

Wisdom in the End: Folktales and Narrative Technique in End-of-Life Palliation

By Henry Sussman and Jeffrey Newman

1.

The silver lining to the encroaching disaster of death is the potential for clarification, focus, even simplification in life's final stage. Among the most necessary preparations for a quintessential experience--as much an adventure as a tragedy--are an *accounting*, in retrospective as well mathematical senses, of the dominant motifs, the patterns of accomplishment and contribution, stemming from a life well-spent. What might also emerge at this transformative moment is the *wisdom* that infused this particular life; tenets of living as a practice that will survive an end-of-life patient as her most personal legacy.

As participants in these events, we are fortunate that world culture has generated entire literatures whose driving force is precisely the clarification, the gravitation toward the major themes of living wisely, and the accounting of opportunities fulfilled and, in some cases, lost. We propose that patients' confrontation with encroaching death is a life-event whose structure shares much in common with the world classics of children's folklore: the encounter with an invincible opponent; a summation of the crucial events and portents that came before; the transformative potential that the deadly foe may in fact be an intimate friend; the dreaded disruption may lend peace and resolution. Through an analysis of "Godfather Death" by the Brothers Grimm and the Papuan folktale, "How a Man Found his Wife in the Land of the Dead," we hope to illustrate the multifaceted benefits, in palliative treatment, of drawing upon relevant children's classics; in highlighting the *narrative* resources available both to caregivers and to the process of dying.

The primary component to this literature is of course folktales. The Fairy Tales of the Brothers Grimm loom large here, but this wider cultural project in no way stems exclusively from the West. Valerie Gribben, a practicing physician, opined in the June 30, 2011 edition of the New York Times, "Fairy tales are, at their core, heightened portrayals of human nature,

revealing, as the glare of injury and illness does, the underbelly of mankind. Both fairy tales and medical charts chronicle the bizarre, the unfair, the tragic. . . . The Grimm fairy tales once seemed as if they took place in lands far, far away, but I see them in regular hospital rotations. I've met the eternal cast of characters. I've taken down their histories." Fairy tales from a vast range of cultures are indeed stripped-down epics; they are of powerful edification and illumination to far more than children. Indeed, while other narrative forms may be longer on realism, dramatic complexity, and entertainment value, the children's classics exist at an extreme in the degree to which they are informed by that intangible known as wisdom.

Fairy tales reside in a cultural annex to medical treatment; in their basic architecture, they lead their protagonists into one or more "centers of enchantment," imaginary environments or zones so absorptive that we would attribute to them, in an age dominated by cyber-technology, the features of virtual reality. The most vivid of the folktales transport us into the midst of a virtual zone that, as J. Hillis Miller points out, is accessible to all who "reach" it through reading.¹

What we would wish for our patients and loved ones facing death is transport into the central "zone of enchantment" at the heart of *their own* life-story; a story that becomes a parable when its utterly singular details and nuances, are transformed into a *lesson* at the service of *their* loved ones and survivors. Traditional fairy tales and folktales confronting the theme of death present us with an indispensable resource in the endeavor of assisting dying patients to crystallize the definitive life-narratives that they most need at this juncture.

Another dominant feature of the folktale distinguishing it from other literary forms is its obsession with numbers. Fairy tales keep meticulous tabs on the accounts: the number of impossible challenges to be met in order to receive special dispensation; the number of siblings cursed with a debilitating transformation, from which they *must* be saved. These are not "magical numbers." This is a mathematical purview on the realm of possibility. When death emerges as a definitive prognosis in a patient's medical history, there is every motivation on his/her part to go about a *lifetime accounting* of achievements, goals, and even experiments. In this summative aspect too, the end of life narrative takes on the tenor of a folktale.

Reading stories out loud to dying people is an exemplary deployment of time rendered even more precious in its evanescence. Embedded in the act of reading out loud is the familiar intimacy of having been, at the earlier extreme of the life-cycle, inculcated into language and

the most universal social codes by those nearest caregivers and parenting ones. The intimacies of voice contact and one-on-one imparting the material transform the “scene of reading” itself into a Winnicottian “holding environment.”²

Yet even more apropos to the deployment of narratives in end of life situations is fairy tales’ uncanny compression or parsimony, their fragmentation, rapidity of pace, violation of spatio-temporal boundaries, and incorporation of violent and other incommensurate acts within seemingly commonplace frameworks. All these “classical features” of the genre are of pointed relevance to the partnership between the dying and their “helpers” in the shared task of resolving life stories. (Note that “helpers,” those who, whether productively or counterproductively, ally themselves with the protagonists of folktales, are quasi-universal, pivotal features of the literature in Vladimir Propp’s structuralist treatment, Morphology of the Folktale).³

2.

The Grimms’ “Godfather Death”

Like so many of the classical fairy tales, “Godfather Death” is a numbers game. The birth of a thirteenth child, a son, is the straw tipping an already poor man, into bankruptcy. The search for a godfather, the conventional way that society encourages non-genetic additions (or supplements) to a family, becomes critical in this situation. The absurd premise that Death would join an earthly family in the benign role of godfather makes perfect sense in a sequence in which first God and then the devil have also been interviewed for this role.

The heart of this story is the irresistible impulse on the part of a doctor initiated rather than trained in his *métier* to “outwit” death and spare a patient whose number is up. The doctor’s pushback against his patient’s mortality is unmitigated, even though Death, his improbable godfather, has been his mentor. This is the powerful “hook” that the fairy tale holds out to clinicians and patients alike. The tale’s introductory segment, the quest sequence, allows the aggrieved new father both to castigate a God who allows cruel socio-economic disparity to persist, and to reject the radical evil of the devil for “deceiv(ing) people and lead(ing) them astray.” Yet Death reaches a devil’s bargain with his new protégé:

When the boy was old enough, his godfather appeared one day and told him to come along with him. He led him into the forest, showed him an herb that grew there, and said, “Now you shall receive your christening gift. I’m going to make you into a famous doctor. . . . If I stand at the head of the patient, you can firmly declare that you’ll make him well again. . . . However, if I stand at the feet of the patient, he’s mine. . . . But . . . don’t use the herb against my will!”⁴

In the bargain that he imposes upon his apprentice, Death makes an absolute case for his discretion in all matters related to life and death. He holds out explicitly for “his” own inevitability, regardless of the degree to which it may be acknowledged. By means this pact, the thirteenth child has undergone a fortuitous reversal in fortune. He has “inherited,” without the ardors of training or apprenticeship, the status and role of a medical doctor. These dies all cast, “Godfather Death” launches into the trajectory of what Propp would call a “helper’s fable.” Everything in the tale now hinges on the degree to which the protagonist, the lucky doctor, either accepts or rejects the assistance of his “helper,” here the figure of Death.

Death, who winds up as the unwanted boy’s protector, is not without his own diabolical features. Yet he is also a legalistic figure, asserting his prerogatives and establishing ground-rules, enforcing mortality. What lends the tale its drama is the almost inevitable test case introduced by the son. For in the end, the doctor, taking in his youthful patient’s beauty, succumbs to sentiment.⁵:

He should have recalled his godfather’s warning, but he was swayed by the great beauty of the princess and the happiness he envisioned having as her husband. . . . Death gave him angry looks, raised his hand, and threatened him . . . but the doctor refused to take notice. Instead, he lifted the sick maiden . . . and gave her the herb. Immediately, her cheeks flushed red. . . .

When Death found himself cheated out of his claim a second time, he strode up to the doctor and said, “It’s all over for you!” (The Complete Fairy Tales, 150)

In this passage, the ethical as well as dramatic conflict comes to a head. The tension created by the travesty of impending death, especially when the death-scene is colored by emotionality, is both no-holds (and expenses) barred intervention and stoic resignation. Reversing the dying princess’s position so that death stands at her feet, not her head, is nothing less than a desperate measure. The prescription of contraband medication is outside its

producer's protocols (even when the inventor is Death). The tale thus places the downbeat on a sober, philosophical acceptance of death. It has also furnished evidence of the toll that death takes on its bystanders. What the story has "delivered," if anything, is a dose of wisdom: this is the palliative it offers.

3.

"How a Man Found His Wife in the Land of the Dead"

Then said the man, "How can I leave thee when I have but now found thee?"

"Ah, my lord, answered his wife, "of a truth thou must not linger here. Yet if thou wouldst see me once more go now, and after three nights are past again come to me, and I will be here."

Then the man, after she had thus spoken, rose up to go. But on the way he stayed to pick coconuts, and scented herbs, and wild limes, that he might show them to the people of Uruam. And as he thus did, the Dead saw him and made haste after him in great numbers, and seized from his hands [what he had culled]. . . . And when he had come up to the face of the earth, the Dead closed the hole with a great stone that no man might lift.⁶

The Papuan folktale, "How a Man Found His Wife in the Land of the Dead," also comes down on the side of accrued wisdom, with the circumspect and restraint attending it. Terminal patients have to cope with a jarring "change of status" affecting the most fundamental dimensions of their existence, the fundamentals of their self- and public identities. They also face an immanent housing crisis. In so many instances, they have already lost their customary homes, and now face eviction from these provisional addresses.

Scientists and thinkers hailing from the "technologically advanced West" have been well-aware, at least since Claude Lévi-Strauss's "The Science of the Concrete,"⁷ of the sheer mass of important empirical data—in the areas of material science, pharmacology, zoology, botany, geology, astronomy, and climatology, to name a few—by so called "primitive" societies and communities. As Lévi-Strauss establishes in "The Science of the Concrete," what indigenous cultures have achieved in the way of science is notable; what distinguishes their

findings and applications from procedures of full-blown Western science inheres in the *conceptual operating systems* with which they process the data.

In this context, a Papuan folktale serves as a superb literary resource: 1) as an allegory of death, poetically acclimating survivors as well as the dying to the momentousness of the impending transformation; 2) as a showcase for the resilience of a human wisdom approaching universality. Death thus relinquishes some of its apocalyptic cast. 3) The tale begs to be shared out loud.

The dogged refusal of the survivor in “How a Man Found His Wife in the Land of the Dead” to accept his wife’s loss is familiar to anyone who has been exposed to the parallel underworld journey by Orpheus in the Greek myth. Once again, tarrying in the land of the Dead assures the protagonist’s demise. Yet the distinction of the Papuan tale is its pitched attention to the boundary between the lands of the Living and the Dead. It is a threshold tale about threshold (transitional) states and spaces.

Then said she, “Thou art not dead. Wherefore hast thou come hither?” And when he told her how it had befallen him to find the hole in the earth, and that he had followed his dog, she said, “Hold thy dog closely, lest he go after the bones of men, which he lie upon the ground, and come thou with me while I hide thee, for it may be that the Dead will slay thee if they find thee here.” (“How a Man . . . ,” 473)

The tale is wrought with conflicting messages about the spaces and rhythms of life and death. In some instances, say the diurnal cycle, the divisions are clear: decisive manifestations of death by day, bleached bones on the earth, become a dance macabre by night. The Dead will make short shrift of the despairing husband if he is discovered “on their property” alive. Yet the very portal by which the husband gains entry to the land of the Dead, is, in Winnicott’s terms, a transitional space.⁸ It is a gaping double-message regarding death’s finality or its merely provisional character.

Even the simple matter of their address, their habitation—both in immediate and long-term duration—is an excruciating question for the dying. In the picturesque fashion with which the tale broaches the landscapes of the lands of the Living and the Dead, the ambiguous portal between the two, and the contrast between earthly probity and demonic otherworldliness, it places its own mother lode of wisdom at the service of the irresolvable conundrum of approaching death.

4.

Hope and Wisdom

Fairy tales and folklore may help ourselves and our patients be as awake, aware, mindful, deliberate, literate, and articulate as possible as we encounter the end of life. Folktales encompass the episodic stages of dying, capture the epic dimensions of this transformation, and articulate the terror and the beauty infused into death's prospect. In structure and imagery, they demonstrate an inherent affinity with the momentous disruption and dislocation of death.

Within the compass of folk-literature, the encroachment of death inspires an appeal and recourse to a science of a different order--a "science of wisdom." This phrase is not as odd as it may seem: since the nineteenth century in the German academy, the overall rubric for the Humanities has been the *Geisteswissenschaften*—the *sciences* of soul or spirit.

The wisdom consistently generated by memorable folktales in their terseness and artful design goes hand in hand with the hope available even under dire circumstances, in end-of-life situations. As Victoria McGreer wrote in her 2004 "The Art of Good Hope": "For instance, a terminally ill patient may give up on the hope of prolonging his or her life, only to invest this energy in meeting the challenge of dying well—with courage, say, and at peace" (109).⁹ McGreer distinguishes a "responsive hope," one grounded in a community of caring and personal interactivity both from "wishful" and "willful" varieties: the former hostage to unfulfilled desires and the latter the expression of a persistent personal agenda. Interestingly, McGreer's "data-base" for a viable hope at the end of life is, like our own, literary. Her examples of recompense and amelioration are drawn from the tapestry of George Eliot's Middlemarch. We extract a practical wisdom of particular relevance to the end of life from much briefer literary "samples"--with the aim of involving patients intensively in their evolving life-narratives.

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- ¹ J. Hillis Miller, Literature as Conduct (New York: Fordham UP, 2005), pp. 162-6.
- ² D. W. Winnicott, Playing and Reality (London & New York, Routledge, 1982), 150-1, 191.
- ³ Vladimir Propp, Morphology of the Folktale (Austin, TX: U Texas P, 1968), pp. 39-40, 43-5, 48-50, 55, 79-81.
- ⁴ The Complete Fairy Tales of the Brothers Grimm, trans. and intro. Jack Zipes (New York: Bantam Books, 1987), p. 150.
- ⁵ European fairy tales are notable for the cat-and-mouse game they play with established Western religion. Formally, they may cast themselves as “secular” artifacts, but Biblical values and even characters often lurk just beneath the surface. The values toward death put forth in “Godfather Death” run the gamut of the three major monotheistic world-religions, Judaism, Christianity, and Islam—often identified as the *Abrahamic faiths* in reference to the patriarch they share.
- ⁶ “How a Man Found His Wife in the Land of the Dead,” in Favorite Folktales from Around the World, ed. Jane Yolen (New York: Pantheon Books, 1986), pp. 473-4.
- ⁷ “The Science of the Concrete” is the inaugural chapter of The Savage Mind (Chicago: U Chicago Press, 1962). See, especially, pp. 15-25, 30-3.
- ⁸ With respect to Winnicott’s definition of transitional space as the locus common to the dialectic of illusion and disillusionment in “good enough mothering,” to the back and forth of play, and to a psychoanalytical regimen making room, playfully, for the patient to co-author the agenda, see Playing and Reality, pp. 18-9, 55-6, 71-2, 135-6.
- ⁹ Virginia McGreer, “The Art of Good Hope,” Annals of the American Academy of Political and Social Science, 592 (March, 2004), pp. 100-27.

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Henry Sussman received his PhD in Comparative Literature from Johns Hopkins University in 1975 and taught Comparative and German Literatures at universities including Johns Hopkins, SUNY Buffalo, the Hebrew University of Jerusalem, Rutgers, and Yale. At Yale, he evolved a course in German fairy tales out of his interests in critical theory, philosophy, psychoanalysis and cybernetics. His books on literary criticism and theory include: Playful Intelligence: Digitizing Tradition (Bloomsbury, 2014); The Task of The Critic (Fordham, 2005); The Aesthetic Contract (Stanford, 1997); Afterimages of Modernity (Johns Hopkins, 1990), and The Hegelian Aftermath (Johns Hopkins, 1981).

Jeff Newman is a Professor in the Institute for Health & Aging at UCSF. Trained in Preventive and Internal Medicine, his previous positions were in the US Public Health Service, the California Medicare Quality Improvement Organization, and Sutter Health. Current research and community project foci are advance care planning, medical ethics, and the arts. He also writes stories about clinical epiphanies.
