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Title: Therapeutic Narrative Illness Writing and the Quest for Healing

Authors: Brooks, Roslyn

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Abstract: This thesis examines how narratives of illness become therapeutic narratives. The method is to engage closely with (mainly Australian) texts - literary accounts of illness - in order to identify key elements that effect a healing function (healing is distinguished from cure). Textual analysis is placed in the frame of medical information about the relevant conditions, and theoretical perspectives that provide a cultural and historical setting for illness writing. Bio-medical discourse foregrounds the clinical process of diagnosis, investigation and treatment and relegates the personal meanings of illness to secondary place. The thesis explores ways in which the patient's account provides an alternative discourse that supplements - and at times challenges - the medical discourse. Illness foregrounds the body, and illness narratives confront the reality of embodied experience. Illness that is chronic or incurable, ageing, physical and mental decline, and the inescapable prospect of death confront the patient with the need to find meaning in experience. Narratives of illness may serve as ventilation, diversion or escape for the patient. They may provide practical help, information and consolation to family and carers, and others who suffer with the condition. These are valuable functions, but I argue that illness writing may embody more powerful therapeutic elements that transform and give meaning to the illness as part of the individual's life story. Key therapeutic functions identified are perversity, empowerment and transformation. Healing can begin with the empowerment of telling one's story. Illness stories may challenge the stigma and the subordination associated with disease. They can affirm a sense of belonging and community where illness intersects with other forms of marginalization. Powerful illness narratives are often characterised by perversity, overturning the assumptions of dominant cultural discourses - including those that place authority with the medical practitioner and demand acquiescence from the patient. The most powerful therapeutic narratives transform the story of illness into a new story.

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In the narrative approach Illness is understood through the elicitation of narratives and their interpretation. However, Good [3] cautions illness stories may not provide much resolution since the narrators are still engaged in the striving in the quest for a cure and may be considering several outcomes in a given time. All therapies from psychodynamic to narrative therapy to CBT contain a 'therapeutic narrative' and begin with the therapist listening to the stories clients tell, and then clients are helped to gain a new perspective on their situation and new tools for coping with their problems. [28] demonstrate that when psychiatric trainees write narratives about their clients the 'Illness refers to how the sick person and the members of the family or wider social network perceive, live with, and respond to symptoms and disability. Illness is the lived experience of monitoring bodily

processes such as respiratory wheezes, abdominal cramps, stuffed sinuses, or painful joints. Some might take chronic illness to be a quest, as Arthur Frank suggests, on which the ill person seeks transformation, transcendental meaning, or the true self - chronic illness is a long adventure that ends only in death, but can teach lessons along the way. Neurasthenia is a popular nineteenth century term for nervousness, illness resulting from weakness of the nerves and nervous exhaustion. Though rarely diagnosed now in the West, it is still in use in China.