

Meeting 7 October 5 2016, Corsham

Empathy and its limits in medical practice: empathy and second person narration in fiction.

Present: Bambo Soyinka, Sian Melangell Dafydd, Kate Pullinger, Panayiota Demetriou, Andrei Branea, Alison Lee, Morag Shuaib, Linda Blair, Richard Kerridge, Emma Geen, Tanvir Bush, Deb McCormick, Tracy Brain, Omar Al-Khayatt, Patrick Edwards, Stephen Moss, Anita Roy, Esther Gittoes, Eugenia Angulo, Jenna Rainey, John Woolner, Margaret Ward, Steven Lovatt, Mariana Roccia, Fay Weldon, Gerard Woodward, Hannah Chapman, Tamzin Whelan, Maggie Gee (chairing) **Apologies:** Ella Simpson, Bea Hitchman, Lisa Gee, Kate Rigby, Owain Jones, Rebecca Midwinter.

10.15 Coffee and tea: welcome to friends old and new, including new member and Professor of Creative Writing **Fay Weldon**; **Sian Melangell Dafydd**, bringing students from the new Transnational Writing MA; **Stephen Moss** bringing students from the Travel and Nature Writing MA; and novelist **Kate Pullinger**, Professor of Creative Writing and Digital Media. There were introductory comments by all four re the relevance of empathy to their subjects. Fay Weldon said she thought novelists were remarkable, and employable, for their empathic skills.

Future public event at Newton Park for the Empathy and Writing Group: Feb 1st 2017, 6.00 pm, Commons, for diaries. We will be fielding a panel as our contribution to the Professorial Lecture series.

10.35

Our first external member, neuroscientist and physician **Dr Omar Al-Khayatt**, talked about empathy and the challenges it poses for someone who is both a trained doctor in clinical practice and a writer of fiction.

Omar began by saying he had three overlapping identities: Iraqi, doctor, writer. They are complimentary. Writing serves as a mechanism to de-stress after medicine as well as a thing-in-itself. Being an Iraqi in Britain is not without difficulties: Omar gave the example of some Chinese medical students with whom he was getting on very well until he told them his name, and faces fell when he got to the 'Al-Khayatt' – 'Al QAEDA?', one asked anxiously. Omar compared medical training in Iraq to medical training in the UK. Medicine in Iraq is a more patriarchal practice: in the UK things have changed rapidly over the last decade or so and now there is great emphasis on care and on teaching doctors to listen to patients. Long before trainee doctors get their hands on patients they are doing role play with each other, playing doctor and patient in turn in exercises designed to teach them to find out what a patient thinks and feels about their condition. Sometimes, as in the ICE [Ideas, Concerns, Expectations] protocol, this can seem mechanistic and irritating, a way of preventing the doctor from finding their own unique or idiosyncratic way of responding to patients: effectively, medical protocols are, with the best intentions, trying to dominate empathy. If applied mechanistically – if, say, a patient arrived with a sore throat, and the doctor asked 'How do you feel about that? What are your ideas and expectations? – the result would be absurd. Omar himself hopes to be a doctor-writer in a long line that includes Chekhov, Oliver Sacks, Khaled Hosseini, Atul Gawande, Michael Crichton. He drew parallels between literature and medicine. Literary expression is in a sense an 'empathy tool'. The patient is one form of unreliable narrator. Reading novels can give you the big picture on an ailment such

as insomnia. The doctor diagnosing a patient is, in a sense, inventing a narrative: 'We should ask the patient "What's your story?"' It will be constructed by our thoughts, perceptions, discourse. Omar talked about burnout and 'compassion fatigue' – doctors have to find a way of coping with the level of stress and responsibility – they can never 'take a sickie', because people might die. Things go wrong sometimes. He quoted neurosurgeon Henry Marsh – 'Every surgeon carries within himself a small cemetery, a place of bitterness and regret.' Doctors should not always act. In conclusion he said that doctors often started out very empathic, but they had to learn to balance that with two things – to enable effective action, and protect themselves.

Omar Al-Khayatt is a neurologist working in Addenbrooke's Hospital Cambridge who wants to add his name to the list of physician novelists, having completed medicine at Kings College London alongside a Bsc in neuroscience, then a Master's in neurology. He is now specialising in 'Neurology and Neurophysiology' (main interests: epilepsy and neuromuscular disorders). Born in Iraq, Omar moved to England before a lot of the trouble started. He holds no humanities degree and spoke in a made up language until the age of 5, but has not let that hold back his writing aspirations. He has written mainly short stories, winning once and being shortlisted twice for the Fish Short Story Prize and being published as Editor's Choice on Scriggler.com. He is currently completing his novel 'I AM SULEYMAN', about an Iraqi doctor condemned to death in Iraq, and is represented by the Sophie Hickee agency.

11.05

Claire Kendal, best-selling author of *The Book of You*, talked about empathy in writing and reading fiction, and the effects of writing in the famously difficult, but fascinating, 'second person'. 'I know you must have been watching me since I left my house. I can't stop myself from asking you what you're doing here...'

Claire Kendal's second novel, coming out next year, is called *The Second Sister*, and has a very different central narrator/protagonist to the protagonist of *The Book of You*. Ella, 20, is a self-defence and risk assessment expert, having developed these skills partly as a response to the unsolved mystery of the disappearance of her 10-years-older sister, Miranda, the 'you' to whom the narrative is addressed. But the 'you' narrative form always implies an 'I' – 'Whatever you are, I always will be'. Ella is trying to keep her lost sister there by addressing Miranda. But from the reader's point of view, the 'You' is something which has to be constructed as the book goes on. 'Who is the 'You'?' Claire asked. 'It's a detection story'. It is also a mystery story, not only in the sense of the sister's disappearance, but in the sense of the mystery of another person, of this lost person, this lost sister. Claire explained that Miranda is not there, but the challenge for the writer is to make her present for the reader. In fact the reader must also become Miranda – through the 'You' form, the reader must accept the narrator's love and hatred.

Claire compared the 'You' narration in *The Book of You* and *The Second Sister*. In the first book, Clarissa is addressing her stalker, who is always there, though she does not want him. In the new book, Ella is doing the opposite, addressing someone who is not there and for whom she longs. The police presume that the sisters know something about each other that no-one else knows. But Ella must disentangle herself from people's assumptions that the sisters are alike and

see things alike – how do you free yourself from that? What are the boundaries between people?

Addressing herself directly to empathy in the two novels, Claire quoted Joshua Parker: 'the second person addresses our persistent human need to put ourselves in the other person's place'. For this talk she had done a word search for 'empathy' in the two novels. In *The Book of You*, though Clarissa may have excessive empathy for her mother and even her stalker, the actual word never appeared. In *The Second Sister* the word is used three times. Something in the air?

Claire Kendal is the author of two novels. Both are psychological thrillers, and told in the second person. The Book of You is spoken by a woman to her stalker, and was a best-seller and a Richard and Judy choice. Her second novel, The Second Sister, is spoken by a woman to her missing sister. You may also know Claire under her name as Dr Tracy Brain, author of research on Sylvia Plath, leader of the successful BSU Creative Writing doctoral programme and a gifted and empathic teacher here.

11.35 - 12.50pm

Questions and discussion - Claire Kendal and Omar Al-Khayatt took questions together. I will not try to attribute questions, but here are a sample of those asked and answered, which came from all parts of the room, students and staff, nature-writing, travel, creative writing, transnational writing etc.

Empathy and gender – was there a connection, could lines be drawn? Both speakers drew back from generalizing but indicated areas to explore. OAK – In medicine, there might be a 'surgeon male superhero' stereotype to unpick. Looking at different behavior in male and female registrars, and again without stretching anecdotal evidence to universal conclusions, female registrars might tend to accept more patients and take longer on each than their male counterparts: male doctors might act fast but know less. During medical training, to become effective doctors boys might have to become more empathic, girls less. CK talked about exploring the paradigm of the female victim – perhaps women are still brought up to be considerate and behave well – but in Ella, she had created a totally different kind of woman, assertive and an expert on self-defence. Other questions on gender – **Was the medical profession becoming 'feminised' by the emphasis on care? And a strong counter-question to all the foregoing questions – were we stereotyping women by asking them? Women didn't need less empathy, they didn't have an excess of empathy, men needed to have more, and had a deficit of empathy, didn't they?**

Would Spinoza's dichotomies between emotion and reason make interesting or useful reading for doctors or novelists? Would Lacan and Freud be useful? CK said that when she was writing theoretically, all these sources might be useful, but as a novelist, she did not use theory, the source was more direct.

Could we have some suggestions for good fiction in the second person? CK suggested 'Start with Richardson's *Clarissa*', which had inspired her answering novel, *The Book of You*. She added Lorrie Moore and Junot Diaz. [Try Camus's *The Fall*, Mohsin Hamid's *The Reluctant Fundamentalist*, etc]

How did empathy work with the 'you' form in interactive forms of writing? How about the 'Choose your own adventure' books where the reader-protagonist can make different choices and the 'you' actively inhabits and directs the narrative?

In real life, could we in fact 'choose', or decide in principle, how much empathy we could give? Might it just be hard to empathise with certain individuals? Had Omar ever found it hard to save a life? Omar said they were taught, and he believed, that all lives were worth saving, though some patients might be irritating or hostile.

Broadening this to other species, might it be easier to empathise with some species than others? What about facial recognition? Book recommendation: Karen Joy Fallor's novel *We Are All Completely Beside Ourselves* - empathy with a chimpanzee ('Through [the characters] we feel what it means to be a human animal,' Andrea Barratt.) [MG – Richard Kerridge's *Cold Blood* made me empathise with snakes and amphibians.]

Travelling, are we finding ourselves or losing ourselves? Does empathizing with someone else mean we have to lose a part of ourselves?

Living closely with an animal, did we not develop empathy with that animal and a sense, for example, of 'dogishness'? Could we write that?

Writers operate in a 'wide white space' between empathy and intuition. How much do medical docs trying to make a diagnosis and writers trying to breathe life into characters and events need a developed sense of empathy in order to have a tinder flash of intuition?

Empathy and drama - did acting in plays, and learning to perform other parts, help people to be empathic?

The question of writing and empathy and the connection between writing and therapy came up more than once in different forms. Was writing, as a way of exploring self and others, a form of therapy? Some writing groups were expressly therapeutic, but eg MA or undergraduate writing groups made a different claim.

How about 'expressive writing' – free writing as a form of therapy for grief or traumatic stress? This could be very effective. OAK said that it had sometimes been useful for him as a doctor to see what patients wrote about their condition, but doctors themselves had to be stable presences. [MG added that she felt, though it was dangerous to say so as people might then underrate the craft aspects, all creative writing was therapeutic.] **A final, useful suggestion on this topic from the floor: did writing help us to have empathy for ourselves?** OAK – his own writing had done that for him. CK put a different spin on this by looking at characters – if a character had too much empathy for themselves, it might stop the reader feeling empathy for that character.

12.50 – 2.00

More informal discussion over lunch.