point of departure for writing a state-of-the-nation novel. The article discusses how the merging of different literary traditions, such as cancer narrative, literature of witness, or experimental fiction, allows the author to paint a poignant picture of Irish society, in which women, whose rights were historically curbed, empower each other through telling their life stories as well as reclaiming the life tales of their lost sisters. The analysis focuses on metaphors and narrative strategies that customarily underpin cancer stories and which can be identified in the novel. Secondly, the subversion of the cancer narrative is taken under scrutiny to demonstrate the experimental character of Feeney’s novel. Subsequently, the ethical dimension of storytelling is given critical attention and the work’s status as a state-of-the-nation novel is elaborated on.

Keywords: cancer narrative, illness narrative, Irish literature, feminism, trauma

INTRODUCTION

Elaine Feeney’s debut novel As You Were, published in 2020, offers the peculiar story of a terminal cancer patient who refuses to share her diagnosis with anyone but a magpie. Contrary to the expectations inherent in the typical cancer narrative, the reader does not accompany Sinéad Hynes in her fight against the fatal disease. Instead, her individual tale turns out to be one of the strands Feeney weaves into the tapestry of trauma experienced by Irish women in the twentieth century. While the author employs a number of literary genres to recount the protagonist’s plight, namely, cancer narrative, literature of witness and experimental fiction, all of these nonetheless coalesce into a state-of-the-nation novel focused on the historical oppression of women in Ireland. The aim of the article is to discuss how the merging of different literary traditions allows Feeney to paint a poignant picture of the society in which women, whose rights were significantly curbed until

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the final decade of the previous century, empower each other through sharing their own life experiences as well as unearthing the stories of their lost sisters. The initial analysis focuses on metaphors and narrative strategies that customarily underpin cancer stories and which can be identified in the novel. Secondly, the subversion of the cancer narrative is taken under scrutiny to demonstrate the experimental character of Feeney’s novel. Subsequently, the ethical dimension of storytelling is given critical attention. Finally, the article elaborates on the status of Feeney’s work as a state-of-the-nation novel.

THE CONVENTIONAL CHARACTER OF THE NARRATIVE

In *Reading and Writing Cancer*, Susan Gubar (2016: 32) observes, ‘The shock of mortality that illness triggers can flood patients not only with dread of the future but also with memories of the past’. Predictably, then, the narrative structure of *As You Were* alternates between the present day, that is, Sinéad’s confinement to a hospital ward, and multiple flashbacks from her personal past. Among those reminiscences, some seem to be willed and contemplated, but the recurring italicised type of memory gives the impression of violent intrusions that cannot be fended off. These heartbreaking analepses that commence as early as on page three and continue throughout the novel are told in the voice of Sinéad’s late father, a tyrant and a wife-and-child batterer. Incorporating these painful recollections from which the heroine tries to distance herself, Feeney subscribes to the common assumption that Sontag derided in her focal essay *Illness as Metaphor* (1978), namely, attributing cancer to repression. Even though the author most likely aimed to use the heroine’s troubled past as a credible explanation for her refusal of treatment due to emotional self-neglect, the inclusion of these repressed memories that violently resurface gives ammunition for reading Sinéad’s cancer as self-inflicted. If, as Sontag (1978: 22) states, ‘According to the mythology of cancer, it is generally a steady repression of feeling that causes the disease’, it might be the heroine’s unexpressed rage that is eating her up cell by cell.

As a child survivor of domestic violence, Sinéad has developed an array of protective mechanisms to keep her emotions at bay or regulate them effectively through substitution. One of them includes listening to sorrowful music, which enables her to alleviate her misery through reliving someone else’s pain. The other evasive technique the heroine employs when life overwhelms her is engaging in casual sex with other men, ‘No strings. Sad. Mad. Bad.’ (Feeney, 2021: 186). These sexual exploits are never meant to break Sinéad and Alex’s marriage, hurt her spouse and/or make him jealous. They are nothing but emotional regulation, or per chance, a form of sabotaging herself through yielding to her father’s chorus that rants relentlessly in her head: ‘you are indeed, solid fucken useless’ (ibid.: 282). Sinéad is convinced she does not deserve the life she has. As is often the case with child survivors of parental abuse, the heroine is trapped between the desire
to appease her father and the urge to liberate herself from his expectations and posthumous control. To prove him wrong and demonstrate that she is in fact capable of beginning and ending a task, Sinéad builds a successful career specialising in real estate. Yet, when she becomes a mother, her work commences to play another role in her life, namely, it transforms into a safe haven where things can be controlled, unlike in mothering. ‘My business was really my addiction’, admits the protagonist and adds, ‘the act of parenting was so brutal’ (ibid.: 90-91). Needless to say, becoming a parent is always a stressful, even though joyous, event. But for those who experienced emotional deprivation in childhood, having children of their own opens old wounds, seriously undermines the belief in one’s parental abilities and frequently results in heightened perceived vulnerability (Edelman, 2006: 211). Sinéad seems to have suffered from similar anxieties; she was ‘sad with the manic stress, sad with the rejection, sad with the crippling brutality that having mortal children brings with it’ (Feeney, 2021: 91). Unable to participate fully in the happy-sad rollercoaster that bringing up children equates to, the heroine ‘left most of that to Alex’ (ibid.: 91), assigning herself the role of a family provider. Securing her family’s financial situation and providing three of her sons with ‘The Things’ (ibid.: 90) becomes her ultimate parental goal. However, in catering for the prospective needs of her children, the protagonist engages in a compensation mechanism that involves a powerful projection of the financial deprivation she herself suffered as a child onto her sons. Additionally, the heroine believes she needs to maintain her job so that she would never ‘have to rely on a man leaving money on the counter’ (ibid.: 90) the way her mother did. Therefore, having developed such an assemblage of detachment techniques, Sinéad feels totally at a loss when faced with the terminal cancer diagnosis. Since she is in complete denial of her emotions, the protagonist is not capable of embracing the new situation other than through further withdrawal.

It seems hardly coincidental that of all possible terminal diseases, Feeney chose lung cancer to afflict her heroine with, for, as Sontag (1978: 18) observes, ‘A disease of the lungs is, metaphorically, a disease of the soul’. In doing so, the author of As You Were foregrounds the perilous notion that ‘Disease is the will speaking through the body, a language for dramatizing the mental: a form of self-expression’ (ibid.: 44). This, in turn, implies that in denying her ‘hidden passions’ (ibid.: 45) and anger, Sinéad has brought cancer upon herself, and her refusal of treatment may be read alongside Sontag’s resentment at the blame put on cancer patients:

Such preposterous and dangerous views manage to put the onus of the disease on the patient and not only weaken the patient’s ability to understand the range of plausible medical treatment but also, implicitly, direct the patient away from such treatment. Cure is thought to depend principally on the patient’s already sorely tested or enfeebled capacity for self-love. (Sontag, 1978: 47)

The protagonist’s capacity for self-love, severely diminished by the experience of emotional, verbal and physical abuse—‘Dinnertimes. Father’s hands. Mother. Throat. Neck. Choking. Dancing off the ground.’ (Feeney, 2021: 147)—was also undermined
by her father’s constant reminders not to attach herself to any animal that he bred on the farm. Parting with ponies was particularly difficult for young Sinéad, while her tears were met with her father’s crude remark that this experience would make her tougher. Retrospectively, the heroine bitterly comments on the consequences of these harsh words: ‘But later it made loving harder. I was always ready to let go’ (ibid.: 213). As a result, rather than investigate various therapies that could buy her time with family, the protagonist forsakes any treatment as well as fails to inform anyone about her terminal condition. Giving up on herself, Sinéad exemplifies the dynamics of cancer treatment Sontag writes about, yet, simultaneously, the novel constitutes a rather uncommon plot in cancer literature that generally tends to gravitate towards the stories of valiance, fight and survival. Interestingly, as Judy Z. Segal (2007: 4) observes, ‘nearly thirty years after Sontag (1978, reprinted 1990) impugned the military metaphors in which cancer is publicly narrated, battle has become so entrenched as a description for the experience of cancer that it seems natural, not a metaphor at all’.

The choice of lung cancer has yet another metaphorical meaning, which resonates with Feeney’s novel’s core issue, that is, women’s rights. At a critical moment in the narrative, Sinéad suffers from respiratory failure and is taken into an intensive care unit for resuscitation. Fully conscious but struggling for breath, suspended in the liminal state between life and death, the protagonist feels ‘the waters of annihilation close above [her] head’, borrowing the imagery of death as drowning from Woolf’s essay “On Being Ill” (2002: 3), which functions as one of the novel’s epigraphs. Unable to respond, the heroine hears the medical staff discussing her condition. Herself totally composed, almost lulled to the movement of submerging and resurfacing, she watches the surrounding mayhem as if separated by a glass pane. The reader’s perspective is far from detached in the reception of this frenetic scene, which is delivered as a series of broken interjections of doctors and nurses, all outraged at Sinéad’s negligence. While cheering for the heroine to stay alive for some emotional resolution, one cannot miss out on the point the author is trying to make altogether, which is the lack of agency and subjugation of the female body to male power. Unable to articulate a single word of protest due to her respiratory failure, the protagonist is subjected to the decisions of those in power, in this case, hospital doctors. Her body is pumped with liquid medicine, electrified and a tube is pushed into her throat, all of which are administered and decided for her, assuming her silent consent, and all of which can be interpreted as metaphors of sexual violence. The figurative meaning of this dramatic scene becomes conspicuous when the narrator says, ‘They shove something down my throat. I gag. I gag up my tongue. I gag up my tits, my tummy, my vagina’ (Feeney, 2021: 211). The control of women’s voice and their bodies, especially their reproductive capacity and sexual exploitation, is the issue Feeney in fact addresses. The fictional scene of resuscitation is steeped in the author’s own biography. Due to her negligence, the writer had a near-death experience that also involved respiratory failure. It was de facto Feeney herself who heard the outraged registrar yelling to someone, ‘How did she let herself get into this state?’ (Donnelly, 2020: n.p.). Retrospectively, the writer admits she
was shocked by the extent of her self-abandonment; however, she anticipates that ‘the ill logic of carrying on no matter what’ (ibid.) will be relatable to many of her readers. The sacrifices women make especially for the sake of the presumed well-being of their families is central to the novel and will be elaborated on extensively in the final section of the article.

The scene of resuscitation, which functions as the novel’s climax, is a moment of transformation and, eventually, liberation for Sinéad. Firstly, her husband learns about her terminal diagnosis so she no longer has to hide her uttermost secret from him. Secondly, having confided in Alex and shared her experience of domestic violence with someone for the first time, the heroine decides to abandon her victim position and take responsibility for her own life. She ultimately plucks up the courage and tells her inner father ‘to fuck off’ (Feeney, 2021: 282). Following the logic of cancer as caused by repression, the protagonist’s confrontation with her paternal figure becomes predictably a cathartic release. She finds her own voice and hushes her paternal superego, establishes clear ego boundaries and initiates her emotional healing process. Hers is just one of the narrative strands of patriarchal abuse of women that Feeney intertwines in the discussed novel, yet, her experience of a cancer patient most explicitly points to the cancerous metaphor that permeates As You Were as a whole, namely, patriarchy seen as a carcinoma that feeds on the tissue of women, consuming them cell by cell.

EXPERIMENTAL CHARACTER OF THE NARRATIVE

Feeney’s choice of lung cancer as a narrative frame places her novel outside the mainstream of women’s cancer literature, which is dominated by three carcinomas: breast, uterine, and ovarian. According to Mary K. DeShazer (2005: 3), ‘These three cancers provide the focal topic for hundreds of narratives, memoirs, poems, and plays written each year by women in English-works that break silence about this disease, challenge its stigmatization, and retrace its boundaries’. These gender-specific cancer tales, which tend to universalize a female experience of facing a malignant diagnosis and aim to empower women in their battle against the disease, are frequently products of what Barbara Ehrenreich (2001: 50) dubs ‘the breast cancer cult’. Adamant about perpetuating stories of survival, breast cancer culture, which predictably is a lucrative business, belies the ordeal many female cancer patients go through by ‘normalizing cancer, prettying it up, even presenting it, perversely, as a positive and enviable experience’ (ibid.: 53). The well-established format of the battle with and victory over feminine cancer (Segal, 2012: 301, 310) is in no way compatible with lung cancer stories. Even though lung cancer is one of the most common causes of cancer-related deaths worldwide (Roulston, Davidson, Kernohan, and Brazil, 2018: 2115), as Kaptein and Thong (2018: 3687) evidence, ‘the disease is not often a subject in works of art’. The researchers blame this lacuna on the stigmatised nature of the disease as the one caused by smoking. In their analyses of the sparse artistic works that
thematize lung cancer, Kaptein and Thong single out two reactions characteristic of lung cancer sufferers, namely, ‘virtual absence of rage and anger as an initial psychological response’ and ‘resignation and withdrawal from the social world’ (ibid.: 3687). The unemotional stance that these patients adopt, reminiscent of affective distancing, lends an air of veracity to Feeney’s heroine, who coolly refuses to undergo any life-prolonging therapy. Moreover, the choice of a lung cancer that is not typically seen as a feminine carcinoma allows the author of As You Were to avoid the pitfalls of the often infantilised and sentimentalised format of breast cancer survival tales that fall into Barbara Ehrenreich’s (2001: 43) category of ‘pink kitsch’.

The two epigraphs that precede the novel come from Virginia Woolf’s essay “On Being Ill” (2002) and Mike McCormack’s dystopian novel Notes from a Coma (2005), respectively. Their actual meaning, however, seems to be as significant as Feeney’s choice of a modernist and a postmodern writer to frame her narrative. The author’s use of modernist and postmodern narrative strategies to capture the mayhem of Sinéad’s disease puts the novel in the category of ‘women’s experimental cancer fiction’ (DeShazer, 2005: 8), which is defined in the following terms:

As distinct from popular fiction, with its linear narratives and sentimental sensibility toward illness, dying, and women’s relationships, experimental cancer fiction typically features characteristics of modernist and postmodern fragmentation: textual lacunae, stream-of-consciousness technique, fluid and/or multiple narrative voices, poetic lyricism, and an emphasis on the transgressive power of language and memory. (DeShazer, 2005: 173)

All of the listed hallmarks of experimental narrative can be identified in As You Were, whose segments of text and dialogues are double spaced as if the narrator was pausing to take a deep breath as a result of her respiratory difficulties or to recollect her thoughts to retell the story in an orderly manner. The reminiscences of diverse moments of her life that constantly flood Sinéad’s mind, as well as the life stories of her hospital inmates that are inadvertently intertwined with hers, push the storyline back and forth in time in an unpredictable way. Punctuation is arbitrary for the most part of the novel, serving more as an emotional marker rather than a comprehension-enhancing device. The lists Sinéad almost compulsively produces when contemplating a certain object or phenomenon are reminiscent of Woolf’s narrative technique of a free flow of thoughts and associations. Yet, some of them bring to mind the protagonist of Alice Munro’s Lives of Girls and Women (1982), Del Jordan, who produces lists as a way of commemorating her home town and the people that inhabited it. Once a writer, Del looks back on her life and œuvre only to realise that ‘no list could hold what I wanted, for what I wanted was every last thing, every layer of speech and thought, stroke of light on bark or walls, every smell, pothole, pain, crack, delusion, held still and held together—radiant, everlasting’ (Munro, 1982: 249). Similarly, some of Sinéad’s analepses catalogue places and objects that once existed in abundance and overwhelmed her but now
have to be left behind. The monologues of the protagonist’s father also take the form of a stream of consciousness, with commas being the sole punctuation mark.

Nevertheless, the supreme example of this modernist literary device is the final scene, which, as the author herself confirms in one of the interviews, is a tribute to Joyce’s *Ulysses*, precisely Molly Bloom’s soliloquy (Feeney, 2021: n.p.). However, its tender poetic lyricism and celebration of a reminiscence’s capacity to teach us how to yield when time comes are definitely indebted to Woolf, resonating strongly with her concept of ‘the moments of being’. Perversely, the final moments of the protagonist’s life bring increased awareness of her existence, which is in stark contrast to the way she felt most of her life, that is, distancing herself emotionally, wrapped ‘in a kind of nondescript cotton wool’ of non-being (Woolf, 1985: 70). The indelible memory of the demise of an old ewe, which comes back to Sinéad a few moments before her own end, reveals itself to have held a precious life lesson for the protagonist. Belatedly, she recognises the hidden pattern of life and death beneath the cotton wool, which, according to Woolf, can be unveiled through writing.

In addition to the aforementioned facets of experimental cancer fiction, *As You Were* is also told in multiple narrative voices. Though the novel features first-person narration, it constantly lends voice to other female inmates, whose stories have remained unheard thus far. At some point, the plots of Margaret Rose, Jane Lohan and her lost lover Ann gain the same gravity as Sinéad’s plight, inviting reflection on the changing position of Irish women since the 1950s until now. Yet, the multiple perspectives also serve another purpose. The polyphonic character of the hospital ward, where the medical staff, patients and their visitors all enter the same confined (narrative) space—often unsolicited—frequently results in utter chaos, thus mimicking the disruption that incurable disease brings with it (Frank, 1997: 97). Since, as it has been evidenced in the previous part of the article, Sinéad has been suffering from control issues due to her traumatic childhood, she is unwilling to relinquish the authoritative grip on her life even when faced with a terminal diagnosis. Although the heroine manages to hide her secret and, by ignoring her deteriorating condition, maintain control for some time, her situation changes dramatically when she ends up hospitalised.

Sinéad views the hospital as a hostile rather than a hospitable place, reminiscent of ‘Victorian dramas or *Prison Break*’ (Feeney, 2021: 18). It is the space inhabited by people who experience the crisis of control for ‘Illness is about learning to live with lost control’ (Frank, 1997: 30). Despite all the efforts taken by the hospital administration to turn it into a place with predictable routines of meals and doctor’s visitations, it is a manic environment subject to the capricious nature of disease that results in sudden respiratory or heart failures, resuscitation and, not infrequently, death. It is the institution that belittles patients, whose course of treatment is decided for them and without them by specialists. It is the place where ‘the line between selfhood and thing-hood […], organic and inorganic, me and it’ (Ehrenreich, 2001: 45) is blurred and the patient is tantamount to their disease. This loss of subjectivity and agency terrifies Sinéad the most, and, in a desperate attempt
to retain any control, she decides to practise her choice by refusing any therapy that could delay her otherwise imminent death: ‘no one will ever tell me. What. To. Do. Ever.’ (Feeney, 2021: 236). The protagonist’s rejection of further medical treatment resonates with general findings about female lung cancer patients, who, as studies show, ‘tend to value quality of life more than just prolonged life’, are ‘more likely than men to have planned more specific late-in-life activities’ and are less likely ‘to repeatedly visit medical facilities to complete their cancer treatment series’ (Deviany, Ganti, and Islam, 2021: 118). Although her initial motives for withdrawing from treatment do not necessarily stem from the conscious rejection of ‘a bellicose stance that damages the life left to be lived’ (Gubar, 2016: 71), in the course of her hospitalisation, the heroine learns to appreciate the value of living in the moment and being with and for others through experiencing ‘[sisterhood] of those who bear the mark of pain’ (Frank, 1997: 49). Only when she lowers all her defences is she ready to embrace therapy that will prolong her life, provided it can be administered on an out-of-hospital basis. Importantly, unlike in many cancer stories that portray the malignant disease as a catalyst for a fuller and more self-reflective life and attribute it with transformative powers, As You Were does not glorify the cancer experience in any way. As Segal (2012: 303) points out, ‘Having cancer is misrepresented when it is represented as an enriching, ennobling experience’, and Feeney seems to be perfectly aware of that. What brings about a change in the protagonist’s worldview is the act of witnessing other women’s abuse and mistreatment and partaking in their pain through attentive listening. Bed-ridden and ‘cornered’ (Feeney, 2021: 291) in a hospital ward, the protagonist cannot practice her escapism or detachment any longer and is inadvertently forced to watch the drama that abruptly unravels in front of her eyes. The result of her immersion in and embracing of the suffering of other female patients is the first-person narrative she spins in As You Were, which also has an ethical dimension.

STORYTELLING AS AN ETHICAL PROJECT

Upon her arrival at the hospital ward, the heroine hates the place, for ‘The air was lumpy and heavy, and it was hard to get a decent breath in. Or out’ (ibid.: 56). Her initial reaction is to come back home as quickly as possible, far away from the place where people ‘were trained to keep you alive, like vultures’ (ibid.: 60). To distract herself but also distance herself from her new neighbours, she employs a number of techniques that involve googling things, playing ‘what if’ games with herself, texting her husband and listening to music on her earphones. Thus, initially, she displays the characteristics of what Arthur W. Frank terms a ‘monadic body, understanding itself as existentially separate and alone’ (Frank, 1997: 36). Yet, before she knows it, Sinéad is totally mesmerised by the life dramas of her ward inmates, especially middle-aged Margaret Rose and elderly Jane Lohan, whose stories stay in central focus for the most part of As You Were. In the beginning, her role is that of an inadvertent viewer in the spectacle of life, but with time and due to her personal
involvement, it will transform into an act of witnessing. Feeney’s ward is indeed one grand theatre stage with a motley crew of villains, clowns, onlookers and tragic heroines who would not have met otherwise. For the hospital, as ‘a place where hierarchies are shattered, illness being the great leveller’ (Donnelly, 2020: n.p.), brings together people from all walks of life, of all ages and economic backgrounds, stripping them all of the luxury of privacy and infrequently dignity. This egalitarian setting allows the author to intertwine the plots of different generations of women, whose life experiences differ significantly due to the historical context they grew up and lived in. Through the inclusion of three heroines, that is, Jane, Margaret Rose and Sinéad, Feeney manifests the significant shifts in the position of Irish women that have taken place over the last seven decades, from utter marital subjugation and removal of children from unmarried women, through decriminalising homosexuality in 1993, lifting the constitutional ban on divorce in 1995, legalising same-sex marriage in 2015, to, ultimately, granting women access to abortion up to twelve weeks of pregnancy without reason in 2019 (Bloomer and Campbell, 2022). Thus, within less than a century, the initially conservative society of the Republic of Ireland, whose national identity was based on ‘sexual purity and strong family life’ (Daly, 2023: 2), has transformed into one of the very few progressive states worldwide that allow abortion on demand up to twelve weeks, alongside Canada, Cuba, Australia and New Zealand (Bloomer and Campbell, 2022: 1).

In the aforementioned essay “On Being Ill”, Woolf (2002: 11) writes, ‘There is, let us confess it (and illness is the great confessional), a childish outspokenness in illness; things are said, truths blurted out, which the cautious respectability of health conceals’. Serious disease and ensuing hospitalisation result in the creation of a liminal space where patients await their doctors’ decree. The anxiety this suspension breeds is often alleviated through confiding in someone—that is, through storytelling. The epitome of Woolf’s observation is Jane Lohan, whose ‘childish outspokenness’ (Woolf, 2002: 11) can be blamed on her old age and possibly dementia. Her character is a constant source of humour that skilfully balances the outright horrors of her past. In her extreme performances, Jane is the embodiment of chaos, a madwoman in the ward, Feeney’s own Bertha Mason. Her mental instability resonates with Sontag’s pronouncement that ‘In the twentieth century, the repellent, harrowing disease that is made the index of a superior sensitivity, the vehicle of “spiritual” feelings and “critical” discontent, is insanity’ (1978: 35). In the light of Jane’s life story, fraught with violence and abuse, her mad condition can be read as either an involuntary outcome of her past traumas or a willed exile. Abandoned by all of her nine children and constantly worrying about her husband, Jane is a lonesome elderly lady. As the readers soon learn, her life changed irreversibly when, several decades ago, she confessed to her then would-be husband, Tom, that she could not marry him, for she was in love with another woman. In order to avoid the scandal of breaking the engagement and calling off the wedding, her prospective mother-in-law forced the young to marry. She threatened to reveal Jane’s lesbianism, which would result in her institutionalisation in 1950s Ireland. On the very first day of their life together,
Tom decided to demonstrate his rage at being manoeuvred into this marital union, shoving Jane against the window frame and leaving ‘the long narrow line, the shiny snail-like track that ran from the crown of her head to the bridge of her nose’ (Feeney, 2021: 335). He also promised to ‘knock all of that dirty American slut, Ann Hegarty’, out of her, calling them both ‘fucking dirty rotten devil whores’ (ibid.).

In Marital violence in post-independence Ireland, 1922-96 (2019), subtitled ‘A living tomb for women’, Cara Diver reflects upon the dynamics of historical marital abuse:

Marital violence was sanctioned and controlled through Irish culture during the years from 1922 to 1965. Social, religious, and economic pressures made it difficult, and often impossible, for an abused wife to escape her husband’s violence. Indeed, a battered woman had no access to divorce facilities and few legal options available to her; she likely did not work outside of the home and was thus kept in a state of financial dependence; and she faced enormous social and religious pressure to stay with her husband, whatever his sins. By failing to provide victims of wife beating with any real refuge, Irish society ignored and even condoned male violence. Only in the 1960s and 1970s, with the help of significant cultural shifts, was the plight of the battered woman eased, but not erased. (Diver, 2019: 34)

In the light of Diver’s research, Jane’s plot can be read as representative of her generation rather than a singular case of marital violence. To wield power over his wife, Tom had her prescribed first injections, then tablets that would make her sleep for most of the time. When Jane refused to take them, both the doctor and her spouse threatened to separate her from the children on the grounds of her mental instability. Incapable of deserting her offspring, with no one to aid her, even though ‘Everyone in the parish knew’ (Feeney, 2021: 337), she surrendered and tried to perform her wifely and motherly duties as well as she could. It is in the hospital that she forgets to take the tablets she has been on for decades, and by chance, this is why her memories of the past, along with her thus far suppressed emotions, erupt so violently, taking the form of a confession.

Importantly, embedded in Jane’s story is Ann Hegarty’s experience of Magdalene Laundries, the trauma shared by more than thirty thousand Irish women. Ann, who was Jane’s love interest, left for America in the 1950s only to come back a year later unwed and pregnant. She was placed at the Bon Secours Mother and Baby Home, which she was forced to leave, having given birth to a boy that was taken away from her to be accommodated with her distant relatives and raised as their child. Ironically, like other women who allegedly received institutional help, she could not walk freely unless she paid ‘the one hundred bounty or release fee, demanded by the Church for her keep while in confinement’ (ibid.: 175). Since she did not have that amount of money, Ann was compelled to repay her debt by working at one of the Magdalene Laundries. Soon, she hanged herself. The image of her lover’s limp body suspended in mid-air has haunted Jane all her life, the way the protagonist of Margaret Atwood’s The Handmaid’s Tale (1990) felt
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the posthumous presence of her doppelganger, her predecessor in the Commander’s house, who, prior to taking her own life, had left her successor with an encoded message in pseudo-Latin: ‘Nolite te bastardes carborundorum’ (Atwood, 1990: 62), which should translate as ‘Don’t let the bastard grind you down’. The suicidal deaths of Ann and Offred’s predecessors can be read as acts of silent protest, as their challenge thrown into the face of an oppressive system that denied them their basic right to control their own bodies. Atwood’s quasi-Latin inscription has become a ubiquitous slogan chanted worldwide, including in the Republic of Ireland, by women protesters dressed in the characteristic red cloak and a white winged bonnet worn by the titular handmaid (Beaumont and Holpuch, 2018: n.p.), thus magnifying the novel’s message of female resistance to male oppression. In As You Were, the private tale of approximately ninety-year-old Jane uncovers collective trauma that has affected not only the thirty thousand women that were put through the ordeal of Magdalene Laundries but also their offspring and families. Reminiscing about Ann to her hospital companions, Jane voices the until recently silenced experience and becomes a spokesperson for those who were gagged. As Connolly observes, ‘Because the religious orders have not opened their archival records, […] Ireland’s Magdalene institutions continue to exist in the public mind primarily at the level of story (cultural representation and survivor testimony) rather than history (archives and documents)’ (2021: 307-308). Therefore, telling Ann’s story is the only form of commemoration available to Jane. In an angry tirade, she vents out all her outrage at Bishop Browne, whom she dubs the ‘General of Misogyny’ (Feeney, 2021: 171), the Catholic Church and the State for making the lives of Irish women a living hell. Ironically, she does not see her husband as her own oppressor, blaming herself for failing him and sinning. Predictably, Jane’s national and personal identity are steeped in the Catholic faith, which until the last decade of the twentieth century strictly defined the boundaries of propriety for the Irish. As the authors of the report entitled Ireland and the Magdalene Laundries (2021) observe, ‘The allegiance of the overwhelming majority of Free State (and later Irish Republic) citizens to the Catholic Church was deep; the people had a profound and intimate attachment to the moral teachings, metaphysical view, folk and canonical rituals, and consolation provided by a much-loved Church’ (McGettrick, Katherine O’Donnell, Maeve O’Rourke, James M. Smith and Mari Steed, 2021: 9).

Although significantly younger than nonagenarian Jane, Margaret Rose is also a pious and devout Catholic, with a wide array of prayers to aid those in need and a quasi-altar surrounding her hospital bed. Yet, she comes across as more selective as to which church doctrines she acknowledges or chooses to circumvent for the sake of her own children. She is a strong matriarch who is intent on protecting her daughters from male power and abuse. When her underage daughter Niquita gets pregnant by a boy who, according to Margaret Rose, means nothing but trouble, she arranges for her brother to take his niece secretly to an abortion clinic in England. Unwilling to divorce her abusive husband, who for years has been alternating between his wife and his long-standing lover, Margaret Rose resolves to ensure that her daughters do not end up in dysfunctional relationships themselves.
The arrival of her raging husband at the hospital ward, spitting words of contempt and outrage at his grandchild being murdered, is both preposterous and chilling to a similar degree. The self-righteousness of the father, who has not been around for most of his children’s lives yet feels entitled to control their choices and pass moral judgement, is a bleak reminder of the Irish past, when, commencing with the Free State, Irish men established ‘their new-found powers of self-governance by demonstrating control over the firepower of militarized men and the sexuality and reproductive powers of women, in particular the bodies of impoverished women and their children’ (ibid.). intertwining the plots of Sinéad and her hospital inmates, the author spins a tale of atrocities Irish women have been historically subjected to, including, until recently repressed from the official narrative, the operation of the Magdalene Laundries (Pine, 2011: 48). ‘Mandated by the Irish state beginning in the eighteenth century, they were operated by various orders of the Catholic Church after independence until the last laundry closed in 1996’ (Connolly, 2021: 307). Bearing cancerous metaphors in mind, the union of church and patriarchy is portrayed in Feeney’s state-of-the-nation novel as the carcinoma that corrupted the tissue of Irish society. For, as Mary E. Daly states, ‘the idea of large families and the laws banning contraception (as well as prohibition of divorce and abortion) was actually elevated to stand as a symbol of Ireland’s national identity’ (2023: 1).

Sinéad, like the author herself, is a declared atheist (Carragher, 2015: n.p.) and does not find any consolation in religious thinking, perceiving her hospital companions’ prayers more as magic rituals involving ‘the mitten of Padre Pio or a drop of blessed oil of St Thérèse of Lisieux or even a lock of St Francis of Assissi’s hair, even a hair of one of his pets’ (Feeney, 2021: 132). The protagonist’s fictional struggle might have been informed by the figure of Irish writer Nuala O’Faolain, who, in the face of metastatic cancer that affected her lungs, brain and liver, refused chemotherapy that would prolong her life. According to Bridget English, the radio interview in which O’Faolain, an agnostic, openly shared her fear of dying and the lack of solace in the absence of an afterlife ‘revealed the extent to which modern Irish society generally silences and marginalizes the voices of the dying’ (2017: 1). Many of O’Faolain’s disconcerting observations, especially those on the meaninglessness of professional achievements or the futility of art in confrontation with death, mirror the despondence of Sinéad, omnipresent in the initial passages of the novel. While the iconic broadcast did not conclude on a positive note, offering little consolation to listeners, in As You Were, Feeney proposes the act of witnessing and storytelling as a way of grappling with mortality and as an alternative redemption. As Dori Laub observes,

Bearing witness to a trauma is, in fact, a process that includes a listener. For the testimonial process to take place, there needs to be a bonding, the intimate and total presence of an other—in the position of one who hears. Testimonies are not monologues; they cannot take place in solitude. The witnesses are talking to somebody: to somebody they have been waiting for for a long time. (Laub, 1992: 70-71)
Although Sinéad does not initially share her story, relegating herself to the role of listener to Jane’s and Margaret Rose’s tales, she is nonetheless transformed by her sojourn at the populous hospital ward and the act of empathetic listening. Jane, on the other hand, must have waited all her life to ultimately confide her and Ann’s story in someone who would truly hear her. Towards the end of her hospitalisation, the protagonist no longer constitutes Frank’s (1997: 36) aforementioned ‘monadic body’ because she has unwittingly forged the dyadic relation with her companions, which recognises ‘that even though the other is a body outside of mine, […] this other has to do with me, as I with it’ (ibid.: 35; emphasis in original). Prior to her cancer, Sinéad saw herself as separate from the world, even from her family. Not until she recognises the larger generic pattern of abuse shared by generations of Irish women behind Jane’s and Margaret Rose’s tales can the heroine view her own traumas as both individual and collective experiences. In that respect, illness that brings all female characters to the ward functions rather as a metaphor for being afflicted with something undesirable and outside one’s control, a metaphor for precarity and vulnerability. However, Feeney’s choice of a hospital ward as the novel’s social milieu is in no way unsound for the dynamics that operate in this place and foster exchanging confidences and story-telling (ibid.: 36).

At the beginning of her stay in hospital, Sinéad discloses that she ceased reading books once she left her family home. The stories she devoured in her childhood and adolescence offered safe refuge from an abusive domestic environment. Yet, in adult life, they had nothing to offer but disillusionment and disappointment, for they could not deliver on their promises of rescue and escape. In a refusal to practise empathy, ‘Dickens made me feel like I was exaggerating, because there was no workhouse. Or undertakers’ (Feeney, 2021: 138), and as a protest against the futility of literature in alleviating one’s pain and solving problems, the heroine turned away from literature. Yet, the testimony of Jane, including Ann’s tragic plight, and the vicissitudes of Margaret Rose’s family life cause the protagonist to embrace books anew, namely, by producing a narrative that will pay tribute to the victims and survivors of patriarchal oppression. After all, As You Were is a first-person narrative spoken in Sinéad’s voice, and since it relates the moment of her death, one can assume the story is told posthumously. In Negotiating with the Dead, Margaret Atwood (2002: 156) argues that ‘not just some, but all writing of the narrative kind, and perhaps all writing, is motivated, deep down, by a fear of and a fascination with mortality—by a desire to make the risky trip to the Underworld, and to bring something or someone back from the dead’. Mortality predictably permeates Feeney’s novel, yet the contemplation of the heroine’s impending demise does not verge on morbidity. What the reader gets instead is a poignant tale about the necessity for bonding and interconnectedness, the only bona fide life values. As a late storyteller, Sinéad is endowed with the knowledge of the Underworld and has come back to share her wisdom with the living. The use of the past tense in the narrative additionally supports the retrospective view of the narrator, who ultimately managed to overcome the chaotic experience of cancer and give her life story a coherent structure (Frank, 1997: 97-114). If the protagonist is deceased, then,
by extension, one can stipulate that Feeney must have evoked her spirit to haunt the reader with her tale. And it is a disconcerting story, indeed. It is a cautionary tale, lest the generation of young (Irish) women take for granted the newly gained freedoms the way Offred and her contemporaries did prior to the rise of Gilead. Storytelling as a form of commemorating wounds endured and lives destroyed becomes a moral obligation in Feeney’s novel that involves taking an ethical stand.

The journey Feeney’s protagonist makes masterfully portrays the transition through four victim positions that Atwood delineated in her analysis of female agency and empowerment through storytelling. Position one involves denial of one’s victimhood; position two entails an acknowledgement of one’s victimhood but treats it as something beyond one’s control; position three acknowledges one’s victimhood and simultaneously refuses to see it as inevitable; whereas the final position requires becoming a creative non-victim (Atwood, 1972: 36-39).

Initially, Sinéad buries or represses her childhood experiences of domestic abuse, thus denying her victimhood. When the violent memories featuring her livid father resurface, she commences to link her unemotional attitude to life with the deprivation she suffered, slowly recognising herself as an individual victim of her paternal figure. The heroine enters position three, the moment she realises through Jane’s and Margaret Rose’s stories that her own abuse forms only one element of a collective female experience, while her father’s sadism is representative of a larger framework of toxic patriarchal masculinity. The suffering of others forces Sinéad to take a stand and speak against female oppression, to give voice to those who have been historically silenced, and to speak from the Underworld as a creative non-victim.

CONCLUDING REMARKS

Despite exploiting conventional metaphors of cancer, lung disease or insanity, *As You Were* decries the standardised cancer narrative formula that prescribes “the bellicose stance” (Gubar, 2016: 71) and unwavering optimism on the part of the patient. Inflicting her protagonist with advanced terminal lung cancer, Elaine Feeney strips her novel of all hope of recovery. Moreover, employing modernist and postmodern narrative techniques, which are characteristic of ‘women’s experimental cancer fiction’ (DeShazer, 2005: 8), the author successfully captures the feelings of chaos and the impression of one’s world falling apart that accompany a patient with a terminal diagnosis. Yet, Sinéad’s fatal condition is not intended to fill the reader with despondency. Paradoxically, rather than mourning the protagonist’s impending demise, the reader becomes a witness to her transformation, watching the heroine acknowledge the past abuse, overcome emotional numbing and enter a dyadic relationship with her husband and others. The emotional healing that ultimately occurs is mediated through the ‘[sisterhood] of those who bear the mark of pain’, where pain can be understood as medical conditions that brought the female characters to the hospital ward but also as a metaphor for the collective
experience of atrocities and abuse Irish women have been subjected to. In doing so, Feeney complicates the unequivocal genre categorisation of *As You Were* since it is a cancer narrative and a state-of-the-nation novel to similar degrees. Above all, nonetheless, it constitutes a compelling story of female experience as a daughter, wife, mother and friend, marked by vulnerability and resistance.

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**BOOKS ANALYSED**


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