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Nurse as wounded healer in *The English Patient*

Abstract:
*The English Patient*, a novel by Michael Ondaatje (1993), is a romantic drama set in the chaos of Europe at the end of World War II. In the ruins of an Italian church, a terribly burned man is being tended to by Hana, a young nurse too traumatised from her own war experiences to return home. Ondaatje’s acclaimed novel contains rich imagery, complex characters and interactions, as well as a story that weaves back and forward in time. The novel is a writerly text; the meaning needs to be unravelled by the reader and, due to this feature, it also makes for interesting reading about nursing. Too often texts about nursing are reductionist and stereotyped – nurse characters are often angels or lovers, sometimes villains and sleuths. Rarely are they portrayed as a wounded healer – an ancient, intriguing and illuminating myth. Within this paper, Hana’s struggles are read as a metaphor for those that similarly confront many nurses. She is a vulnerable young person thrust, because of the nature of her work, into the harsh realities of adulthood. She aspires to a kind of nursing that is attendant and gentle, and able to meet all of her patient’s needs. Yet the world she is forced to work in is chaotic, unpredictable and stripped of resources. The patient she tries to comfort is moribund and he endures agony and loss. In her interactions with him she learns about love, beauty, humility and, ultimately, resilience. In this way the written, literary narrative connects to a cultural narrative that at once embodies a profession’s struggles and illuminates more general transcendence.

Biographical notes:
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Keywords:
Creative Writing – Narrative – *The English Patient* – Ondaatje, Michael – Wounded healer – Nursing

*TEXT* Special Issue 38: Illumination through narrative: using writing to explore hidden life experience
eds Margaret McAllister, Donna Lee Brien and Leanne Dodd, April 2017
Introduction

Alberto Manguel has argued powerfully about the power of books and reading:

Books may not change our suffering, books may not protect us from evil, books may not tell us what is good or what is beautiful, and they will certainly not shield us from the common fate of the grave. But books grant us myriad possibilities: the possibility of change, the possibility of illumination (2009: 231-2).

So it is with the novel The English Patient by Michael Ondaatje (1993), and its film adaptation (Minghella 1996). Ondaatje has said that he began writing this novel with a single image of a plane crash in his mind, which activated his imagination to allow characters and stories to evolve (O’Malley 2016). He then wrote episodes involving rescuers, suffering, memories, and patient and nurse interactions that are replete with rich imagery, mystery, romance and emotion. Considering the character of Hana, a nurse who plays a pivotal role in the story, can prompt deep level thinking about what it means to nurse and care for others. It can also reveal how it is that, once damaged and wounded by the vicissitudes of working, a professional (in this case, a nurse) can replenish their resources to once again approach the caring role with compassion and skill.

There are thousands of textbooks and journals on nursing written exclusively for nurses. But nursing is also a popular subject in narratives written for a general audience in non-fictional texts such as autobiographies (see, Hayes 2016, Seacole and Salih 1857), biographies (see, Bostridge 2009), memoirs (see, Alexander 2012 Maund 2013), ethnographies (cf. Spiers and Wood 2010), historiographies (see, Wiegman 1993) and collected short memoirs (Eweama 2010). Nursing has also featured in numerous fictional stories, such as One Flew Over the Cuckoo’s Nest (Kesey 1963), Misery (King 1988), Promise not to tell (McMahon 2007), The Nightingales of Troy (Fulton 2009) and Billionaire Doctor, Ordinary Nurse (Marinelli 2009). Even across this small collection, nurses are portrayed variously as angels, lovers, villains and sleuths. In presenting a narrative analysis of another fictional story featuring a nurse, The English Patient (Ondaatje 1993), I will focus particularly on the nurse character, Hana, to reveal how she embodies the metaphor of the wounded healer, someone who has transformed her suffering and developed to become a better nurse. The exploration may resonate for readers who relate to taxing emotional work and offers hope that they can reclaim fulfilment and effectiveness.

Background

In contemporary society, being a nurse can be a troublesome and problematic experience. Nurses perform responsible, usually highly technical, and physically and emotionally draining work (Henderson 2001). Nurses are frequently lauded for being the most trusted health professional (Morgan 2014), and yet, at the same time, are roundly criticised for being ill-prepared for the realities of practice (Hazelton et al. 2011) and judged harshly for health care system failures (Francis 2011, Hutchison 2015). This is despite the evidence that use of qualified registered nurses in health care
leads to lower rates of patient mortality (Kutney, Sloane and Aiken 2013) and increased patient satisfaction (Lasater, Sloane and Aiken 2015).

Such drama makes for rich storytelling. Yet, as Summers and Summers argue, it is often non-nurses who write these stories (2014). Because of naivety, or acceptance of culturally embedded nursing stereotypes, writers tend to depict nursing in narrow or simplistic ways. Nelson and Gordon further argue that, apart from a few exceptions, nurses are typically written about in terms of their goodness and virtue (2006). Such a Polyanna-ish view belies the reality that there is light and shade in all things, including the profession of nursing (for an exception, see McAllister and Brien 2015).

An important point Nelson and Gordon also make is that the impact of such portrayals are that the public, which includes future nursing students, fail to learn what it is that nurses actually do, or could be doing. Paradoxical and conflicting representations of nursing within society can be destabilising for nurses themselves, compounding the already significant stress that they are known to endure (Cimiotti, Aiken and Sloane 2012) and propelling them toward a crisis of identity and purpose (Fagin 2001; Newnham 2013). If students of nursing are only able to access novels and films that depict stereotyped renderings of nursing, they may hold onto lay assumptions about the profession that are ill-fitting to practice. Alternatively, if they only learn the science and techniques of nursing, they may not know how to engage critically with nursing’s culture at all.

Compelling narratives such as *The English Patient* may not change anything about the realities and pressures of contemporary practice for nurses, but they could provide inspiration and illumination of some of the complexities involved in nursing’s culture and, by studying the character of Hana, it may be possible to see the ‘universal in the particular’ (Schelling qtd. in Wirth 2005). That is, reading about another nurse’s experience of adversity may resonate with nursing readers, evoking empathy for the character and prompting self-reflection. Like Manguel’s quote at the beginning of this paper, contemplation of how the story unfolds may offer insights about humanity, resilience and the possibility of change.

**A reading of *The English Patient***

In the field of narrative research there are many ways to approach and analyse stories (Bruner 1991; Clandinin 2006; Polkinghorne 1995; Riessman 2008). Herein, I have chosen to take a Barthesian approach (Barthes 1972), which focuses on how meaning can be made from the novel’s form and structures. These structures include metaphors, signs and signifiers, inter-textuality and myth formation. Roland Barthes was a structural critical linguist who was interested in examining texts for how both readers and writers could make meaning, and how conventions can be established that manipulate, mislead or shape culture (Culler 1983). Barthes suggested that an ideal text is open to a range of interpretations and resists conventions (1972). Thus, the analysis I provide may not be one that all readers or writers may agree with, and perhaps is shaped by my experience as a nurse.
The English Patient is a complex multi-layered narrative that has an unusual diachronic arrangement because the novel loops backwards and forwards in time between the last months of the second world war as the allies are departing Europe, and the months before the outbreak of the war in north Africa where explorers are mapping the terrain and German spies are seeking to obtain the secrets of enemy strategies. The novel opens with a nurse, Hana, tending to a man who has been burned beyond recognition. They spend many months living in an abandoned Italian villa, where slowly their stories unfold.

The book and the film are both moving and lyrical stories but also quite different. In the cover image of one edition, the woman, who must be Hana, for mention is made of the rudimentary facilities, is bathing in a makeshift bathroom in the ruined Italian villa where she and the English patient reside. She is having to make do with limited resources, she spends long hours alone, time to spend recuperating from shell shock and loss. By emphasising Hana in the cover image, it would seem that she is a central protagonist in the story. Whilst the nurse, Hana, plays a powerful role as a catalyst for change, she also goes on her own hero’s journey in both the book and the film. The hero’s journey is a term for an archetypal narrative (Coursineau 1990). That is, Hana is an heroic self-sacrificing nurse working on the front lines of war in Europe, who along the way experiences tragedy and trauma, helps the patient make the transition into dying with acceptance and grace, and eventually finds her way back to being happy and whole.

A narrator introduces various episodes to the story, beginning with the nurse-patient interaction, going back to what happened to Hana to cause her to choose isolation over repatriation, how Almasy obtained his injury, and then to explaining the characters that come to stay with them in the villa. In Barthesian terms, the novel is a writerly text; because the reader needs to use imagination to see the connections between the episodes and characters. As Ondaatje stated about his writing, ‘I usually start with very little when I begin writing a novel, perhaps one image: A patient in a bed talking to a nurse, perhaps … I kind of investigate this little keyhole of an image, and then the book grows out of that’ (qtd. in O’Malley 2016).

The novel and film cross several genres. At times, it is a mystery that traces how an unidentifiable patient, wrongly thought to be English, has suffered such terrible burns. Although the reader later learns that his name is Almasy, Ondaatje refers to him mainly with the less specific descriptor of ‘the English patient’. At other times, the story becomes a romantic tragedy recalling the intense love affair Almasy had prior to the war with an unhappily married woman, Katherine. Slowly, the narrative reveals what becomes of her. It is also a story of redemption involving several characters: Caravaggio, Kip, Hana and the ruined villa. All have been traumatised by war yet are clinging to life. Motifs of love, danger, wounds and battle scars abound.

Caravaggio is a suspicious character who appears in the romance story as well as the mystery and somehow knows both Hana and Almasy. He has survived Nazi interrogation, torture and disfigurement, and it is unclear whether he is on the side of the allies or enemy. Kip is a British soldier from the Indian colony, who has the task of clearing the land of hidden land mines. He comes to the villa and makes a connection.
with Hana, perhaps because both of them feel like outsiders trapped in a foreign land, but so changed and damaged because of their war experiences that they do not feel capable of resuming their pre-war lives.

Hana is a young Canadian nurse who has been damaged from her lengthy wartime experiences. Having worked in mobile and fixed hospitals, Hana witnessed bombardments that saw friends and family fatally wounded, cared for terribly mutilated soldiers or sat with them while they suffered and died. Consciously or not, Hana has been changed by the war. She has emotionally shut down, perhaps suffering from battle-fatigue, and she tends to patients in a competent yet perfunctory way. During the retreat of the patients and allies, Hana volunteers to stay with the sickest patient, Almasy, in an abandoned villa so that he can be kept comfortable and pain free until his inevitable death. Why she chooses to remain with him is not explicitly stated but she does not share her colleagues’ excitement for returning home, so perhaps she feels she has nothing to gain by leaving (and, perhaps, nothing to lose by staying).

The abandoned villa is the other important character in this narrative. Ondaatje describes beautiful but damaged frescoes, an abundant library whose books are used for fuel or makeshift furniture, hidden mines and booby traps, and overgrown gardens with untended trees that still bear fruit. Such elements signify the ravages of war, and the resilience of all that is beautiful and good. The ruin personifies, and reflects, the internal damage wreaked on the people.

Each of the characters have something to teach. Each is, in essence, a wounded healer – a metaphor that has deep resonance throughout the novel and for contemporary nursing. At first, each person is written about in a dehumanised way. Almasy is referred to only as ‘the patient’, Caravaggio is ‘the man with bandaged hands’, Kip is known as ‘the sapper’ (or mine clearer), and Hana is simply ‘she’. It is as if what ails them has made them incomplete as humans, and it is not until they have each worked through their problems that their names, and a deeper level of identity, emerges. As the story unfolds, the human characters face specific challenges that must be overcome in order to find resolution and redemption – whether it be to die peacefully, to accept disfigurement, to resume their engagement in the world, or to realise that they aren’t somehow cursed. Hana, in particular, believes herself to be not a good enough, or strong enough, nurse because she has been involved in so many deaths that she thinks that she brings suffering to all she encounters. She is disengaged from life, numb to emotion, and unwilling return to her pre-war life. She chooses to remain in this in-between place, where she can function automatically, be of service, but not live a fully human existence.

**Hana’s wounds**

Ondaatje’s story loops back in time to explain how Hana has become so damaged. It is often said that nurses practice at important life transitions, or thresholds, where danger and change are imminent (Buchanan 1997). Buchanan argues that nurse characters in stories often play a donor role (Jameson 1972), in that they are helpers who facilitate progression in other characters. Whilst this occurs within *The English Patient*, Hana’s role is much more than donor. Working as a nurse during the war has been gruelling
work physically as well as psychologically. Hana saw young men suffer terrible injuries, did not know about the whereabouts of her father, and on one catastrophic night learned that her fiancé was killed in battle. Hana, like other war nurses, practices on the threshold of life and death. War is a liminal space in the sense that it is a transitional space in which people move out of one way of living, into a state of uncertainty and ambiguity with few recognisable cultural anchors, and finally into the destination space, which may be either death or peace (Turner 1964). Whilst in this space, they are characterised by the awareness that at any time death could occur and rules that work well in peacetime do not always apply. The work of nurses and doctors narrows to be about facilitating safe transition from soldier to patient, and back again. For example, in field hospitals, Hana’s role is to bandage wounds, administer analgesics and return soldiers to the frontline. Sometimes this role of facilitator can become a terrible dilemma.

In one scene from the film, the reality of Hana’s work clashes with her aims and ideals. Hana is tending to patients confined to bunks in a packed hospital train. During the war, trains, boats and hotels were co-opted to become mobile operating theatres and hospitals. For injured patients, the train was a place of discomfort, uncertainty, and danger, where the usual hospital expectations of cleanliness, staff ratios, medications, bandages and so on could not be met. In this liminal space, nurses and doctors needed to improvise and make new rules in order to tend to the crisis as best they could. Viewers observe Hana checking on each patient and stopping at a young man who is post-operative. She tells him kindly that shrapnel has been removed from his leg and he will be fine. The soldier is comforted and responds that she is the prettiest girl he has ever seen. Hana gently dismisses him. He persists and begs for a kiss, saying that it would mean the world to him. She concedes and gives him a brief kiss, something perhaps she may not have done in any other context. This generates calls from other soldiers for a kiss too. Hana laughs and tells them to go to sleep. As she reaches the end of the carriage, she leaves the orderliness of patients in her care to enter the makeshift theatre where her colleague is grappling to contain an out-of-control haemorrhage. Her work is not often about caring for grateful and dependant patients, but managing chaos and disruption.

The following passage from the novel illustrates what Hana needed to do to cope:

> Throughout the war, with all of her worst patients, she survived by keeping a coldness hidden in her role as nurse. I will survive this. I won’t fall apart at this. These were buried sentences all through her war (Ondaatje 1993: 14).

The gross injuries from bomb blasts that ripped apart faces and limbs that she witnessed, and the unending stream of wounded men inexorably erodes Hana’s ability to continue to care in the ways that she aspired.

> She feared the day she would remove blood from a patient’s face and discover her father … she grew harsh with herself and the patients. Reason was the only thing that might save them, and there was no reason. The thermometer of blood moved up the country. Where was and what was Toronto anymore in her mind? This was treacherous opera… Hana bent closer to the wounds she cared for, her mouth whispering to soldiers. She called everyone “Buddy,” … she swabbed arms that kept bleeding. She removed so many
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It seems apparent that Hana has been traumatised by her experience. Calling all of the patients ‘Buddy’ is her coping strategy as this puts some distance between herself and the patients, and releases her from the necessity of remembering each soldier’s name. Yet, grouping these patients together as one anonymous ‘Buddy’ is also dehumanising. It reduces the communication, connection, care, and even love that could have been possible between patient and nurse. Ultimately, this distanced and depersonalised way of caring was unfulfilling for patients and for Hana herself (Haswell and Edwards 2004).

Not only does Hana struggle with the nature of the work, she also feels homesick, and anxious to hear news of her father. An accumulation of other traumas, either directly or vicariously witnessed, ultimately leads to Hana’s breakdown. In this passage, Ondaatje uses Hana’s ordeal as metonymic of the experience of all nurses.

Nurses too became shell-shocked from the dying around them. Or from something as small as a letter. They would carry a severed arm down a hall, or swab at blood that never stopped, as if the wound were a well, and they began to believe in nothing, trusted nothing. They broke the way a man dismantling a mine broke the second his geography exploded. The way Hana broke in Santa Chiara Hospital when an official walked down the space between a hundred beds and gave her a letter that told her of the death of her father (Ondaatje 1993: 44).

After this series of adverse events, Hana becomes deeply psychologically wounded, but is also on the path to becoming a wounded healer.

Wounded healers

The wounded healer is an archetypal mythic figure and is often discussed within nursing and health, whenever there are caregivers who are themselves damaged but learn to use their suffering to help others (Conti-O’Hare 2002; Heinrich 1992). It is an enticing subject matter for health practitioner memoir writers and biographers (Balducci 2014; Dunne 2002; Mirich 2013). All seek to highlight the interesting paradox of someone who has expertise as a health provider but is also carrying a disorder or illness themselves. It is based on the Greek mythological figure of Chiron, renowned for his medical powers, but also suffering an unhealable wound inflicted from an arrow shot by Hercules (Dunne 2002). The myth was developed by Carl Jung and applied to psychoanalytic therapists to embody the idea that a healer could be more effective in the present if they developed awareness of their past wounds and used this vulnerability to connect, and empathise, with their patients.

Wounded healers appear several times within the novel. The trope can be seen in Almasy himself, a man who has not only been terribly physically wounded, and also damaged due to subterfuge and drama, but who moreover seems to have something important to teach the vulnerable nurse. Indeed, others have suggested that Almasy is a mythological Fisher King (Fledderus 1997). In Arthurian legend, the Fisher King is the last keeper of the Holy Grail – an object that offers happiness and wellbeing (Loomis
1991). But the Fisher King also suffers from a mysterious and disabling injury, suggesting that although he cannot cure himself, he can reach out to help others. Caravaggio is another example. During the war he used his skills as a thief to spy for the military. He hears that someone he knew at home in Canada is nursing the patient in the ruin and comes looking for her. When he meets Hana, his injuries are revealed by the bandages on both hands. It transpires that he has had both thumbs cut off during Nazi interrogation. He talks to Hana, enabling her to tell her story, and thus he becomes a catalyst for change. Nunan suggests that the landscape itself acts as a wounded healer – the empty ruined villa is littered with mines, the fields are barren and untended, and yet even in this damaged place, there are fruit trees, books to read and frescoes to admire (2011). In particular, the library offers a portal for recovery, as reading provides a salve, escape and comfort. Ondaatje writes that, ‘The rest of the room had adapted itself to this wound [a hole in the roof], accepting the habits of weather, evening stars, the sound of birds’ (1993: 12). This illustrates how the library had adapted itself to the ruin, itself wounded, but still able to offer comfort to its visitors.

Hana, too, has been wounded psychologically by the war (Metcalf 2009) and when she meets Almasy, she becomes aware of how damaged she has become. With his burns, bandages and abject grief, he is the epitome of the faceless, unknowable and lost patient she had repeatedly and anonymously referred to as ‘Buddy’. In him, she also sees herself.3

It was sometime after this [learning of the death of her father] that she had come across the English Patient – someone who looked like a burned animal, taut and dark, a pool for her (1993: 44).

By engaging with Almasy, rather than distancing herself from him, Hana’s transformation begins. She tends to his wounds gently and thoroughly, feeds him fruit she finds in the ruins, and lies down on the bed with him to read and to listen to him quietly tell stories from his past. She tells him things about herself, she laughs, cries and falls asleep with him. All of these actions go far beyond acts of technical competence, and signify a resumed willingness to provide the person-centred care, the care that Almasy wants and needs, rather than the basic clinical care that Hana would have otherwise provided before she met him. The passage below illustrates the depth of care she begins to deliver.

Every four days she washes his black body, beginning at the destroyed feet. She wets a washcloth and holding it above his ankles squeezes the water onto him, looking up as he murmurs, seeing his smile. Above the shins the burns are worst. Beyond purple. Bone. / She has nursed him for months and she knows the body well, the penis sleeping like a sea horse, the thin tight hips. Hipbones of Christ, she thinks. He is her despairing saint. He lies flat on his back, no pillow, looking up at the foliage painted onto the ceiling, its canopy of branches, and above that, blue sky. / He turns his dark face with its grey eyes towards her. She puts her hand into her pocket. She unskins the plum with her teeth, withdraws the stone and passes the flesh of the fruit into his mouth. / He whispers again, dragging the listening heart of the young nurse beside him to wherever his mind is, into that well of memory he kept plunging into during those months before he died (Ondaatje 1993: 4).
In this passage, one appreciates the tenderness that Hana is now willing to use in her patient care, and the compassion and respect that she feels for him. In the months of caring for her solitary patient, Hana has not only come to know him intimately, she has also revealed herself to him, as he has to her.

Through caring for ‘the English patient’, Hana also begins to recognise her own ‘woundedness’. As Nunan states: ‘In the hopeful but ultimately futile exercise of treating the patient, instead of deepening her self-imposed isolation, she actually succeeds in repairing her broken self’ (2011: 16). Gradually, through her engagement with the Other – the bandaged and shrouded Almasy – and, by listening to the exotic stories that he tells her and that they read to each other, Hana is able to move from merely being wounded, to being a wounded healer. That is, she becomes someone who can move beyond her own suffering and use it to connect better with those she is caring for. Rather than just dispense care as she had become very expert in doing, in caring for this sole patient, she begins to feel safer, to change her practice, and to grow.

she felt safe here, half adult and half child. Coming out of what had happened to her during the war, she drew her own few rules to herself. She would not be ordered again or carry out duties for the greater good. She would care only for the burned patient. She would read to him and bathe him and give him his doses of morphine – her only communication was with him (Ondaatje 1993: 15).

There is a poignant scene within the film that encapsulates her transition from being frozen with grief to gaining some catharsis. An exhausted Hana sits with her head in her hands as Caravaggio enters the room. He hesitates as if he is about to touch her, and asks her what is wrong. At that moment, Hana breaks into tears, and Caravaggio asks her if she is crying because her patient is dying, and asks her if she is in love with him. Hana responds that she is grieving not just for Almasy, but for all the people she has lost. Subsequent scenes reveal Hana opening up to love and romance. She develops a romance with Kip. She listens more attentively to the stories that Almasy wants to tell. She begins again to feel joy and to have fun. Each element within the story provides a sense that Hana is no longer disengaged from people. By opening herself to both a patient and to others, she learns that her world can, once again, expand beyond the war. With Hana ‘the nurse’ subtly changing, it is possible that Hana ‘the young woman’ may also be able to move on in her life. In these ways, she exemplifies the wounded healer – her wounds have helped her to reassess her life, to provide empathic care, and to facilitate change in others and in self.

The potency of books

Ondaatje expertly weaves the separate stories of five characters together and reading, storytelling and listening play an integral role in facilitating transition for each of the characters. The potency of books is a recurring motif. They are used to transport, distract and remind one of one’s humanity. Almasy, for instance, treasures books the way he treasures his relationship with Katharine: ‘He wants the minute secret reflection between them, the depth of field minimal, their foreignness intimate like two pages of a closed book’ (155). He also uses books to pull Hana back to reality: ‘She would not talk about it. She was distant from everybody. The only way I could get her to
communicate was to ask her to read to me’ (269). Hana, venturing into the crumbling and dangerous library, immerses herself in books as if for the first time. She realises that these narratives can allow an insight into other people’s lives and to hope for a better future: ‘This was the time in her life that she fell upon books as the only door out of her cell. They became half her world’ (7).

She entered the story knowing she would emerge from it feeling she had been immersed in the lives of others, in plots that stretched back twenty years, her body full of sentences and moments, as if awaking from sleep with a heaviness caused by unremembered dreams (269).

Gradually, through the power of story, Hana re-discovers her humanity.

Almasy’s sole possession is his beloved book by Herodotus, and in it he keeps fragments of letters, diary entries, paragraphs cut out of other books and, in the film, it is also where Katharine writes her death bed message to him. He also uses the book as a medium to connect with Hana, and so to support her healing.

Hana listened as the Englishman turned the pages of his commonplace book and read the information glued in from other books – about great maps lost in the bonfires and the burning of Plato’s statue whose marble exfoliated in the heat (37).

It is possible to read this exfoliation, and emergence from a fire, as a reference to Hana herself who is being renewed through her interactions with Almasy. As Baker (2008) suggests, Ondaatje uses this intertextuality not in an explanatory way, but one that invites readers to dig into the layers of meaning in the story and, perhaps, find one’s own reading of it.

**Discussion**

The character of Hana as nurse in *The English Patient* experiences growth from trauma, and is able to use her own woundedness to connect and empathise with her patient. In the process of caring for him in a more present, personalised and compassionate way, she also finds a pathway to her own health and happiness. In this regard, Hana reaches a state of self-actualisation, and her future holds a promise of fulfilment and happiness. This is interesting beyond the novel because it is possible to draw parallels from Hana’s story to reflect on nursing more generally.

Nursing is a profession that relies not just on the competence of clinical skills but also on the ability to empathise and show compassion. However, nursing is also highly stressful and draining of the emotions. It can seem easier to engage with patients in a routinized, objective service, where nurses keep a barrier between themselves and the people they are caring for. In many instances, this is aided by the bureaucratic systems that nurses find themselves working in and the strong cultural practices that can develop amongst nurses where neophytes are admonished to keep their distance from patients. A nurse can enter the profession full of a desire to empathise with, and care for, patients in a compassionate way and then find themselves overwhelmed by the raw and bloody nature their work. In these circumstances, it is easy to give up ideals and seek the security of routine and ritual (Sharp, McAllister and Broadbent 2015).
The idea that nurses can be more effective if they can overcome these obstacles, by connecting with the concept of the wounded healer have been explored by others (Corso 2012; Hall 1997) who have also commented on the barriers that exist between nursing work and the ability to provide compassionate, empathic care for patients. For example, Corso comments, ‘The healing that flows from a clinician who is mindful of her or his own fragility and brokenness is, for many patients, the balm needed to ease suffering, diminish anxiety, and offer solace’ (Corso 2012: 449).

In caring for the English patient, Hana finds her own redemption. War robbed her of her lover and her father, and her confidence that she could find future happiness. Her experiences had left her damaged and no longer whole. She cared for people in a distanced and perfunctory way – a defence mechanism that helped her to get the work done but not be emotionally impacted. But gradually, by engaging with Almasy and learning to share his love of aesthetics, she was able to rediscover beauty and joy, and to care for others in a fully engaged and empathic way. As Haswell and Edwards posit, Hana is able to find refuge in the English patient and in this refuge she is able to find the means to care again about others. ‘It is the patient who draws her back into a human community’ (130).

This insight embodies the universal in the particular, for while this was Hana’s specific experience, her story may resonate for many nurses. Witnessing other peoples’ trauma is a reality of health care work, and becoming vicariously traumatised is a possible consequence. But there is also the opportunity to learn that care-giving can lead to personal transformation. In caring for others, there is a possibility to learn about the self in profound ways, to correct deficiencies and to become more fully human. One way to acquire these insights, is to experience adversity and trauma in care-giving directly, or to learn about them through the examination of well-drawn stories such as The English Patient, and then to notice what unconsciously used defence mechanisms, such as distancing, look like, and what their impact can be on both patients and nurses themselves. Hana, for example, began to feel less human, less fulfilled, guilty and frozen because of the pattern of care that she had developed when working in the army. Recognising the way that Hana transforms, can show nurses that change is possible and beneficial, and that self-awareness can help return a sense of the authentic self, wherein one’s ideals can be reclaimed.

Conclusion

Texts such as the novel and film of The English Patient could be inspirational for nurses if they are given a chance to analyse their metaphors and meaning. It offers the opportunity to connect to a cultural narrative that at once embodies nursing’s struggles as well as illuminates transcendence. Unlike too many other simplistic and patronising depictions of nursing, Ondaatje has portrayed a nurse who is at once flawed and strong, weakened yet resilient, and ultimately empowered. Through studying the particular character of Hana, one gains a window into the challenges and the joys of nursing generally. In the words of Ondaatje, one appreciates that the nurse-patient interaction requires deliberative, careful action, for, ‘Between them lay a treacherous and complex journey. It was a very wide world’ (119). The application of narrative to healthcare is
currently enjoying a well-deserved renaissance – with bibliotherapy, cinematherapy and art therapy oriented towards patient recovery, and journaling and narrative medicine oriented towards clinicians’ wellbeing – but there are still many areas in which creative writing could be applied in the health and sciences to further assist patients, and awaken, energise and inspire people to humanise healthcare practices and approach embedded problems in creative ways. This is the objective of ongoing scholarship in the multi-disciplinary area of nursing and creative writing.

Endnotes
1. See the edition referred to at https://www.bookdepository.com/English-Patient-Michael-Ondaatje/9780747574040
2. See film poster referred to at http://www.imdb.com/title/tt0116209
3. I would also argue that nurses may also see themselves in Hana.

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