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"Of Death, Dying, and Disease: The Short Story and American Heterotopian Illness Narratives"

Social cultural constructions of illness as a deviation from the "norm" of health already imply an Othering that presupposes an accepted and powerful center and a displayed margin in a socio-political entity. Parallel to illness as health's Other, one might argue that the short story is the novel's Other. Being frequently considered a marginal literary genre or "underrated art" (Gullason), or even an apprenticeship work of a writer (cf. Thomas A. Gullason's counterarguments) before entering the literary field as a novelist in the 19th century, the short story, however, became a rather central genre toward the late 19th century because of increasing industrialization, (im)migration movements, improved printing technologies, and a much larger distribution of more and more magazines. Charles E. May and other critics have argued that "as soon as a culture becomes more complex, brief narratives expand to reflect that social complexity. . . . the short story seems to thrive best in a fragmented society" (*The Short Story* 13). However, associations of marginality and liminality, thus of an "ex-centric" position (Hutcheon 17) of the short story, have been perpetuated until today and further enhance the genre's potential for subversion (cf. Birkle 78-79).

Therefore, the genre is an ideal space for the representation of illness and death in their manifold manifestations. The brevity of such tales make a condensed and concise representation necessary, and, therefore, the location of illness is highly symbolic and full of ambiguity by definition. Thus, in 19th- and early 20th-century stories, we find hospitals, gardens, nurseries, abbeys, laboratories, and camps as spatial heterotopian embodiments of illness and death. These locations share the qualities of enclosure, displacement, and confinement to which access is a privilege that needs to be granted by authoritarian figures of political (e.g., princes), and medical power (e.g., doctors). In this sense, Edgar Allan Poe's "The Masque of the Red Death" (1842), Nathaniel Hawthorne's "Rappaccini's Daughter" (1844) and "The Birthmark" (1843), Louisa May Alcott's *Hospital Sketches* (1863) and "The Brothers" (1863), Charlotte Perkins Gilman's "The Yellow Wallpaper"

(1892), and Ernest Hemingway's "Indian Camp" (1930), to name but a few, negotiate power structures in gender and ethnic terms and use the illness heterotopia to criticize social and discursive constructions of Self and Other via the dichotomy of health and illness.

Furthermore, the stories also explore, in the terminology of Sigmund Freud, the repressed, mostly the collectively repressed, which often returns or emerges at unexpected moments as the uncanny which is perceived as the repressed Other of Self. Furthermore, it is the hubris of these "doctor figures" which is questioned, undermined, and criticized. In short stories, I would argue, the collective fear of the return of the repressed is symbolically represented. Therefore, as Klaus Lubbers also points out, the short story was probably the most subversive genre in the 19th century "because of its parabolic character. A distributing or disruptive thought could be cloaked by the orderly course of a brief narrative" ("Understanding" 244).

The intrusion of the uncanny or the semiotic, according to Julia Kristeva (cf. *La Révolution* and *Desire in Language*), into the symbolic realm disrupts traditionally accepted - even though constructed - powers and authorities from below the surface and almost always leads to a change in perception or even, as the stories to be discussed in my paper will show, to madness and/or death. The liminality of short stories allows for a critical reevaluation of death, dying, and disease through the representation of the return of the uncanny in/of American society.

Works Cited

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