Call for Abstracts for Issue 11 (Summer 2021)

Illness, Narrated

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In response to debates considering the relationship between illness and narrative, and the extent to which these concepts can be seen as mutually constitutive, this issue of On_Culture seeks to gather new approaches and critical perspectives to the intricate relationship between narrative and illness. We welcome (inter)disciplinary contributions addressing the concepts’ entanglement on an individual, societal, and global level.

Already in 1963, Michel Foucault linked (illness) narration to its discursive conditions in The Birth of the Clinic. Moving away from the politicized view on what narrative does, medical humanities today stresses the importance, and even healing aspect of telling an illness story. In this positive view on the redeeming aspects of illness narration, identity and narrative are understood as inextricably linked. Rita Charon asserts that narrative is a central instance of good medical practice, since “without narrative acts, the patient cannot himself or herself grasp what the events of illness mean” (Charon 2006, Narrative Medicine, 13). In this broad formulation, ‘narrative’ uncritically refers to the act of self-expression as such, without taking into account the conditions that set the parameters for it.

The scope of narrative has been a central concern of critical approaches to the medical humanities. Scholars like Angela Woods, in taking up Galen Strawson (2004, “Against Narrativity”), criticize the emphasis on narrative in the medical humanities, stating that “it has never been innocent” (Woods 2011, “The Limits of Narrative”, 75). Woods warns against understanding “a person’s narrative or story [...] to be coextensive with their subjective experience, their psychological health and indeed their very humanity” (73). According to Brian Schiff, the focus on narrative reifies a Western, “arguably middle and upper class concept as a universal mode of shaping and articulating experience” (Schiff 2006, “The Promise”, 21). Moreover, historians of colonial and global history showed how those narratives were challenged and contradicted, leading to other conceptions of medical knowledge (e.g. Arnold 1993, Colonizing the Body). Other approaches broaden the concept of narrative, show how stories of illness might “reject the comforts of narrative” (McKechnie 2014, “Anxieties of Communication”, 121), yet still demand to be met with narrative engagement.

Beyond the immediate focus on narrative as illness mediation, the turn to affect in critical theory can prove productive in addressing the autonomy of the body. For the (critical) medical humanities, this opens up space with which to think of the bodily experience beyond narrative and to ask if this is even possible. Furthermore, expanding the scope of narrative beyond literary texts, internet culture, online media, and the increasing use of digital and technological innovations in healthcare can be seen to mediate both health and illness in different ways.
In response to these ongoing debates, we welcome innovative and interdisciplinary approaches in the (critical) medical humanities, narrative medicine, history of medicine, disability studies, narratology, literary studies, historiography, empirical social science, media, television and film studies, and other related disciplines that address how narrative is interlinked with illness experience and medical practice.

Potential topics include but are not limited to:

- Illness/Narrative and self-expression
- Narrative as mediation of bodily experience
- Differences in discussing physical and mental illness
- Narrating about vs. narrating with illness
- Disease classification/taxonomy/nosology
- Illness as metaphor
- Subversive illness narration (e.g. chaos narratives)
- Illness narratives in gender, queer and trans studies
- Non-Western conceptualizations and narratives of illness
- Illness narratives in different media (literature, newspapers, magazines, advertising, television (series), film, games, etc.)
- Online support groups, blogging, confession stories, memes, fora (e.g. Spoonies and Spoon Theory)
- Interfaces of the digital and medical realm (algorithms, digital data, and self-tracking apps)

If you are interested in having a peer reviewed academic article featured in this issue of On_Culture, please submit an abstract of 300 words with the article title, 5-6 keywords, and a short biographical note to content@on-culture.org (subject line “Abstract Submission Issue 11”) no later than September 15, 2020. You will be notified by September 30, 2020 whether your paper proposal has been accepted. The final date for full paper submissions is January 15, 2021.

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On_Culture: The Open Journal for the Study of Culture (ISSN: 2366-4142) is a biannual, peer-reviewed academic e-journal edited by doctoral researchers, postdocs, and professors working at the International Graduate Centre for the Study of Culture (GCSC) at Justus-Liebig-University Giessen. It provides a forum reflecting on the study of culture. It investigates, problematizes, and develops key concepts and methods in the field by means of a collaborative and collective process. On_Culture is dedicated to fostering such engagements as well as the cultural dynamics at work in thinking about and reflecting on culture.
The journal consists of three sections: peer-reviewed academic _Articles, _Essays, and the aforementioned _Perspectives. On_Culture brings new approaches and emerging topics to the (trans)national study of culture 'on the line' and, in so doing, fills the gap ____ between 'on' and 'culture.' There are numerous ways of filling the gap, and a plurality of approaches is something for which the journal strives with each new issue.

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