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Cancer Discourse and its Psychocultural Landscape in Kerala

Abstract

Derisively contending the collective global medical attempts, cancer has become the second largest contributor to human mortality. Having been cathected with many a cultural affect, the disease has accrued mythical proportions. The collectively sanctioned cultural taboo of the disease has led to treating it in a quasi- religious and mythological mould. Despite the declared scientism of the twenty first century, people seem to be resorting to a hyper metaphoric parlance when addressing the disease. This paper attempts to scrutinize this exuberant allegorization and metaphORIZATION of the disease in spite of the ardent scientific ambience of our era. Kerala, in spite of being a postmodern society sharing international development indicators, is no exemption. All the different cultural discourses that shape our

everyday reality narrate the disease in an implicit allegorical register resulting from a metaphysical hangover. As a result the patient suffers a collective ostracization of the society. What we need instead is a secular and scientific treatment of the disease bereft of hyper-metaphorization, befitting our era. Cancer should be addressed primarily as a pathologic corporeal condition and the patient must be perceived as a medical subject. This would free the patient and the community of their superfluous emotional baggage and symbolic myth making.

Keywords: Cancer, Discourse, Metanarrative, Scientific turn, Allegory, Metaphor, Post metaphysics

Our century is paradoxically at a catastrophic juncture of a fatal interface between the acme of wellness and the trauma of illness. Despite the collective global effort, various diseases have been lurking at the development horizon of humanity. Among them cancer has been blockading our will to steady progress and corporeal mastery. Perceived as a grave disease from the strictly medical discursive point of view, cancer impinges on all the other narrative contours of our reality in multifaceted ways. This paper attempts to see into the culturally manufactured symbolic effect of the disease on our lived reality. Apart from being a corporeal trauma, the disease has of late metamorphosed into a collective cultural taboo, often leading to symbolic ostracization of the patient.

The intellectual and cultural history of human epistemology has passed through various paradigmatic 'turns' which have kept reschematizing the spatio-temporal everyday reality for us. The scientific, the linguistic, the ethical and the posthuman are some of the pivotal 'turns' or intellectual junctions that have redefined our broader conceptual platform. The present era (from the broader cultural and philosophical perspective of medical advancement) can be rightly termed 'the wellness turn.'

The natural and medical sciences have been progressing by leaps and bounds ever since their cultural catapult by the Copernican Revolution. The scientific spirit inaugurated by the Renaissance freed humanity from theocentric and mythological epistemology. Anthropocentric agency got restored. Man, the metaphysical being receded, and man, the physical being, became the cruxes of human enquiry. The ‘secrets’ of the human body were ‘discovered’ by scientists and biologists. New vaccinations and remedies were invented. Many of the diseases and epidemics were brought under control. The two World Wars took the immune-centred biological experimentation to its zenith. By the twenty first century man has travelled a long way in his corporeal and cosmetic advancement with the help of medical sciences.

This century may rightly be termed the century of wellness as far at least as the developed hemisphere of the globe is concerned. Man seems to have achieved the acme of well-being with medical assistance. Average life expectancy has increased and mortality rates have come down. Discourses of genetic engineering and Artificial Intelligence reveal the potential trajectory the wellness regime would eventually take. The World Health Organization’s famous 1948 definition of health as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity” gave it a wider radius of application. Gradually, instead of ‘health’, the term ‘wellness’ began to accrue wider currency in cultural discourses, for it has a broader affective possibility in human narratives.

By the 1950s ‘wellness’ was given a multi-dimensional and concrete definition by Halbert L. Dunn, the American physician (known as the father of wellness), and this wellness movement soon spread across the globe corresponding with the cultural tempo of postmodernism. The late capitalist cultural landscape of the world with its ethos of globalization widened the basic clinical notions of health and dovetailed both the clinical and

cosmetic needs under the wellness discourse. Thus, along with hospitals, the late capitalist market-centred culture industry as a whole began to modulate the condition of wellness.

When older pestilences like leprosy, cholera, tuberculosis, etc. were obliterated by the medical regime, newer threats appeared on the wellness horizon of humanity. So wellness cannot be discoursed as a condition or state; rather, it must be reconceptualised as a continuum with respective cultural peculiarities in the typical medical parlance. The two threats that have challenged the saga of the successful medical journey of humanity in the modern period are AIDS and cancer. The former appeared in the medical arena in the 1980s and assumed mythical narrative proportions by the 1990s and 2000s, and was almost bridled by the first decade of the twenty first century.

Cancer is the second biggest cause of human mortality, the first being cardiovascular diseases. The oldest cancer case was reported at least as early as 1500 B.C. In India one million people are diagnosed with cancer every year. Statistics shows that soon Kerala will emerge as the cancer capital of the nation with at least one hundred people being diagnosed with cancer every day. With the rapid increase in cancer cases, the disease has brought an unprecedented urgency in this new dimension of the wellness discourse. This paper attempts not a clinical analysis of cancer, but a scrutiny of how this new mode of cancer discourse has been effecting a paradigmatic change in the psychocultural landscape of Kerala. Beyond all statistical details, cancer has been effecting a new area of discursivity in the Foucauldian sense. Sara Mills summarises the Foucauldian term discourse thus:

In considering the term 'discourse' we must remember that it is not the equivalent of 'language', nor should we assume that there is a simple relation between discourse and reality. Discourse does not simply translate reality into language; rather discourse should be seen as a system which structures the way that we perceive reality. (55)

Cancer has been evolving as a new mode of discursivity in the cultural landscape of Kerala of late. Any discourse gets institutionally sanctioned as a commonsensical reality through a number of cultural apparatuses. In the late capitalist era it is the market that ideologically shapes the modality of these apparatuses.

Kerala, with its highest health index in India, posits a curious case in the wellness map of the country. On the one hand we boast of having achieved ‘international standards’ in health and well-being, but on the other hand a ‘fatal’ disease like cancer has been denting the colourful contours of our achievement. This appears to be a searing contradiction in Kerala’s cultural history of wellness. When most of the popular wellness discourses narrate wellness in cosmetic terms, this ‘serious’ threat is not addressed with adequate objectivity and urgency.

The entire discursive corpus, with the assistance of cultural institutionalisation, has been effecting a new industry in Kerala—the cancer industry (used here in the Adornoian fashion of ‘culture industry’). The cancer industry is a novel cultural trend sanctioned by the entire wellness dispositif of the state—both scientific medical assistance and non-scientific cultural narratives.

When cancer becomes a new industry, plentiful discursive assistance goes into conferring it a commonsensical status. Cultural narratives are the chief among them. According to Roland Barthes narratives use different codes to effect their meaning. Some of these codes are semic code, the symbolic code and the cultural code. These codes are significant in describing the effects of the cancer discourse. Terence Hawkes defines these codes thus:

The semic code: This is a code of connotations which utilizes hints or ‘flickers’ of meaning... generated by certain signifiers....This code deals to a certain extent in what Anglo-American criticism familiarly thinks of as ‘themes’ or ‘thematic structures.’

The symbolic code: This is the code of recognizable ‘groupings’ or configurations, regularly repeated in various modes and by various means in the text...

The ‘cultural’ code: This code manifests itself as a ‘gnomic’, collective, anonymous and authoritative voice which speaks for and about what it aims to establish as ‘accepted’ knowledge or wisdom.... (95-96)

Everyone makes use of these codes in the analysis of one’s cultural text. Having been interpreted and reinterpreted inside such a hermeneutic matrix, cancer has achieved a trans-disease signification and that is metaphoric and largely allegorical in the Kerala context. This allegoric affect associated with cancer has taken the disease into very surreal proportions in the collective public fantasy. The word ‘cancer’ has itself become a cultural taboo.

Allegories were popular in the medieval religious narrative paradigms. They suited the church (which always relies on transcendental reference points) as the best literary medium to convey its celestial messages. The traditional definition of allegory is that it is a figurative narrative conveying a veiled moral meaning, usually connected with heaven, hell and salvation. Diseases, too, in the traditional religious viewpoint, have been allegoric inscriptions on the concrete corporeality usually interpreted in the sin-curse dialectic models. Allegories are actually extended metaphors whose capability for comparison goes very deep and they can create a different literary and cultural landscape. Medieval religious allegorization of reality was intended to erect an other-worldly epistemological foundation based on afterlife. Diseases were usually read as corporeal inscriptions by divinity with a larger cause. This allegorization prevented the diseases from having a scientific approach towards them. Treatments normally relied on consulting the great divine physician. With modernity and the scientific turn things changed and medical assistance was sought for treatment. The postmodern turn with its immanent epistemology brought about an altogether different approach to the body and diseases.

The Kerala society is postmodern only in its cultural and economic symbolic markers. In sensibility it does not correspond to the postmodern credo of the 'postness' of all foundations like God, truth, history and man. The 'post' prefix in postmodernism implies the specific intellectual and secularly cultural atmosphere characterised by a conglomeration of collective affects resulting from an overall epistemological landscape left with the feelings associated with post truth, post metaphysics and the post human. The essential feeling of postmodernism results from such an intellectual atmosphere. Kerala's collective sensibility has not 'grown' into such an 'advanced' stage in its every day intellectual outlook. As a result the postmodern turn in our culture scape is manifested in material development only.

It is in this 'post' intellectual landscape that scientific and secular detachment becomes possible. A disease like cancer in Kerala carries a lot of the ancient allegorical remnants even today. In other words, the word 'cancer' is cathected with 'larger than disease' affects. At least in the remote sense the disease has trans-corporeal dimensions in Kerala's cultural space as Susan Sontag has aptly noted in her 1978 work *Illness as Metaphor*:

Punitive notions of disease have a long history, and such notions are particularly active with cancer. There is the 'fight' or 'crusade' against cancer; cancer is the 'killer' disease; people who have cancer are 'cancer victims.' Ostensibly, the illness is the culprit. But it also the cancer patient who is most culpable. Widely believed psychological theories of disease assign to the luckless ill the ultimate responsibility both for falling ill and getting well. And conventions of treating cancer as no mere disease but a demonic enemy make cancer not just a lethal disease but a shameful one. (57)

So in Kerala's wellness landscape cancer has been discoursed as 'the disease.' It carries a compendium of traditional and medieval affects inappropriately associated with diseases and most of them have resulted from larger than life and hyper romantic religious representations

of diseases chiefly from paintings and literary narratives that interlock tropes of disease and death, culminating in the affects of the gray, the gloomy, the gaunt and the sequestered.

The exorbitance of the metaphoric sense of the disease prevents people from discoursing it publicly. A lot of euphemisms are prevalent to refer to cancer, and a disturbing reticence, collectively approved of by the public, exists around cancer. All the discourses of cancer abound in furtive stylistic. The public stigma of cancer is the result of the premodern religious remnants that the Kerala culture carries even in the twentyfirst century's secular space where the international scientific discourses are filled with discussions on Artificial Intelligence, cryonics, euthanasia and genetic engineering.

The disease creates, soon after diagnosis, a gloomy and allegoric overall aura around the cancer patient as a 'victim' of fate, God, circumstance or her/his personal hamartia. The 'unscientific' outlook of the public casts either a victimising or a sympathising glare at the patient and the 'victim' suffers from a collective cultural ostracization, making her/him almost 'invisible' in the mainstream. Accusing the journalese of an unfair use of the term cancer in a metaphoric sense to refer to crimes and scams (e.g. *We will remove the social cancer of corruption.*) *The Hindu* Readers' Editor quotes the oncologist Dr. Shanta in *the Hindu*:

There are too many myths and stereotypes about cancer. These add to the confusion and dilemmas of a cancer patient. It extends to the family and friends of the patient. The mindless use of the word cancer to denote a wilful act of crime is unfair to the patients because it tends to induce guilt where none is required. The irrelevant use of the term perpetuates myths about the illness. (Paneerselvan11)

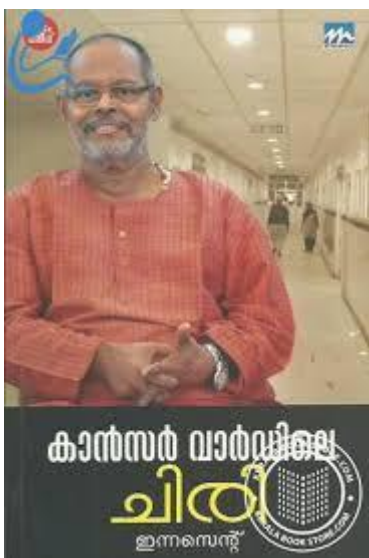
The bogus postmodern psyche of Kerala still carries many mythical and religious burdens of the past. Unless we demythicize cancer, the disease will not be freed from the unfair shackles of allegorization and metaphorization.

Cancer discourses have also been evolving a new dimension of industrial paradigm in Kerala with the late capitalist market manipulating the cancer semiosis. Cancer becomes the cover story of all the leading health magazines now and then. Given below are two examples:

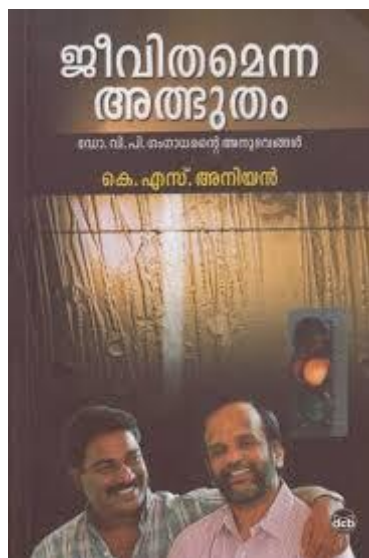


Cover pages of two leading Malayalam health magazines with cancer cover stories

An entire corpus of publications (autobiographies, memoirs, survival stories, doctors’ diaries, philosophy of cancer, etc.) has redefined the public discursive trajectory of cancer. Given below are the titles of certain famous cancer-centric books that have etched a novel dimensional niche in our publication paradigm. Cover pages of some of the well known cancer-related books both in Malayalam and English are given below:



(Cancer Wardle Chiri)



(Jeevithamenna Adbutham)



(Oru ArbudaKadha)



Cancer survivors have been accorded legendary status of super heroes emanating and representing will power, tenacity and endurance—key words in oncologic treatment parlance. The representation of cancer patients and cancer survivors in such problematic polarities affectively influence attitudinal changes of the society collectively. Note how a steel company markets the affective survival value of Mamta Mohandas, famous Malayalam actress and cancer survivor in its advertisement as shown below



Actor Mamta Mohandas in the Bharathi TMT steel advertisement.

while the ‘victims’ are usually termed as ‘losers’ in the battle against cancer. The recent anticancer campaign launched by Kerala too is not free from the metaphoric dimension. The images below are related with the anti cancer campaign of Kerala:



All these discursive modes take cancer away from the narrative ‘purity’ of scientificity and allow it to wallow in the metaphoric superfluosity of mythical discursivity without ever directly hitting the disease.

Conclusion

All our anticancer campaigns, cancer day observations and hospital advertisements—the entire cancer discursive arena need to be purged of its allegoric proportions and cancer needs to be addressed as a corporeal condition whose definition should conform to a non-transcendental discursive immanence. A scientific detachment is required by all when addressing cancer. The cancer discourse should conform to the ethical fabric of a developed (not only materially) and secular sensibility.

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2018. <https://i.ytimg.com/vi/uARP3jPHZLQ/hqdefault.jpg>.

Images of the Cover Pages of Cancer related Books. Digital image. 12 March, 2018.

<https://www.google.co.in/search?q=cancer+related+books+google+images+malayalam&source=lnm>

[ce=lnm](https://www.google.co.in/search?q=cancer+related+books+google+images+malayalam&source=lnm)

s&tbm=isch&sa=X&ved=0ahUKEwi4qu72upHcAhWLPY8KHg1BYYQ_AUIC.

Mamta Mohandas in Bharathi TMT advertisement. Digital image. 8 March,

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