

Full Length Research Paper

Telling Stories in a World That Doesn't Fit Them: Michael Ondaatje's *The English Patient*

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This paper explores the tension between the human need for the form of story and the lack of structure in reality, and how such tension is presented and dealt with in Michael Ondaatje's *The English Patient*. Proceeding in a fragmented, discontinuous, and cyclical narrative pattern, this late-twentieth-century postmodern novel shows no intention to tell a coherent, structured, meaningful story but confronts its readers with the ways in which human beings make sense of the world and construct their knowledge of reality. However, instead of turning his novel into an unreadable chaos, Ondaatje endeavors to establish a new model of storytelling, or of fiction-making, that can not only satisfy the human desire for a "comfortable" story but also be true to the non-narrative, unstructured essence of reality as it is experienced in real life. Thus, although readers of *The English Patient* are likely to get lost in the non-sequential and strange orders of reading, they can still rely on the unique connection and coherence skillfully imposed on the seemingly fragmentary and repetitive narrative discourse of the novel to piece all the fragments together themselves and get a more and more understandable picture of what has actually happened in a world that does not conform to the straightforward progression of a beginning, a middle, and an end.

Key words: Storytelling, reality, postmodern, narrative techniques.

INTRODUCTION

Living in a world where things usually "just happen" without displaying any sort of coherence or a meaningful sequence, human beings often rely on the power of storytelling to turn chaotic or fragmental life experiences into well-made stories with proper beginnings, middles, and endings, that allow them to revisit, reconstruct and make sense of the events in the past. Since life is not like "a (Western) drama of four or five acts," and the present is "invisible" to us, we can't always tell whether an event is starting or ending, or whether it is important or not

(Minh-ha 1989: 144). To find order in the midst of confusion and chaos and explain to ourselves and others what was going on and why, we all, consciously or unconsciously, want to become the storytellers of our lives and look for "definitive meanings" and "singular interpretations" in the telling of stories about the past events that actually possess a lot of gaps and discontinuities (Novak 2004: 212). However, since the materials of our stories do not offer themselves in the form of story, when we impose plots and values upon real events in

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our well-shaped stories, as William Cronon warns us, all we do is just to “force our stories on a world that doesn’t fit them” (Cronon 1992: pp. 1368).

Frank Kermode’s book *The Sense of an Ending* (1966) expounds the dissonance between the humanly needed form of story and the lack of structure in reality or human experience and why it is so difficult to deal with such dissonance in literary works of fiction. According to this eminent literary critic’s theory of “fictions of the End,” we were all born and will die in the midst without seeing the beginning and the end of “a world which is not our own,” and our “existential pressures” or “anxieties” coming from “our spot of time in the middle” lead to our “persistence” of “coherent fictions,” whose endings are in concord with their beginnings, for they allow us to know “the shape of life” and make our moments of standing in the midst become tolerable (4). The problem, as Kermode argues, is that when we try to “make our own human clocks tick in a clockless world,” we inevitably change the past events themselves as well as the relations between them (135). He claims that since the reality we experience as we live in this “endless” and “shapeless” world is actually “discordant” and “contingent,” the plots or forms that constitute the basic paradigms of “fictions of concord” can only give us “false consolation” because they have no concord with our sense of reality (166).

Kermode further uses some unconventional, experimental modern novels such as Alain Robbe-Grillet’s *Les Comptes* and Sartre’s *La Nausee* as examples to explicate why their authors’ attempt to fully represent the formless, contingent reality by banishing form and order altogether have actually created “some sort of chaos” that destroys the novel itself (138). Dissatisfied with “fictive concords with origins and ends” that are too “fully explanatory” and “consoling” to be found in the real world, these modern novelist-storytellers have tried to use or experiment with “dazzling” devices and stratagems to make their novels become “the mimesis of pure contingency” in reality (132). However, as Kermode argues, their great efforts to expel beginnings, ends, connections, concordances, development, potentiality, or even characters from their “realistic” novels end up turning these novels into “nothing but a discontinuous unorganized middle” that no one could ever read (140). Their failure to create a new genre where fiction and reality can be brought together not only proves that some sort of balance between the form of story and the contingencies of reality should still be achieved but also shows how difficult it really is to “relate one’s fictions to what one knows about the nature of reality” (133).

Many postmodern novelists have also noticed the dissidence between the form of story and the contingent reality and tried to look for alternatives to conventional well-shaped narrative forms. This paper will use Michael Ondaatje’s *The English Patient* as a prime example to illustrate how a new mode of narration can be established to achieve what Kermode calls “a concord between the

human mind and things as they are” in this postmodern novel (150). It starts with a careful examination of the power of storytelling which the main characters of the novel all use to make sense of their lives and cope with their traumatic experiences of the past, followed by the exposition of the incapacity of storytelling to provide a “pure” imitation of the non-narrative contingencies of reality stated in Kermode’s theory. Finally, it explores how Ondaatje makes use of postmodern narrative techniques and devices to disrupt and rupture conventional narrative illusion in a way that does not banish the continuity and coherence that a good story must possess, and thus brings story and reality together successfully by means of his new literary form of narrative in *The English Patient*.

THE HUMAN NEED TO “BREATHE IN LIGHT” THROUGH STORYTELLING

[T]he only way to survive is to excavate everything...In spite of the burned earth, in spite of the lack of water. Someday there would be a bower of limes, rooms of green light.

—Michael Ondaatje, *The English Patient*

Michael Ondaatje’s *The English Patient* depicts a world “in near ruins” (Ondaatje 1992: 27) where four World War II survivors are displaced from their origins for various reasons and brought together in the last days of the war to sing songs, recite poems, have parties, and, most important of all, exchange stories about their past lives. Almásy, the so-called English patient, is the main storyteller, the one who “drag[s] the listening heart beside him to wherever his mind is, into that well of memory he kept plunging into before he died” (4). Nevertheless, the novel is “a quartet of balanced, and strongly interrelated characters” (Ellis 1996: 25), for the other three protagonists, Hana, Caravaggio and Kip, are also eager to plunge into their own “well of memory” to dig out and share their stories. Living “in a time of darkness” (9, 15, 61), when the war “has done its appalling work” (Meredith 2012: 14), the four exhausted characters are all haunted by their disordered or painful experiences, but none of them is permitted to retreat into their own worlds of “memory and solitude” (54); instead, they have to learn how to “breathe in light” again through their mutual storytelling and story-hearing in the bombed-out Italian villa, so that they may gradually recover from their psychological and physical wounds before their final separation (14).

The capacity of storytelling to give order and continuity to fragmented experience is particularly evident in the case of the mysterious English patient, Almásy, who can fill in the “gaps of plot” in any of the books Hana reads to him, recognize “an unnamed town by its skeletal shape on a map” (18), and even know the name of a tribe simply from “the sound of their music” (21). His great

capacity for making persuasive connection to all kinds of “fragments” makes the other three main characters strongly attracted to him. As the maimed thief Caravaggio tells Hana: “[We] can be obsessed by the Englishman because he knows more...Why is that? Because we want to know things, how the pieces fit” (121). The English patient’s stories satisfy his listeners’ instinctive hunger for knowing the missing incidents in a plot and help bring back some sort of continuity to their fragmented experiences in the real world. For Hana, an exhausted Canadian nurse, storytelling enables her to reassemble everything that has happened around her into a sequential whole. Staying with the English patient in the abandoned villa during the war, she not only likes listening to his stories, but also has the habit of reviewing each moment of the past day and trying to configure all the “fragments” into one story after another as she lies in bed at night. “The day seems to have no order until these times,” as the narrator tells us, because not until her body is “full of stories and situations” can she prevent herself from dissolving into the disorderly and chaotic reality and feel “most alive” (35-6).

Storytelling also gives these protagonists in *The English Patient* the chance to figure out when and how things went wrong in their past lives. As Donald N. McCloskey (1990) points out storytelling is “best adapted to answering ‘why’ and explaining something that has already happened” (7). By retelling the same stories of their own, they revisit certain disturbing but crucial events in order to find out and explain what went wrong. For example, Caravaggio’s storytelling always starts from and goes back to the night when the Italians captured him and cut off his thumbs: “I was accidentally photographed...So it meant having to try and steal that film back somehow” (35); “I was caught jumping from a woman’s window” (54); “I was caught. They nearly chopped off my fucking hands” (34); “They had handcuffed [me] to the thick legs of an oak table...Blood everywhere now” (58-60). Caravaggio is permanently impaired, both physically and psychologically, by what happened that night, as the narrator tells us, “[It] had produced age [in him], as if during the one night when he was locked to that table they had poured a solution into him that slowed him” (59). When retelling such a cruel and traumatic event over and over again, Caravaggio is actually struggling to find an explanation for this tragedy in order to get rid of his “terrors of dismemberment” (Meredith 2012: 17). Similarly, Kip’s story also begins with the “shadows” of his memory (197), “the explosion in Erith” on “May 1941” (190), which killed Lord Suffolk, Miss Morden, and Mr. Fred Harts, all of whom had treated him as their own family. All these months later when he is staying in the small hill town in Italy, his storytelling still goes back to that terrible incident again and again, for he is desperate to figure out how and why he lost his dear friends all of a sudden on that night.

The English patient also retells certain stories about his

past to find out what went wrong with his life, as well as the lives of his lover, Katherine, and her husband, Geoffrey Clifton. His guilt and regret for his betrayal of love and friendship force him to look for an explanation for how he fell in love with Katherine and made their lives start going wrong. For instance, his narrative repeatedly returns to the stories of Katherine’s recitation of a poem and her reading of the story of Candaules: “That was 1936, the beginning of our story...Katherine Clifton began to recite something...That night I fell in love with a voice” (142-4); “Then she began to read from *The Histories*--- the story of Candaules and his queen...This is a story of how I fell in love with a woman...a path suddenly revealed itself in real life” (232-3). Furthermore, his attempt to explain how the adultery ended up with Katherine’s lonely death in the Cave of Swimmers is also clearly shown in his retelling of the tragic ending of their love story: “She had been injured. In 1939. Her husband had crashed his plane...A husband gone mad...Killing himself” (171-3); “On the floor of the Cave of Swimmers...I’m going for help now, Katherine. Do you understand? There is another plane nearby, but there is no petrol. I might meet a caravan or a jeep, which means I will be back sooner. I don’t know...When he got to the outskirts of the settlements, English military jeeps surrounded him and took him away, not listening to his story of the woman injured at Uweinat” (248-50); “[In 1942]. He walked farther into the coldness, into the Cave of Swimmers, where he had left her. She was still there” (169). In the course of repeating the story of Katherine’s death and his belated return, he cannot but keep asking himself and his listener questions about what went wrong: “Was I a curse upon them? For her?” (257); “Had I been her demon lover?” (260).

Storytelling not just allows these characters to revisit the pain of a particular moment or a traumatic incident, but it also helps them to take control of it. As Hana tells Caravaggio the story of her unborn child, for instance, she re-lives the painful feelings of that period: “I was almost going to have a baby a year ago...I lost the child. I mean, I had to lose it. The father was already dead. There was a war” (82). Having experienced enough of death and loss, Hana decides to lose her baby because she does not feel like becoming a mother or having “ordinary domestic ties” (Ty 2000: 17). Her telling of the story brings her back to the traumatic experience, but at the same time, it also gives her the chance to justify the reason why she cannot keep the baby and recover from her pain of loss. In a similar vein, the English patient’s storytelling takes him back to his deep distress at “the night of [Katherine’s] insistence on parting” (156): “She sits, enclosed within herself, in the armour of her terrible conscience. He is unable to reach through it...He feels everything is missing from his body... [T]here is no order in the world. This night of her insistence” (157-8). Suffering from wounds that can neither be buried nor easily forgotten, these characters need to “excavate

everything" (44), to revisit and reinterpret the painful events of their past in their own words as they tell their stories, because as Mami Gillard argues, only when those stories "reopen" some emotional wounds can they begin to heal these wounds (Gillard 1996: 99). In other words, however painful it may be, it is necessary for these characters to retell and reshape their traumatic experiences if they want to recover from their pain or trauma.

For those who are suffering from the pain of losing their beloved ones, as J. Hillis Miller (1982) claims, storytelling also gives them the power to raise "the dead" and confer some sort of immortality on them (178). For example, Hana's heart is broken when she was informed of the death of her father Patrick in France, and she "cannot bear to talk of or even acknowledge" this unbearable loss (92) until she starts to "collect the moments of him" (91) and turn those "moments" into a story, which she first tells herself and later Kip. In Kip's case, his memories of Lord Suffolk, Miss Morden, and Mr. Fred Harts are like "a tarpaulin," which protects him from the terrible reality of their accidental death, and every time when he tells Hana their story, he feels that they are still alive and that he can still "eat at the same table with them" (197). For the English patient, who lost his best friend Madox and his lover Katherine, translating them into the body of his stories and retelling them over and over again enables him to resurrect the dead in his memory as well as in the minds of his audience.

Since the power of storytelling can make the dead become eternal, it can also allow these characters to escape from temporal or spatial distinctions or limitations in reality. As the narrator tells us, the stories Hana reads to the English patient not only enable both of them to "travel with the old wanderer in *Kim* or with Fabrizio in *The Charterhouse of Parma*," but also make her feel that those books "whose landscape they have already walked through" have gradually become "half of her world," and that only through them can she turn away from the chaotic reality, from the "cell" of "here and now," and go anywhere at any time (93). This is one of the reasons why she would like to "chain herself to the dying man" (40), to sit beside him and "travel like a squire beside him during these journeys" (135), especially when the chaos of the reality or the heavy burden of the past makes her feel upset. The childhood stories Kip exchanges with her in his small tent, "during [their] verbal nights," also help them both to escape the limitations of time and space and start to "travel his country of five rivers, the Sutlej, Jhelum, Ravi, Chenab, Beas" (270). In a similar manner, the stories told by the English patient also take his audience somewhere else, so even Caravaggio, who wants to "kill the Englishman" so that he can get Hana out of the villa, cannot stop himself from becoming obsessed by the burned man's stories and travelling with him "in deserts" (265). As for the English patient himself, even though he is now suffering from intense burns on his death-bed, he can still use the power of storytelling to

"leap back to the cave paintings or to a buried plane, or linger once more with the woman beside him under a fan, her cheek against his stomach" (247). Thus, as Caravaggio explains to Hana, the English patient is not really there with them in the villa: "The Englishman left months ago...he's with the Bedouin or in some English garden with its phlox and shit" (122). In fact, his "time-defeating narrative mode of experience," as pointed out by Rufus Cook (1999), has shown his least regard for conventional temporal or spatial distinctions and allowed him to act as if he had been a "spectral witness" to the significant moments or events in the other characters' lives (48).

For the four war-damaged victims in *The English Patient*, storytelling becomes their best way to "come out of the war" (33) and their "only way to survive" (44). In the course of telling and exchanging their own stories, these characters are able to reshape their identities, impose some sort of continuity on their experience of the chaotic reality, or even sail "into the past" (142) to interpret what went wrong and to heal the wounds left behind. What's more, it is also the power of storytelling that allows these characters to bring the dead back to life and to escape from or collapse the barriers of space and time. As Kermode concludes, storytelling can be one of the best means of "assistance" invented by the mind that can endow people with the ability to recover from "the assaults of a hostile world" (40).

THE RESISTANCE OF THE CONTINGENT REALITY TO THE FORM OF STORY

His only connection with the world of cities was Herodotus, his guidebook, ancient and modern, of supposed lies

—Michael Ondaatje, *The English Patient*

As Frank Kermode (1966) explicates, human beings who live "in the midst" always need the structure and order of story or other forms of narrative to impose some sort of order on the real world, or reality, which is always resistant to "human plot and human desire for order" (105). With the help of storytelling, the protagonists in *The English Patient* try to bring structure and new meanings to their chaotic and fragmented experience during a time of war, but the truth is that the "discordant" and "contingent" reality hardly accommodates the form of story or confirms "a humanly ordered picture of the world" (Kermode 59). Thus, although they need the plot-making power of storytelling to give them "a humanly needed order," the dissidence between "inherited" forms and the "non-narrative" nature of reality, the "natural history" of the desert, and the events that happened in their lives, all force them from time to time to acknowledge that "the pressure of fact" is "irreducible" to "human plot" and "human desire for order," so the materials of their stories

will always resist their narrative control, and their well-formed stories or perfectly-ordered narratives must therefore consist of some “supposed lies” (Kermode 169).

The English patient, Almásy, who lived in the desert for many years, is fully aware of the difficulty of controlling or shaping this area of the world by history or story. As he tells Hana, though this is “a world that had been civilised for centuries,” even Herodotus’s *The Histories* cannot impose order on its “natural history” (140). When he used Herodotus’s book as his “only connection with the world of cities” in the course of his lonely trek across the desert, he came to realize that the world of the desert can not be shaped by history (or story), that the book is full of “supposed lies” (246), and that history (or story) can never adequately control reality or nature or “what’s out there” (136). With the belief that no one can just rely on Herodotus’ book or on any map in the desert, whenever Almásy discovered “the truth to what had seemed a lie,” he “brought out his glue pot and pasted in a map or news clipping or used a blank space in the book to sketch men in skirts with faded unknown animals alongside them” (246) in order to keep on “mapping and re-exploring” the shifting topography of the desert (136).

Almásy’s past experience in the desert has also taught him the vanity of naming or owning anything or any place there. As he keeps warning Hana, “it is easy to lose a sense of demarcation” because “everything drifts” in the desert (22), and after a sandstorm, “the surface of the desert” is often totally changed (137). It is useless to fight against the drift of the desert, and even Herodotus’s *The Histories* can never completely shape its non-narrative, always changing “natural history.” Thus, unlike the other desert explorers who “want their mark there” (139), Almásy is disturbed by the vanity of naming, of claiming “the powers of the linguistic sword,” which suggests some sense of ownership (York 1994: 89). Trapped in the “half-invented world” of the desert (150), he has learned that the desert, just like “a piece of cloth carried by winds,” is “never held down by stones” and can never be “claimed or owned” by the power of naming (139). There are always “lost history” (135) and “legends and rumours” (141) in the desert, as he reassures his audience, because the gap “between land and chart, between distances and legend, between nature and storyteller” (246) will exist forever. For Almásy, the desert is a symbol of reality itself, which is always shifting and can never be fully controlled by the power of words or storytelling.

In addition to the natural history of the desert, Herodotus’s *The Histories* also fails to shape and determine the shifting relationships of the lovers in *The English Patient*. As Susan Ellis expounds, Ondaatje “narratively” links “erotic triangles” in this novel to the story of Candaules, a king of ancient Lydia, for the story, first read by Katherine from Herodotus’s book to Geoffrey and Almásy, is then told within Almásy’s story of his love affair with Katherine to Hana, Kip, and Caravaggio (33).

According to Almásy’s narrative, Candaules’s claim of ownership over his wife and her beauty leads him to demand that Gyges, one of his spearmen, hide in their bedchamber and look at her naked, so that his desire to be envied can be satisfied; when his wife sees Gyges leave the bedchamber, she realizes what her husband has done, and she makes Gyges kill her husband and reigns as king for twenty-eight years. Katherine reads this story to temper her husband’s vanity about her beauty, but as she reads, Almásy begins to identify himself with Gyges and Katherine with Candaules’s wife. As he explains to Hana and Caravaggio, through her telling of this story, he falls in love with her, and a new path suddenly “reveals itself in real life” (234). However, the adultery only leads to a terrible tragedy in which Geoffrey and Katherine both die, and Almásy himself becomes the burned and dying English patient in the novel. The triangular love affair in Cairo is later replicated in the Italian villa, after Almásy tells Hana and Kip the story of Candaules because of his awareness of their love affair, but as a father figure for Hana, he is more like Candaules this time. In contrast to Gyges, however, Kip does not kill Almásy; in the end, he takes back his own identity as an Indian and a Sikh and leaves Hana, Almásy, and Caravaggio forever. Once again, the intended purpose of the story and its unpredictable results in these characters’ lives only reveal the instabilities of reality and the limitations on the shaping power of storytelling.

It is thus not surprising that the characters in *The English Patient* are eventually forced to admit that their attempt to shape and make sense of the contingent reality through the power of words or storytelling does not work all the time. In Hana’s case, after experiencing the chaotic reality of the war, she needs words to give her “clarity” and bring her “reason” and “shape” (238), so she always uses her pencils and notebooks to write down and give order to the events in her life. As the narrator tells us, she is “secure in the miniature world” she has built, a world in which everything can be put into place by the power of words (47). However, on “that August day,” when the atomic bombs are dropped in Japan, the attack of the contingent reality suddenly causes “the book in front of her, the pencil” to become “frozen and shadowed in the pre-storm light” (282). At this moment, she cannot write anything down to make sense of what has happened or to express any her emotions, for the power of words is suddenly “frozen” by her shock at the unpredictability and absurdity of reality.

Even the author Michael Ondaatje himself has to acknowledge the incapacity of his storytelling to explain everything in his novel or to give intelligible shape to his characters’ lives. For example, when he describes the love affair between Kip and Hana, he admits that he can’t explain this part of his story clearly: “How much she is in love with him or he with her we don’t know” (127). Another striking example can be found in his description of what happens to Hana years after World War II: “She,

at even this age, thirty-four, has not found her own company, the ones she wanted...She still remembers the lines of poems the Englishman read out loud to her from his commonplace book. She is a woman I don't know well enough to hold in my wing, if writers have wings, to harbour for the rest of my life" (301). Although Hana is one of the fictional characters that he has created, Ondaatje still admits his failure and his own limitations as a narrator or an author in providing a complete version of her life in order to emphasize that even his art of storytelling is sometimes inadequate to fight against the absurd and contingent nature of reality.

BRIDGING THE GAP BETWEEN STORY AND REALITY

Many books open with an author's assurance of order...But novels commenced with hesitation or chaos. Readers were never fully in balance. A door a lock a weir opened and they rushed through, one hand holding a gunnel, the other a hat.

—Michael Ondaatje, *The English Patient*.

As one of Canada's foremost postmodern writers, Michael Ondaatje is aware of the incapability of conventional well-formed stories to represent things as they are in real life, and his most famous novel *The English Patient* clearly demonstrates the great effort he has made to depict and come to terms with what Kermode calls the non-narrative nature of reality. Because of his superb use of diverse postmodern narrative techniques and devices, *The English Patient* follows a new sort of discontinuous and nonsequential narrative pattern that not only highlights but also reconciles the conflict between the human need for a "comfortable story" and "the contingencies of reality." This postmodern novel, according to Steven Totosy de Zepetnek, succeeds in representing reality by "underlining its fullness, complicatedness, inexplicability, fragmentation, and subtextual richness," which cannot be fully captured in a conventional linear fictional narrative (Totosy de Zepetnek 1994: 141).

To achieve "a degree of real compliance with the contingencies of reality" (Kermode 63), Ondaatje skillfully manipulates the narrative sequence and time order in *The English Patient*. While dredging up one piece after another of his past from his "well of memory," the English patient Almásy, the main storyteller of the novel, often talks "in his circuitous way" (89) or "in fragments" (96), and is sometimes allowed to give "no summary of the missing chapters" or "gaps in plot" (8), or even slip "from level to level like a hawk" (4), showing no concern for chronology or distinctions of time and space. While his life stories are often related in such a highly discontinuous and non-sequential manner, as Cook points out, the so-called "conventional narrative logic" is thus

"hopelessly" scrambled" (110). For example, the English patient begins his narrative with the story of how he was saved by the Bedouin; however, he does not explain what had happened that led to his plane crash in the desert until hundreds of pages later. When he retells the story of Katherine's death in the cave, he again disrupts the narrative continuity and logic of his story by collapsing events that happened three or four years apart into one another: "She was still there...He had promised to return for her...She had been injured. In 1939. Her husband had crashed his plane...In the cave, after all those months of separation and anger, they had come together and spoken once more as lovers" (169-71).

In its attempt to rupture the linear sequence of a "comfortable" story, Ondaatje's narrative also keeps moving forwards and backwards discontinuously by jumping from present to past or even to future episodes. Throughout the novel, certain crucial episodes or incidents from the characters' past lives can be suddenly brought back simply by a "trigger of memory" (300) and immediately break down the narrative sequence of the current incidents. For example, while describing Hana's playing of a piano piece in the villa and the sudden appearance of the two sappers, the narrator suddenly flashes backward to Hana's memory of "the chalk notes that her mother had drawn onto the kitchen table and then wiped off later" (63). In another scene, when Caravaggio spills "the carafe of wine" on the kitchen table of the Italian villa (58), his memory of the night he was captured and tortured by the Italians is suddenly triggered back, and the narrator's narrative keeps moving back and forth between the table in the villa and the one on which his thumbs were chopped off. Such incongruous mingling of what happened before and what is happening, as stated by Miller, turns the narrative of the novel into "a simultaneous set of echoing episodes spread out spatially like villages or mountain peaks on a map" instead of one comfortable story that progresses in a smooth linear manner (35). Particularly noteworthy is that Ondaatje's narrative in *The English Patient* can also be interrupted when the narrator starts to describe an incident from the future, sometimes even in the future tense. For example, the narrator tells the reader that Hana "will remember the line of movement Kip's body followed out of her life" (282), that Kip will be reminded "years later" of the months he spent with Hana and Caravaggio and the English patient in the Italian villa (299), and that Caravaggio will recall the friendship he once had with Kip (208).

Another technique used by Ondaatje to disrupt the narrative continuity of his novel is his constant and abrupt shifts in the narrative point of view. Such shifts often occur in the stories told by the English Patient, Almásy, who speaks "sometimes in the first person, sometimes in the third person" (247). For example, while telling Caravaggio the story of his love affair with Katherine, Almásy mostly speaks in the first person; however, during

one morphine-induced talk, he suddenly gives himself “only the voice of the watcher, the listener, the ‘he’” (172). Another similar shift can be found in his account of why he crashed in the desert: “I started the motor and it rolled into life...The undercarriage brushes the top of a palm and he pivots up...and he is in the air, bright...on fire” (174-5). Sitting alongside this burned and dying patient, “who still does not admit that he is Almásy,” and listening to his stories, Caravaggio often feels confused because of his frequent shifts from the expected first-person to a sudden third-person point of view, so he keeps asking himself “*Who is he speaking as now?*” (244), or even confronts Almásy, “Who was talking, back then?” (247). The English patient’s insistence on his right to abruptly “take on alternative voices,” as Cook (1999) argues, not only creates a very unstable identity for himself but also disrupts the narrative frame of the novel in an extremely effective way (49).

In addition to the frequent shifts in the narrative point of view, Ondaatje’s novel is also characterized by a series of seamless shifts from narrative voices to interior or exterior dialogue. According to Jacqui Sadashige (1998), the novel is made up of many narrative voices, including the English patient’s Hana’s, Caravaggio’s, Kip’s, and the omniscient narrator’s, and Ondaatje’s prose keeps slipping “into and between character and narratorial voices” (243). So many different narrative voices and interior and exterior dialogue are often interwoven seamlessly throughout the novel, sometimes even within the space of a page or paragraph. For instance, when Hana is talking to Caravaggio, or the English patient is telling his stories, the narrator’s or another character’s voice may suddenly intrude for a paragraph or even several pages:

‘Caravaggio thinks he knows who you are,’ Hana said. The man in the bed said nothing...He walked farther into the coldness, into the Cave of Swimmers, where he left her. She was still there...I approached her naked...‘What happened three years earlier?’ ‘She had been injured.’ ‘So she was too wounded to take with you.’ ‘Yes. The only chance to save her was for me to try and reach help alone.’ In the cave...they had come together and spoken once more as lovers, rolling away the boulder they had placed between themselves for some social law neither had believed in. (169-71)

In the above paragraph, Hana’s voice is first interwoven with the narrator’s narrative that describes the English patient’s interior dialogue; later, while the patient is telling the story of Katherine’s death in the cave, Hana’s words and the narrator’s interrupt in turns, thus rupturing the continuity of the patient’s narrative. Occasionally, there are no quotation marks to distinguish dialogue from narrative voices. One of the examples occurs when Caravaggio is asking the doctors in the military hospital in Rome about Hana and the English patient: “Is she injured? No. Partial shell shock probably...Who is he? He asked. We don’t know his name. He won’t talk? The clutch of doctors laughed. No, he talks, he talks all the

time, he just doesn’t know who he is. Where did he come from? The Bedouin brought him into Siwa Oasis” (28-9). Apparently, such intentional omission of quotation marks not only makes the shifts between narrative voice and dialogue even more seamless but also helps “disrupt the flows of plot and dialogue” in the narrative of the novel (Sadashige 243-4).

Ondaatje’s frequent use of references to other texts or modes of discourse is another way of breaking the narrative unity and continuity of the novel. In fact, the novel is marked by what Jacqui Sadashige calls an “overflow” of references to or “substantial interpolations” of various texts, ranging from Herodotus’s *The Histories* to Kipling’s *Kim*, from Tolstoy’s *Anna Karenina* to Major A.B. Hartley’s *Unexploded Bomb* (243-4). Beverly Slopen claims that such interplay of narrative voices and references to other works reflect Ondaatje’s own concept of history: “I prefer a complicated history where an event is seen through many eyes or emotions, and the writer doesn’t try to control the viewpoint” (Slopen 1992: 48). Ondaatje does not think that his characters’ life stories can be related by means of a single continuous narrative or authorial voice, so he provides his reader with a multitude of individual narratives with references to other texts, and such “endless proliferation of discourse” not only serves to “construct and legitimize a particular version of history” but also makes it hard for his reader to find any conventional well-shape narrative form in the novel (Sadashige 243).

The technique of repetition is also used to break down the linear progression and sequence of the narrative in *The English Patient*, however, as Cook (1998) points out, Ondaatje does not simply repeat “isolated” words and phrases, but recapitulates “whole scenes from the past at times” or even replicates “verbatim” the key scenes in the English patient’s account (116). His book thus follows what Miller calls “a pattern of eddying repetition” (34). For example, the English patient’s narrative repeatedly comes back to the same scene: “I carried her out into the sun...towards the northeast gully, where the plane was buried” (169-171); “three years later, in 1942, I walked with her towards the buried plane, carrying her body as if it was the armour of a knight” (174); “I carried Katherine Clifton into the desert, where there is the communal book of moonlight” (261). Another scene that is often repeated in the English patient’s stories is the one where Clifton died and Katherine got hurt: “She had been injured. In 1939. Her husband had crashed his plane” (171); “Clifton flew up on Uweinat to collect him on the appointed day...the plane pivoted down and came straight towards him, then crashed into the earth fifty yards away...A husband gone mad. Killing all of them. Killing himself and his wife...Only she was not dead” (172-3); “I heard the plane, saw it...Fifty yards away from me it suddenly tilted and crashed...He was dead. She was trying to move the lower part of her body” (256-7).

All these postmodern anti-novelistic narrative techni-

ques and devices examined above keep *The English Patient* away from conventional perfectly-formed narratives that fail to represent the contingencies of reality, but the author does not go too far and turn his novel into “discontinuous” and “unorganized” fragments that nobody could ever read (Kermode 140). As Cook (1998) expounds, there is not only “an emphasis on narrative discontinuity and disconnection” in the novel, but there is also “an emphasis on techniques for ‘bridging’ the gaps, for filling in the ‘missing incidents’ in a plot” (112). That is, while attempting to disrupt the linear sequence and continuity of his novel to mime the contingencies of reality, Ondaatje also endeavors to impose some semblance of continuity and connection on his discontinuous and non-sequential narrative in order to satisfy the reader’s need for the form of story.

As previously stated, *The English Patient* is mostly constructed on the basis of its characters’ cyclical and fragmented memories of the incidents in their past lives; however, some of the key episodes are actually narrated more or less chronologically. For example, one of the English patient’s explorative journeys in the desert is recounted mostly in a linear sequential way, and the process of the exam by which Kip was selected into Lord Suffolk’s experimental bomb squad is also described in sequential order. In fact, large sections of these characters’ stories are actually coherent and continuous even though they are always broken off and continued later, or returned to and repeated over and over again. Thus, although the narrative of the novel does not follow a straightforward sequential order, the reader can still find order and connection within these highly fragmented and discontinuous stories and rearrange them chronologically by themselves to get a better understanding of what happened in these characters’ past lives.

Furthermore, Ondaatje’s use of the narrative technique of repetition also serves to unify his novel. Throughout his book, there are a lot of recurrent references to “objects or phrases which in themselves have no meaning,” and “this tactic of repeating or echoing certain elements” actually form a sort of “non-rational network of connections” in the novel (Cook 1998: 115), and the “scrambled” and “non-sequential” narrative fragments are thus given unity and held together by such recurrent “clusters” or “networks” and by its “obsessive repetition” of certain significant terms and images (Cook 1999: 38). On the other hand, many significant events or episodes that are told repeatedly in the novel are each time retold with a different emphasis, in a more detailed way, or from another point of view. For example, when the English patient first told Hana that “Madox died because of nations” (138), he did not give her any further explanation; however, when he mentions Madox’s death again in a later scene, he explains it in far more detail. When he repeats his account of Madox’s death the third time, he not only relates it in similar terms but also adds a lot more details. This way of retelling the same incident

with different emphases or narrative points of view actually provides a degree of continuity and connection in the English patient’s seemingly fragmented and discontinuous narrative and thus makes his story and the novel itself more readable and understandable.

On a larger scale, the technique that echo and duplicate characters, events, or scenes within the text gives *The English Patient* “its own unique qualities of connection and coherence;” in other words, the characters’ lives are often duplicated in stories, plays, or paintings, which can not only make “disparate points in time and space” bound together but also produce a certain degree of continuity or connection in the novel (Cook 1998: 115). For instance, at the beginning of the novel, Caravaggio reminds Hana of the scene where she sang a French song on a table at someone’s birthday party in Toronto (53), and it is hundreds of pages later in the novel where the same scene is suddenly replicated in the Italian villa, at Hana’s twenty-first birthday party (269). Though the spirit of her performance has changed profoundly, such re-enactment still echoes the earlier version of the episode, helps the reader remember that these are “things which have already transpired” or “a time which has already occurred,” and thus imposes connection and coherence on the narrative fragments of the book (Baudrillard 1988: 155).

CONCLUSION

In order to remain true to the non-narrative contingencies of reality, Ondaatje in *The English Patient* abandons the linear progression of conventional narratives and develops a seemingly fragmented and discontinuous way of telling stories. One effect of reading these random and non-sequential stories, as he warns us, is that the “[r]eaders [are] never fully in balance” because “[a] door a lock a weir open[s] and they [rush] through, one hand holding a gunnel, the other a hat” (93). In order to follow, page by page, the non-sequential and circuitous narrative pattern of the novel, readers have to keep reordering the events and bridging the “gaps of plot” left by the storytellers. However, Ondaatje has not turned his book into a discontinuous and unorganized chaos, without even “the formal qualities that makes it a novel” (Kermode 130). Instead, through his superb use of various narrative techniques, he also helps the reader piece the narrative fragments together into an understandable picture, and this new paradigmatic form of storytelling in his novel not only reflects the contingent nature of reality but also satisfies the reader’s desire for the order and meaning of good stories.

Conflict of Interests

The author has not declared any conflict of interest.

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