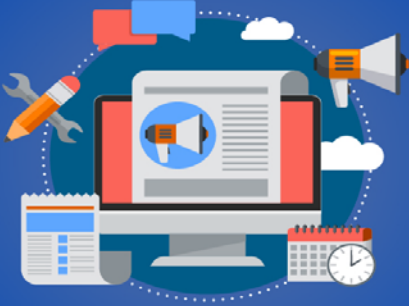


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Representation of Illness in the Select Poems of Raymond Carver

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Abstract:

We the “pestilence-stricken multitude” live in a world where inexorable illness informs our existence. Our speech, our joy, our breathing, our laughter is fraught with illness. ‘Our best songs are those that tell of illness’; our existence becomes pathological and poems become pathographies, a reflection of selves of those who suffer different kinds of illness, offering several perspectives on illness. Such poems of the American poet Raymond Carver as “What the Doctor Said” and “Proposal” are minus any illusion of illness. The poems are the dispassionate rendering of illness and are dialogic exchanges on illness, unraveling the fact that illness is a natural phenomenon to our ontology. But the patient-poet’s response to the diseased condition is not at all passively dejecting. He revels in poetry, lively records the context, and celebrates life on the face of death. His poems reveal and heal.

Keywords: Illness, pathological existence, patient-poet, cure, healing.

Introduction:

Are we ill? Is there any cure for the illness we suffer from? Is it possible to find answers to these questions in poetry? This paper strives to answer these questions with special reference to the select poems of the American short story writer and poet Raymond Carver (1938 – 1988) – “What the Doctor Said”, “Proposal” and “Poem for Doctor Pratt, A Lady Pathologist”.

Raymond Carver is more famous as a short story writer than a poet. His famous collection of short stories are – *Will You Please Be Quiet* (1976), *What We Talk about When We Talk about Love* (1981), *Cathedral* (1983), and *Elephant* (1988). Of his anthology of poems, prominent ones are – *At Night the Salmon Move* (1976), *Where Water Comes Together with Other Water* (1985), *Ultramarine* (1986), and *A New Path to the Waterfall* (1989). James Plath has divided Carver’s poetic oeuvre into three phases: “early poems”, “late poems”, and “last poems”. The representative collections in the first phase include *Near*

Klamath, Winter Insomnia, No Heroics, Please. The second phase is represented by *Where Water Comes Together with Other Water, Ultramarine*, and to the last one belongs *A New Path to the Waterfall*. “In his short stories, Carver chronicled the everyday lives and problems of the working poor in the Pacific Northwest” (“Raymond Carver” 2020). Carver’s poems “tend towards dramatic monologue, present-tense soliloquy that wears the past like a hairshirt... A Carver poem instantly establishes its presence” (qtd. in Bauer n.p.). Some critics do not consider him to be a poet: “the only trouble with Raymond Carver’s poems is that he was not a poet” (Chappell 29). It is critics like Sandra Lee Kleppe and Arthur Bethea who have recognized and brought to light the true merit of his poetry, and have done justice to his poetic genius. Carver’s short stories are influenced by the stories his father told him in his childhood of his exploits and the participation and changing of sides during the Civil War. But the poetry of Carver issues from his own life. The world he depicts in his poems is not merely the representation of his diseased condition. It is perhaps shaped by his long exposure to the hospitals and from his work experience at a hospital. In an interview published in *The Paris Review* he said:

I found work as a night janitor at Mercy Hospital. I kept the job for three years. It was a pretty good job. I only had to work two or three hours a night, but I was paid for eight hours. There was a certain amount of work that had to get done, but once it was done, that was it—I could go home or do anything I wanted. The first year or two I went home every night and would be in bed at a reasonable hour and be able to get up in the morning and write. (Simpson & Buzbee 2020)

In Carver’s poems, we thus find “autopoiesis” in the sense that the poetic production comes out automatically from his life and life experiences.

Review of Literature

Robert Miltner in “First Inclinations: The Poetry of Raymond Carver” points out that for Carver poetry and fiction crisscross. For Carver, the process of composing a poem and a short story or novel is almost the same. “He writes his stories and poems, in the same way, building from one word to the next, one line or sentence to the next” (141). Sandra Lee Kleppe in the article “Medical Humanism in the Poetry of Raymond Carver” has discussed how Carver’s poems deal with the “re-humanization of the patient as a whole person in the context of contemporary health institutions... [and the] patient-doctor relations” (39). In *Technique and Sensibility in the Fiction and Poetry of Raymond Carver* (2001) Arthur F.

Bethea has discussed in detail the “unreliable narration”, “epistemological theme”, realism, symbolism, “isolation”, and “withdrawal” in Carver’s short story, and the exploration of “alcoholism”, “marriage and family”, “nature”, and “death” in Carver’s poetry. Drawing on the work of Kleppe and Bethea, Fletcher W.H. Schmidt in “More Than Meets the Eye: Technique and Themes in the Poetry of Raymond Carver” has focussed on how Carver’s “poetry provides valuable insights into two of the largest influences that shaped his career—his alcoholism and his cancer” (1).

The poems selected and discussed in this paper subsume the trope of illness and offer several perspectives and a dialogic exchange on illness. Carver has not located the root of human sorrow in the abiding tension between the hand and heart, the physical and the imagined, hopelessness and hope, reality and idealism. For Carver, Illness is the muse; the occasion; the poetic stimulus, and the hospital bed is the consecrated bower, the bedrock of poetic creativity.

The Poetics of Carver

Carver is the poet-pathographer. In his meditation and musing on illness, we find an absence of any romantic strain whatsoever. It is devoid of hyperbolic paraphernalia of illness – unnecessary metaphors, images which misrepresent illness because “the most truthful way of regarding illness—and the healthiest way of being ill—is one most purified of, most resistant to, metaphoric thinking” (Sontag 3). For Carver, illness is inevitable. We are informed by illness. Life is a pendulum, and in it, we are sometimes “in the kingdom of the well and [sometimes] in the kingdom of the sick...sooner or later each of us is obliged...to identify ourselves as citizens of that other place” (Sontag 3). As illness is part of our existence, we need to live with it without much ado.

Carver does not like to waste or squander away the present moment in the face of illness. Carver has carved a “new path for illness, for the waterfalls of life and death”. For Carver, “looking into the hearts, the cerebral cortex, the nervous system, and the digestive tract are not deep enough” (Enright and Chickera 310). In his poems, he looks into all and finds illness.

Carver has quarantined his poetic world and focussed on comorbid state i.e. the primary state, his state of illness which concurs with the secondary state, the state of others. He has a self in isolation which is as penetrating as cathode rays and another self

microscopically engaged upon recording the commonly uncommon live moments of life flowing around him. He is conscious of himself and others. Like a patient wide awake upon a table, he tells us how to cope with a pathological condition.

Carver in his poetic world finds “a unique and exact way of looking at things, and the right context for expressing that way of looking” (Plath 13). In his essay, “On Writing” he has expressed an aversion to cheap popularity and canniness: “I hate tricks...clever chichi writing, or just plain tomfoolery writing” (Plath 14).

He refuses to encumber poetry with the “turning loose of emotion” of the poet, and with frills of sentimentality and exaggeration: “If the words are heavy with the writer’s own unbridled emotions...nothing will be achieved” (Gallagher 15). He prefers to put the right thing in the right manner, to call a spade a spade. A poem should reveal by implying: “Fundamental accuracy of statement is the one sole morality of writing” (Gallagher14).

He is an advocate of moderation. His poems are as much as necessary, not too much. He has penned the common in a common mode and stirs our sense. He believes that

It is possible to write about commonplace things and objects using commonplace but precise language and to endow those things ... with immense startling power. It is possible to write a line of seemingly innocuous dialogue and have it send a chill along the reader’s spine – the source of artistic delight. (Gallagher 15)

This is for him the expression of an artist.

Analysis:

Two years after Carver came to know of his lung cancer, the anthology of the last poems, *A New Path to the Waterfall: Poems* (1989) was published. “What the Doctor Said” and “Proposal” are included in this anthology.

The poem “What the Doctor Said” is the dialogue between the patient-poet and his doctor. The title does not pose a question. The poet narrates in a raw-boned, acuminate, and realistic style what the doctor said about his illness. We are offered to look at illness from two perspectives – that of the doctor and that of the patient. Generally, the pattern followed in the doctor-patient interaction is asking/greeting, eliciting information, diagnosing, and suggesting a remedy. But this poem takes exception to this pattern and the beginning is direct, dramatic, and sudden: “He said it doesn’t look good/ he said it looks bad in fact real bad” (1-2).

With immediacy, the doctor brings us straight to the pathosis of the patient-poet and posits illness as a natural and unavoidable phenomenon. The condition of the patient-poet is

very bad, his cancer has reached the last stage, and his life has started moving towards the falling action. The doctor has lost hope and recommends him to take recourse to religion: “he said are you a religious man do you kneel down/in forest groves and let yourself ask for help/when you come to a waterfall/mist blowing against your face and arms/do you stop and ask for understanding at those moments” (7-11).

“By switching to the language of a spiritual guide, the doctor perhaps recognizes a distinction between curing and healing that has preoccupied preeminent poet physicians for generations” (Kleppe 142). The doctor perhaps realizes that the patient is beyond cure, so he is trying to heal. The doctor asks the poet-patient what he would do in this terminal moment. Will he “stop and ask for understanding”? The patient-poet answers in the affirmative and his response is an asymptomatic one. For a moment, he is on the cusp of understanding and misunderstanding, at sixes and sevens: “I said Amen and he said something else/I didn't catch and not knowing what else to do”. The patient-poet turns this muddled moment into an opportunity for acknowledging the doctor’s part in betraying a clear understanding of his condition without any dilly-dallying: “I jumped up and shook hands with this man who’d just given me/something no one else on earth had ever given me/I may have even thanked him habit being so strong” (21-23). The patient leaping up and shaking the doctor’s hand, and showing gratitude to him fills in the communication gap between them. “The ritual itself provides order to a world that is breaking down at that moment” (Gianakos 421). Dean Gianakos has failed to understand the affirmative ending of the poem when he remarks that “Both [the doctor and the patient] are confused, disoriented, and uncomfortable in the presence of the news of cancer. Neither one knows exactly what to say about it. The reality is devastating” (421).

Without any medical impudence, the doctor has successfully scrupulously and veraciously interprets his malady to the patient-poet. That the patient-poet is near the waterfall is communicated to him. And this has strengthened him. The poem invites us to stop, pause, and muse on in our critical moments and the poem becomes the creative zone of knowing the worlds.

In “Proposal” the patient- poet is very ill. The doctor has informed him clearly about his terminal condition and the due process of his diagnosis. The doctor also advises him to give up: “you have to go through those seven stages. But you end up in acceptance” (22–23). Indeed, the poet who “loves his life” (20) succumbs to life unyieldingly and challengingly. The acceptance is there. He and his beloved accept each other. He accepts life and illness.

The poem is not only a proposal of marriage to his beloved Tess Gallagher but also a proposal to accept life and illness simultaneously.

“Poem for Dr. Pratt, A Lady Pathologist” included in *Fires: Essays, Poems, Stories* (1983) begins with a dream in which a priest in white brings to him a white bone: “Last night I dreamt a priest came to me/Holding in his hand white bones/White bones in his white hands/...I was not frightened” (1-5).

He visualizes his death and after death, he gets reduced simply to bones but he is not afraid. It is his bone and the necrotic image connotes the lethality of the disease he is suffering from and the portrait of the post-mortem of his death by himself. The white bone without any marrow, blood, or flesh symbolizes his clear, calcified, cool, and clinical outlook on life that shapes these poems.

The second stanza veers away from the posthumous dream world to the real world, an infected place that needs to be disinfected. The maids completely ignore his presence, his present condition, show him no pity, no sympathy and they start discussing their menstrual cycle, pushing this bed this way and that pretending, as if, nothing happened and everything is normal. Being ill is indeed the new normal. So far, we have the points of view of the doctor and the patient. Now we get the point of view of the nursemaids which concurs with that of the doctor and the patient.

The poet’s heart, the seat of passion lies on the table and it symbolizes the poet’s detachment from the body, the object of illness. He is unmoved and OK even when the lady pathologist, Dr. Pratt’s “fingers rummage the endless strings of entrails” (Carver 20). He falls in love with her proficient and decisive hands: “I am in love with these hands” (Carver 24) on the verge of death: “I’m cold beyond imagining” (Carver 25).

Conclusion:

Carver has demystified and busted the idea of disease and cure. The disease is nothing but the good cells going bad, the action, reaction of the cells to the harmful elements, and the consequent dysfunction in the human body. Medicine, surgery, doctors can never cure us because to cure someone is nothing but impossible. What we can do is to plateau, to find relief. In his *autobiography*, William Carlos Williams has remarked:

Any worth-his-salt physician knows that no one is “cured”. We recover from some somatic, some bodily “fever” whereas observers we have seen various engagements between our battalions of cells playing at this or that lethal maneuver with other

natural elements. It has been interesting. Various sewers or feed-mains have given way here or there under pressure: various new patterns have been thrown up for us upon the screen of our knowledge. But a cure is absurd, as absurd as calling these deployments diseases. (286)

Since curing is impossible, it is also impossible to put an end to illness. What we can do at best is to find ways to heal, to deal with illness. When Carver “Looking for Work,” says that he has found “a new path to the waterfall” (1–4) he perhaps prognostically refers to the path of healing, not to the path of cure. Medicines, surgeries, are the temporary measures of cure to fix the damaged cells, to boost the immunity of the body but accepting the diseased body as it is, coming to terms with illness is healing.

“Medicine is an art” with which doctors try to offer relief and poetry is the art with which the poets offer relief. The poet’s straddling the two worlds in his poems and championing a frank, honest, down-to-earth, balanced, and unprejudiced approach to illness perhaps arises from his realization that cure from the disease is impossible. This is our mortal burden which gets manifested in these poems. The poems tell of illness. They tell us how to deal with illness. The poems reveal the essence of our existence and offer to heal: “Writing about an illness experience [becomes] a kind of psychic rebuilding that involves finding patterns, imposing order, and... discovering meaning... a testimony to the capacity to transform that experience in ways that heal” (Gianakos 421).

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