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# An Analysis of the Significance of Non-Normativity in the Works of Flannery O'Connor

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An Analysis of the Significance of Non-Normativity in the Works of Flannery O'Connor

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5 April 2017

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### Abstract

The aim of this thesis is to first demonstrate that the close reading of selected works of Flannery O'Connor exposes a contrast between the normative portrayal of the original versions of characters that were later revised and their later, non-normative versions. O'Connor's characters' non-normativity further attributes a greater degree of humanity to them; their recreated and reinforced humanity is evident in the disruption of othering narratives of disability and in the empathy readers can then develop towards her characters. This argument is presented through three sets of close readings of non-normativity in a number of O'Connor's works. The first set of readings utilizes O'Connor's personal history of disease to reveal that O'Connor's revisions to her early works create the aforementioned contrast, highlighting her later characters' non-normativity, and additionally associates non-normativity with violence. The second set of readings presents a greater level of analysis to the incorporation of non-normativity into O'Connor's characters. More specifically, this chapter argues that non-normativity in violence, victims, and perpetrators in O'Connor's short stories can be read to disrupt historical narratives of disability that diminish the humanity of those with disabilities. The third set of readings utilizes the lens of narrative medicine to demonstrate the value of reading non-normativity in O'Connor's works. Specifically, this chapter argues that close readings of non-normativity in these works give the reader the opportunity to further read these works with a sense of empathy towards their non-normative characters.

**Keywords:** Flannery O'Connor, Normativity, Non-Normativity, Disability, Narrative Medicine

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## Introduction

After leading the reader through an extended struggle of his faith, Haze Motes reveals his plan to blind himself in a simultaneously shocking and casual way:

He stopped at a supply store and bought a tin bucket and a sack of quicklime and then he went on to where he lived, carrying these. When he reached the house, he stopped outside on the sidewalk and opened the sack of lime and poured the bucket half full of it. Then he went to a water spigot by the front steps and filled up the rest of the bucket with water and started up the steps. His landlady was sitting on the porch, rocking a cat. “What you going to do with that, Mr. Motes?” she asked.

“Blind myself,” he said and went on in the house. (O’Connor, *Wise Blood* 212)

In this passage, Flannery O’Connor’s description of the words and actions of Haze Motes, the central character of her first novel, *Wise Blood*, reflects a number of recurring themes in her works. O’Connor’s descriptions of Motes’s preparations for the solution he will use to blind himself seem to possess a routine, everyday tone, and the pairing of the casual nature of the preparations with the shocking, violent act of self-harm points to a theme of absurdity, alongside themes of violence and disability. Violent acts and displays of disability are prevalent in her novels and short stories, often occurring together. Moreover, violence and disability are often signifiers of non-normativity in O’Connor’s works. This thesis will explore the roots, manifestations, and significance of non-normativity in selected works of Flannery O’Connor.

Each section of this thesis will go one step further into the analysis of non-normativity in O’Connor’s works, presenting readings developed with attention to the context of O’Connor’s ill health, the influences of othering models of disability, and the field of narrative medicine. This

thesis will demonstrate that the close reading of selected works of Flannery O'Connor reveals a contrast between the normative, earlier and non-normative, later versions of characters she revised in her career; this contrast highlights the non-normativity of the latter versions. At the same time, O'Connor's revisions create an association between extremity, violence, and non-normativity. Exploration of this association will suggest that O'Connor's characters' non-normativity humanizes them; their recreated and reinforced humanity is evident in the disruption of othering narratives of disability. Similarly, close reading non-normativity in O'Connor's works prompts characters to feel empathy towards her characters, which further humanizes them to the reader.

In order to discuss disability and non-normativity in O'Connor's works, it is first necessary to broadly understand O'Connor's personal experience with non-normative identities and categories, namely disability and chronic illness. Flannery O'Connor was afflicted with systemic lupus erythematosus and experienced a myriad of painful, limiting symptoms throughout her adult life (Gooch). Because O'Connor wrote a number of short stories before the onset of her illness that she revised while symptomatic, it is possible to trace the changing presentations of non-normativity in her works through these revisions. With an eye to O'Connor's illness, the first chapter of this thesis will examine these presentations of non-normativity in the revised characters of Haze, Enoch, and the neighbor as they appear in *Wise Blood* and "Judgement Day."

Prior to its examination of non-normativity in O'Connor's revisions, this thesis will reproduce and examine information available regarding O'Connor's experience with her chronic illness. It is necessary to address the reasons why this thesis will note a correlation between the chronology of her illness and the presentation of non-normativity in her stories but will not

firmly assert that her illness was the driving force for this non-normativity. Drawing firm conclusions about an author's intent or mental state is often problematic and disrespectful of the author's ability to live a life separate from his or her writing. To that end, it is unethical to advance an argument that O'Connor's disease caused her psychological distress that then spurred her to create characters that would share non-normative identities like her own. Her disease may have caused her distress, and her characters may have subsequently taken on more notable presentations of non-normativity; however, just because this association is worth noting does not mean that it is sufficient evidence to draw conclusions of causation. This thesis seeks to treat the life of Flannery O'Connor with respect, using her biographical information and information regarding her symptoms to provide context for her portrayals of non-normativity and to add to the value of reading non-normativity in her works. With that said, close readings of texts do not carry the same burden of proof as the conclusions of causation mentioned above.

This thesis will present a further close reading of non-normativity as it manifests in O'Connor's later short stories, including "Good Country People." The second chapter of this thesis will illustrate the ways in which O'Connor's portrayal of non-normativity and disability in "Good Country People" and "Judgement Day" troubles the notion of normative able-bodiedness and problematizes the dehumanization of non-normative people and people with disabilities. This reading will come after a description of the model of disability that diminished the humanity of those with disabilities and was prevalent in O'Connor's time.

The humanity of O'Connor's non-normative characters is reaffirmed through readings of her works from a lens of narrative medicine, which will be performed in the third chapter of this thesis. One of the claims of narrative medicine is that close reading can prompt readers to feel empathy for a given character (Charon). This applies to O'Connor's portrayal of Asbury in the

short story, “The Enduring Chill,” and her portrayal of Enoch in the section of *Wise Blood* she adapted from her short story, “Enoch and the Gorilla.” This chapter will demonstrate that close readings of these non-normative characters give the reader the opportunity to develop empathy towards these characters.

Before reading the aforementioned chapters of this thesis, it is important to consider the place of this thesis in the body of scholarly work in analysis of O’Connor’s novels and short stories. Non-normativity in O’Connor’s works has been considered in a relatively small body of scholarly works. Many of these works attribute significance to O’Connor’s portrayals of non-normativity as they relate to Catholicism and to the Christian faith more broadly, often drawing from associated Catholic symbols in O’Connor’s works as well as O’Connor’s reputation as a devout Catholic. Such works often examine O’Connor’s use of the grotesque in defense of Christian ideals and/or draw connections between physical non-normativity and characters’ redemption and salvation. Examples of these works include Timothy Basselin’s *Flannery O’Connor: Writing a Theology of Disabled Humanity* (2013) and Marshall Bruce Gentry’s *Flannery O’Connor’s Religion of the Grotesque* (1986). However, this thesis will pursue readings of non-normativity without specific attention to religious themes. A smaller number of scholarly works consider non-normativity in this way. These are works that often discuss O’Connor’s portrayal of disability as an attempt at portraying uncorrupted reality or as an attempt at critiquing cultural missteps. Such works are often clouded with the jargon of their disciplines, discussing O’Connor’s works in the context of a much broader social or literary argument and thereby giving her works a more general reading. Examples of these works include Emily Russell’s *Reading Embodied Citizenship: Disability, Narrative, and the Body Politic* (2012) and Nicole Markotic’s article “Re/Presenting Disability and Illness: Foucault and two

20th Century Fictions” (2003). A similarly small amount of works are available that describe O’Connor’s illness with regards to her work, including the article, “Misfit as Metaphor: The Question and the Contradiction of Lupus in Flannery O’Connor’s ‘A Good Man Is Hard to Find,’” which reads “A Good Man is Hard to Find” as reflective of O’Connor’s experience with her illness. Even less scholarship exists regarding applications of narrative medicine to O’Connor’s writing. In fact, despite its support for the close reading of literature, very few examples of close readings are available in connection with the field of medicine, and none are available regarding O’Connor’s short stories or novels. This thesis seeks to address the lack of scholarship in these topic areas and present a new argument regarding them: that O’Connor’s portrayal of non-normativity in her characters ultimately humanizes them.

## Chapter 1

### *Context and Considerations of O'Connor's Disease*

Before reading the presentation of non-normativity in the works of Flannery O'Connor, it is necessary to first become familiar with the history of O'Connor's ill health. This familiarity is necessary because, as a future section will elucidate, the development of O'Connor's disease is correlated with revisions made to her short stories, creating an opportunity to read the contrasts created in these. These contrasts highlight the non-normativity of her revised characters and further draw attention to the pairing of non-normativity and violence, which will be discussed in later chapters of this thesis. Therefore, this section of the thesis will detail the progression of O'Connor's disease. Recall from the introduction to this thesis that Flannery O'Connor was afflicted with systemic lupus erythematosus for most of her adult life. This section seeks to reveal that O'Connor's lupus manifested as an imposing and restrictive force on her life, which led her to feel understandable resentment as a result.

Lupus was a constant presence in O'Connor's life. In 1941, when O'Connor was sixteen, her father died of systemic lupus erythematosus. Before her father's death, a young O'Connor watched her father as he "suffered from a mysterious, painful, wasting death from the fatal illness" (Gooch). More than a decade later, she was diagnosed with the same disease, the symptoms of which prompted her to move from Connecticut to her mother's farm outside of Milledgeville, at which she would remain for the remainder of her life ("Research Guides"). Previously, O'Connor's first symptoms had manifested as joint pain, which a physician initially misdiagnosed as rheumatoid arthritis, when she was 25 (Gooch). She was not properly diagnosed with systemic lupus erythematosus in 1952 (Gooch). It's likely that O'Connor was soon aware of

the poor prognosis of her disease: in addition to earlier medical knowledge of the fatality of the disease, a well-known study conducted in the early 1950s established that less than 50% of lupus patients at the time survived more than 4 years post-diagnosis (Dibner 19). However, despite this grim prognosis, O'Connor was to suffer from lupus and its symptoms for until her death in 1964 ("Research Guides").

After her diagnosis, O'Connor received treatments that often increased her pain. She began her treatment in the form of steroid injections: "She received massive doses of ACTH steroids and cortisone, taking four shots daily ... which was a painful ordeal in the day before disposable syringes [when] the needles were bigger and meaner" (Jurgensen). The treatment caused a number of adverse effects that restricted O'Connor's ability to easily move about and carry out activities. Moreover, she developed rheumatism as a result of her treatment in addition to deterioration of her jaw and hip. This made eating particularly painful, "which vexed [her] considerably because she enjoyed eating" (Jurgensen). She also experienced chronic fatigue, and in a letter she wrote in 1955, she characterized her lupus as an "energy-depriving ailment" that restricted her to only a few hours of creative endeavors per day (Fitzgerald 91). These symptoms persisted and progressed, and at the end of her life in 1963, O'Connor began experiencing increasing pain and fatigue, eventually collapsing and spending a full week confined to her bed ("Research Guides"). As one can see, these physical symptoms consistently caused her pain and limited her agency.

In addition to the physical effects of O'Connor's disease, its chronology is notable in relation to developing themes in her works, and it is necessary to consider O'Connor's reactions to her symptoms as possible emotional roots for these themes. These reactions, chronicled alongside details of her symptoms and hospital stays, can be traced through her letters. By 1954,

O'Connor was frustrated with her limited mobility, writing, "It galls me to have supported the lupus for four years and then to be crippled with rheumatism (a vulgar disease at best) of the hip. I am not able enough to walk straight but not crippled enough to walk with a cane so that I give the appearance of merely being a little drunk all the time" (Fitzgerald 67). Here, O'Connor's reader can observe her discontent with her inability to walk without pain. In another example from her letters, O'Connor writes, "Today it is snowing here & were I not confined to my bed taking two-toned pills I would be painting a snow scene," referring to a day in March 1960 (378). In this letter, O'Connor's reader can see not only the restrictions placed upon her activity and agency by illness but also her displeasure as a result. These two letters are by no means an exhaustive account of the emotions felt by O'Connor as a result of her disease; nevertheless, they are indicative of a trend in O'Connor's personal writings that pair feelings of resentment and stress with the limitations of her disease.

In the fourteen years between her lupus diagnosis and her death, Flannery O'Connor wrote two novels and dozens of short stories, and information available regarding her experience with her illness suggest that her disease was generally painful and disruptive of her daily life and that she felt displeasure at these effects. The timeline of O'Connor's chronic disease and her documented experiences with this disease are possible contributing factors to themes within O'Connor's works. This is worth considering with regards to the common themes of death, disease, disability, and non-normativity alongside dark comedy and violence shared in her later works; these themes are notable as they appear to a greater extent in works she revised after the worsening of her illness.

*O'Connor's Literary Revisions and a Shift to Non-Normativity*

After having written several short stories before her disease developed, O'Connor wrote a number of short stories and two novels after the onset of her symptoms. O'Connor adapted a number of her earlier short stories into other short stories and into chapters of her novels. Her revisions to her works are interesting in their effect to rework characters as illegible within normative boundaries of personality and behavior. In particular, O'Connor's changes in the portrayal of her characters, namely the characters of Haze, Enoch, and the neighbor of "The Geranium" (1946), pushes the reader to understand these characters as non-normative. The revisions create a contrast between the earlier and later versions of these characters that makes the latter's non-normativity more apparent, and O'Connor's revisions reveal a darkening tone to her work as well as a tight association between extremity, violence, and non-normativity.

O'Connor adapted her short story "The Train" (1947), which she wrote three years prior to her diagnosis of lupus, to the first chapter of *Wise Blood* (1952), which she two years after she began experiencing symptoms. "The Train" follows Haze, who will become the main character of *Wise Blood*, as he boards a train and interacts with the other passengers and the train's porter, who he believes to be from his hometown. It is important to note that O'Connor's portrayal of Haze in this short story does not allow him to challenge the social order expected by the reader. O'Connor's descriptions of docility and passivity in Haze's actions allow the reader to locate him firmly within the boundaries of normative behavior. More specifically, the reader can identify a number of words that are used to describe Haze and that point to a gentle, compliant nature; at one point Haze "mumbles," at another he is "startled," and he is shown "blushing" as he sits down with Mrs. Hosen, an older woman on the train (*Stories* 54-57). Similarly, after the

porter intentionally causes Haze to fall off the ladder he is climbing to a bed on the train, Haze responds with a mild, understandable temperament: “He lay on his stomach in the berth, trembling from the way he had got in” (O’Connor, *Stories* 60). In this moment, Haze’s “trembling” is a response to an unexpected event—the porter moving a ladder out from under him—that favors of passivity over aggression, and this response is both reasonable and expected. The reader can further note Haze’s respect for social norms in moments in his interactions with Mrs. Hosen. For example, Haze is fairly personable as he speaks with the woman, telling her that he is “glad to have someone there talking” (O’Connor, *Stories* 55). Here, the reader finds Haze to be polite and desirous of social interactions. This moment is indicative of O’Connor’s depiction of Haze’s character as consistent with social norms.

In *Wise Blood*, O’Connor depicts the same main character, Haze, in the same setting, a moving train, as he goes about interacting with an older woman and the train’s porter. However, instead of reprinting the story verbatim, she makes changes to her portrayal to Haze that draw him closer to an extreme of personality and behavior that the reader can no longer view as consistent with social norms. More specifically, in the finished novel, O’Connor portrays Haze to be markedly menacing and aggressive. Haze introduces hostility into benign interactions with other passengers: when the porter says that he is from Chicago, Haze responds “with a leer” and says, “Yeah, I bet you are,” (O’Connor, *Wise Blood* 6). In this moment, the reader observes in Haze a willingness to antagonize other characters. Another example of his unwarranted hostility is apparent in his interaction with Mrs. Hitchcock, a woman near him on the train. He mocks Mrs. Hitchcock, and he displays physical indications of aggression in “a sidelong glance” by “curl[ing] his mouth slightly,” seemingly intending to shock her and assert his dominance (O’Connor, *Wise Blood* 7). Haze’s inclination towards aggression and agitation distance his

character from normative bounds. In fact, Haze's non-normativity is reaffirmed moments later when O'Connor places a greater emphasis on the "ugly red" of his face (O'Connor, *Wise Blood* 9). In *Wise Blood*, she draws attention to this descriptor by beginning a paragraph with it, and the descriptor echoes and emphasizes his unprovoked aggression as red is often associated with anger and "ugly" points to the disquieting abnormality of this aggression. When this phrase appears in "The Train," it appears deep within a paragraph detailing Haze's experience entering the dining car, and it draws less attention from the reader. This emphasis is an early indication of Haze's greater dissociation from normativity in *Wise Blood*, and his non-normative behavior becomes more apparent as Haze commits violent acts later in the novel.

Just as she used "The Train" as a basis for the first chapter of *Wise Blood*, O'Connor adapted her short story "Enoch and the Gorilla" (1947) into a later chapter of the novel, similarly drawing the character of Enoch away from legible normativity. It is interesting to consider how the two works differ in Enoch's ability to present rational thoughts and emotions to the reader, which is notable in Enoch's response to humiliation. This short story and the novel feature passages in which Enoch Emery is subjected to "sharp and painful" humiliation from the words of a man in a gorilla suit: Enoch tells his life story to the man, who he initially perceives to be an actual gorilla and who then tells Enoch to "go to hell" (O'Connor, *Stories* 111). In "Enoch and the Gorilla," Enoch rebounds from the altercation with "the virtue of hope," allowing him to move forward from his feelings of shame in a way that his *Wise Blood* counterpart cannot. In fact, O'Connor refers to Enoch's future, describing him with "ambition" and the desire "to better his condition" and "become something" (*Stories* 111-112). Each of these phrases point to the future, and they associate the future with hope. Here, O'Connor provides Enoch with the ability to forge a future, giving the reader a mild sense of confidence in Enoch at the story's close. In

the corresponding chapter of *Wise Blood*, O'Connor portrays Enoch as a more unstable character, prompting the reader to feel a sense of anxiety at the chapter's close. After his abrasive experience with the man in the gorilla suit, Enoch reacts with a kind of petulant urgency, having "an urgent need to insult somebody immediately," which gives the reader the impression that Enoch is both childish and menacing (O'Connor, *Wise Blood* 183). This character attempts to accomplish this with no less juvenile malice: he uses "one of his special looks" to antagonize another character and "give his feelings even a temporary relief" (O'Connor, *Wise Blood* 183). Specifically, the language of "special looks" points to immaturity, and his need to seek "temporary relief" points to a lack of regard for long-term outcomes. The pairing of Enoch's childishness with aggression gives him a more intense persona as it suggests that he acts based on his emotions rather than reason and that he is unstable as a result. This instability contributes to Enoch's unintelligibility within normative culture.

Enoch's instability is reiterated through his irrational thoughts and expectations in *Wise Blood*. Consider the following passage in "Enoch and the Gorilla," in which O'Connor writes of Enoch's plans for the future: "He had only a vague idea what he wanted... He wanted, some day, to see a line of people waiting to shake his hand" (*Stories* 112). In this passage, Enoch's thoughts are not unexpected or outlandish; he is a young man who desires success but does not have a fully formed plan to accomplish it. The counterpart of this passage in *Wise Blood* points to self-indulgence and a lack of reason in the character. Consider the moments in the following passage that differentiate it from the one above: "He had only a vague idea of how he wanted to be rewarded ... He wanted to be THE young man of the future, like the ones in the insurance ads. He wanted, some day, to see a line of people waiting to shake his hand" (O'Connor, *Wise Blood* 193). When O'Connor writes of Enoch's "vague idea how he wanted to be rewarded," she

reveals an illogical, childish entitlement Enoch's desire for a reward (*Wise Blood* 191). More specifically, the shift to this phrase creates a moment in which Enoch is no longer understandable as a commonly ambitious and naïve young man, and the shift suggests that Enoch's worldview in *Wise Blood* is largely selfish. Moreover, this selfishness is associated with a marked limitation of his understanding of the world around him. When O'Connor writes of Enoch, "He wanted to be THE young man of the future," she prompts the reader to observe Enoch's vague and illogical ambitions of grandeur (*Wise Blood* 193). It is obvious to the reader that Enoch cannot reach this goal, as it is ill defined and unattainable. The fact that Enoch seems to desperately desire to reach this goal, alongside its comically vain implications, suggest that Enoch has a poor grasp of his place in reality. His unsound view of reality is reaffirmed in his elevation of "the ones in the insurance ads" as role models for success. Like his desire to be "THE young man of the future," these role models are representative of vague and poorly thought out goals. Here, Enoch seems to think that the people in the insurance ads are not actors, which is a childish assumption and gives his goals even less grounding in reality. In this instance, Enoch's goals do not seem to be based upon reason, prompting the reader to find them ridiculous rather than understandable. Without a clear path of logic for the reader to follow, Enoch's thoughts and actions are rendered abnormal and absurd to the reader.

Recall that both Enoch and Haze exhibit more extreme personas in *Wise Blood* than in their respective short stories. Because the revisions analyzed above occur after O'Connor's diagnosis and onset of disease, the reader can read their darker tone with an eye to her illness. O'Connor's authorial decisions, specifically the changes she makes to the character of Haze and Enoch, can be read as suggestions of her thoughts and emotions in the wake of her chronic illness. The changes discussed in the previous section create distance between O'Connor's

characters and their ability to play into and operate within normative society. Their aggression is shocking and falls outside of normative boundaries, and as such, it parallels the violence in *Wise Blood* and pushes forward a darker tone for the novel.

O'Connor's character revisions exhibit a similar trend towards extremity and darkness in her revision of one of her earliest short stories, "The Geranium", written before O'Connor became symptomatic, into "Judgement Day" (1964), written in the hospital shortly before her death. "The Geranium" follows an elderly man after he has moved from the South to live with his daughter in New York City, and "Judgement Day" follows a similar plot with the addition of violence interactions between the elderly man and his daughter's neighbor. O'Connor's revisions to her portrayal of the African American neighbor reveal a close pairing of non-normativity with aggression. In "The Geranium," this neighbor, referred to as "the Negro," is friendly and helpful towards the focus of the story, Old Dudley. His helpful attitude is evident when he neighbor helps Old Dudley up the stairs: "'You better be careful,' the Negro said. 'You could easily hurt yourself on these steps.' And he held out his hand for Old Dudley to pull up on" (O'Connor, "Geranium"). The tone put forth by the neighbor in this interaction is amicable—he seems to wish Old Dudley well when he reminds him to "be careful"—and his action to reach out to aid Dudley is a physical display of kindness. In fact, he shows genuine consideration for Dudley's wellbeing as O'Connor describes him "waiting on every step till Old Dudley got on it" and "explaining guns and makes" in an effort to make pleasant conversation ("Geranium"). In this moment, the neighbor is friendly and unremarkable, despite Dudley's preoccupation with his race, and it is clear that the neighbor does not exhibit any aggressive or suspicious behavior towards Dudley. As such, it is easy for the reader to locate him within normative boundaries.

In “Judgement Day,” the neighbor exhibits an altogether more extreme persona, and his aggressive and violent words and actions distance him from normativity. The plot and characters of this short story are structurally similar to those of “The Geranium,” though the old man is named Tanner instead of Old Dudley. In this later story, the neighbor takes on a larger role in the story, and his demeanor is radically different. Rather than being personable and helpful, the neighbor is physically and verbally hostile. His hostility is evident in his first violent encounter with Tanner: “When he was close enough he lunged and grasped Tanner by both shoulders. ‘I don’t take no crap . . . off no wool-hat red-neck son-of-a-bitch peckerwood old bastard like you’” (O’Connor, *Stories* 545). The jammed nature of the words in this statement suggests urgency and anger on the part of the neighbor, and he is obviously belligerent in this moment. This encounter occurs in the same location of the stairwell as the neighbor’s acts of kindness in “The Geranium,” and this similarity of location strengthens the contrast of the neighbor’s actions. It is worth considering the different meanings of this character’s touch in this location in each story. In “The Geranium,” the neighbor’s touch is intended to be comforting: “‘Well,’ the nigger said, ‘it’s a swell place—once you get used to it.’ He patted Old Dudley on the back and went into his own apartment” (O’Connor, “Geranium”). Despite Old Dudley’s racist attitudes, the neighbor’s addition of “once you get used to it” to his overall positive statement suggests that he is sympathetic towards Dudley and indicates his intent for his touch to be encouraging. In “Judgement Day,” the neighbor’s touch suggests no sympathy but rather malice. O’Connor writes, “The Negro slammed him against the wall. He yanked the black hat down over his eyes. Then he grabbed his shirt front and shoved him backwards to his open door and knocked him through it” (*Stories* 545). Here, his touch is one of significant violence. The juxtaposition between the opposing interests and effects of the neighbor’s touch in the same location points

again to the obvious favoring of violence the reworked character of the neighbor. This violence is jarring and renders the revised neighbor in clear opposition to the standard normative model of the neighbor of “the Geranium.”

O’Connor’s altered portrayal of the neighbor as non-normative extends further than this violence into her characterization of his personhood. O’Connor portrays the neighbor in “The Geranium” to be a model of normative society; she describes him with very conventional details, calling attention to his “his trimmed mustache,” “gray socks with a black fleck in them,” and his “clean and cut squarely” fingernails (“Geranium”). In contrast to this, O’Connor describes the neighbor in “Judgement Day” in such a way that he seems both less normative and less human. This neighbor is more animalistic in the aggression discussed above and also in his mannerisms. When O’Connor writes, “A seething noise came out of the Negro before he spoke,” the neighbor seems like a threatening animal (*Stories* 544). Similarly, when “a tremor rack[s] him from his head to his crotch,” the neighbor seems to be physically influenced by his anger, suggesting that he must act on his instincts and emotions like an animal (O’Connor, *Stories* 544). Moreover, the details of his clothing and physical appearance are omitted, and this has the effect of making the neighbor seem to be much less a part of normative human society than his counterpart in “The Geranium.”

Recall the contrast between the friendly, typical presence of the neighbor in “The Geranium” and the malicious neighbor in “Judgement Day.” This contrast reflects a shift that occurred in O’Connor’s writing between her early years of writing, pre-disease, and her final weeks of writing the hospital, an environment in which her disease was ever-present. Her rewrite of the neighbor makes him malicious, violent, and animalistic, and an effect of these attributes is to significantly darken the tone of the story. More literally, the effect of these attributes is to

drive the neighbor to murder Tanner. As a result, it is clear that “Judgement Day” is much more grim and sinister story than its predecessor.

O’Connor’s changes to the neighbor, Haze, and Enoch result in characters that are more aggressive and separate from normative culture, and these characters in turn propel darker, grimmer stories. This is evident in the progression of Haze’s character: after first appearing to the reader as a passive, unremarkably normal force in “The Train,” Haze reappears as an aggressive presence in *Wise Blood*, running over a man in his car and blinding himself later in the novel. Haze’s character, like those of Enoch and the neighbor, is indicative of the pairing of non-normativity with violence in O’Connor’s revised works. This pairing will be explored further in the following chapter.

## Chapter Two

### *Relevant Historical Context of Lupus and Disability*

It is important to consider the treatment and social perception of chronic disease and lupus in the decade of the 1950s as factors affecting O'Connor's experience with the disease. Limited scientific knowledge and a broadly conformist culture contributed to the pain and isolation felt by chronic disease patients. The social climate of the time, compounding with the state of chronic illness, was conducive to the medicalization of disability, setting disability at odds to normative expectations and presenting people with disabilities as sick, helpless, and pitiable. The model of disability, as O'Connor would have known it, was one prescriptive of disability as a non-normative category characterized by dehumanization, social isolation, and perceived helplessness.

In order to discuss disability narratives with regards to O'Connor's works, it is first necessary to establish chronic illnesses and, more specifically, lupus as a subcategory of disability. Many chronic illnesses are protected as disabilities under the Americans with Disabilities Act. This act provides a generally accepted definition of disability off of which this thesis will operate, stating "an individual is considered to have a 'disability; if s/he has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment" ("Americans"). "Major activities" includes those of caring for oneself, eating, sleeping, walking, lifting, concentrating, and working, among others ("ADA"). Recall from the description presented previously in this thesis of O'Connor's symptoms of lupus that they limited her ability to walk, eat, and work.

Therefore, one can consider O'Connor's illness to be a form of disability and thereby influenced by model and narratives of disability.

It is similarly necessary to understand the medical and social factors associated with systemic lupus erythematosus. Diagnosis of this disease was sometimes problematic as it presented with a variety of symptom combinations that fluctuate with time. As a result, it was often misdiagnosed as rheumatoid arthritis, and O'Connor herself was originally misdiagnosed in this way (Gooch). As stated in the previous chapter of this thesis, about 50% of lupus patients at the time survived more than 4 years post-diagnosis, meaning the prognosis for lupus was grim (Dibner 19). Coupled with this poor prognosis was the relative rarity of the disease as it had an incidence of about 1.51 in 100,000 (Uramoto). This data can be extrapolated to suggest that about .0000151% of the population in the United States suffered from SLE. Consider this small percentage in contrast to the 0.93% of the population that suffered from diabetes in 1958, the first year on record for this disease (United States). This small number of patients with this disease stood to benefit from the recent discovery of corticosteroids as treatments for SLE (Mallavarapu). Consistently, O'Connor was treated with ACTH, meaning adrenocorticotropic hormone, which inflicted painful side effects on her (Gooch). Considering the disease's infrequent, varied, and fatal presentation, it is likely that little support was readily available to O'Connor and others with the disease.

It is interesting to consider how the disease's support and treatment was influenced by the larger state of chronic disease at the time. Chronic disease became a term that encompassed a growing number of people, meaning that a problem of implementing long-term care arose for American families. In 1950, about 28 million people (about 0.18% of the population) fell into this designation, 5.3 million of which needed long-term care (Weisz 118). These numbers

compounded with larger social factors to the detriment of people with chronic diseases. On a large scale, “the threat of chronic disease was increasingly unacceptable to a nation that had come out of World War II as the world’s dominant superpower” (102). While this drive to maintain a strong society led to a number of relevant healthcare reform policies, it also led to paternalism towards those with disabilities in addition to the institutionalization of a greater portion of them (Powell). In a specific example of this, parents were often advised by healthcare professionals to institutionalize children with disabilities (Rapp). While institutionalization can be viewed as a kind of support for chronic disease patients, this type of treatment was likely to contribute to the social isolation of people with chronic illnesses and other types of disabilities. The social isolation of these people and the lack of comprehensive support are critical factors to consider with regards to the abjection of disability. Those with disabilities are removed from normal, functional society and therefore are unable to contribute to or present themselves as legible members of society.

The medical model of disability exists alongside the social isolation of those with disabilities to subject them to a specific narrative of sickness and helplessness. The ideas of Talcott Parsons, a prominent American sociologist in the 1950s, are indicative of the medicalization of disability, as it was understood in this decade. Parsons suggests that, by seeking assistance, people with disabilities entered into the “sick role,” which exempted them from “normal routine and capacity to fulfill meaningful roles” (Hayes 357). He further indicated that these people are motivated by “the desire to meet normative expectations” and therefore “[became] passive agents who listen and adhere to the experts” (357-358). Parsons’ assertions of the weight of these normative expectations and the social exemption of people with disabilities were reflected in popular culture. The normative expectations he discusses include able-

bodiedness as well as other expectations of normative society, including the expectations of marriage and fertility. These expectations can be viewed as nearly ubiquitously present in television shows in the 1950s. Depictions of white, heterosexual, middle-class men and women with families, in which the women were domestically gifted and feminine, were “a result of the media’s denial of diversity” (Coontz 31). This systematic denial is consistent with the institutionalization and medicalization of those with disabilities and reaffirms the abjection of these people.

The medicalized model of disability that would have been familiar to O’Connor is closely tied to the dehumanization of those with disabilities as well as to the erasure of the experiences of these people. Considering the historical and cultural contexts of chronic disease and disability presents an opportunity for O’Connor’s reader to find moments in O’Connor’s works that complicate and subvert the traditional narratives of disability. In a similar manner to the previously discussed instances in O’Connor’s revised works that handled non-normativity, an additional number of O’Connor’s works seem to continue this exploration of normativity and non-normativity, responding specifically to body and role normativity as they existed in O’Connor’s time.

*Reading Non-Normativity to Disrupt Previous Narratives*

Moments of violence in O'Connor's short stories serve to highlight and violate the common, safe, and smooth spaces usually allocated to normative bodies. This paper will explore the impact that moments of violence and portrayals of the victims and perpetrators of these moments have on the reading of normativity, non-normativity, and disability in O'Connor's short stories. Close reading of O'Connor's stories "Judgement Day" and "Good Country People" reveals the use of othering and dehumanization to disrupt surface-level narratives of helplessness and victimhood. Specifically, the pairing of violence and helplessness alongside victims and perpetrators that fall outside of normative boundaries serves to reveal a ridiculous and senseless nature to the diminishment of the humanity of those with disabilities.

O'Connor rewrote one of her earliest short stories, "The Geranium" (1946), into "Judgement Day" (1964) shortly before her death, infusing the latter version of this story with more elements of violence. In O'Connor's short story, "Judgement Day," Tanner, an elderly southern man who has recently moved to New York City to live with his daughter, suffers two assaults at the hands of his black neighbor. These moments of violence illustrate instances of aggression against a person with varying degrees of disability. Upon introduction to Tanner, the reader receives some indication that he is of advanced age: he is described as an "old fool" and an "old man" several times, and it is clear that he has come to live with his daughter because he had previously been "squatting" on someone else's land (O'Connor, *Stories* 531, 535, 545). The reader observes Tanner's advanced age to have limited his ability to live autonomously and self-sufficiently. In this way, the reader can find a display of traditional notions of disability. In fact, Tanner's age is identifiable as a form of disability under Robert McRuer's definition of disability

as “the one identity that all people will embody if they live long enough” (McRuer 30). Tanner’s disability becomes even more readily apparent after Tanner suffers a stroke, the physical repercussions of which lead him to rely on his daughter for assistance with everyday activities. His reliance is accepted by his daughter as a chore, and this routineness relinquishes Tanner of his bodily autonomy. Before leaving their apartment, his daughter tells Tanner, “You’ve been to the bathroom and you shouldn’t have to go again” (O’Connor, *Stories* 547). This statement seems like one that someone would say to a dog; its matter-of-fact nature suggests that Tanner’s daughter dictates his bodily functions—her able-bodiedness allows her to do this—and that it would be wrong for Tanner to defy this dictation. In a similar diminishment of Tanner’s autonomy, his attempts to exert his own will or express his opinions are re-framed by his daughter as childish. She says that negotiating with Tanner is “as bad as having a child” (O’Connor, *Stories* 533). Her infantilization of Tanner expands the perception of disability from the physical to the mental, suggesting that his immobility and difficulty speaking renders him unable to make decisions for himself and again point out his helplessness. These moments indicate that Tanner’s helplessness is forced upon him in a similar manner to the way that violence is forced upon him.

The violence of Tanner’s first assault pulls him further into a state of disability. Prior to his first encounter with violence, he embodies a form of disability. Reference to his age is notable in his neighbor’s threatening whisper before the attack: “ ‘I don’t take no crap,’ he whispered, “off no wool-hat red-neck son-of-a-bitch peckerwood old bastard like you’ ” (O’Connor, *Stories* 545). The reader can perceive from this statement that the upcoming violence may be motivated by the neighbor’s perceptions of Tanner’s antiquated notions of race relations—in fact, Tanner has tried to bond with his neighbor as he would with a black man in

the South, calling him “Preacher” as a term of racialized endearment (O’Connor, *Stories* 544). The language describing the assault is worth noting; “[The neighbor] yanked the black hat down over his eyes...From the kitchen the daughter saw him blindly hit the edge of the inside hall door and fall reeling into the living room” (O’Connor, *Stories* 545). The repeated use of language that evokes blindness also evokes helplessness as Tanner cannot anticipate, prevent, or subvert the assault. This association drawn between blindness and helplessness serves to highlight the common-held association between this helplessness and age presented in this story, and the violence of the moment highlights this second association—Tanner seemingly cannot survive on his own. However, the violence is jarring enough to push the reader to question the dynamics of age, disability, and helplessness in this short story.

The moments of violence in this story work against the narrative of Tanner as helpless to problematize this narrative of a person with a disability being devalued and rendered less human. Consider the second instance of violence against Tanner. Tanner rebels against his daughter by trying to leave the apartment building to return to the South. This rebellion is an exertion of his autonomy, and he is put back in his place when his neighbor murders him. This rejection of his autonomy is apparent when, after having fallen in the stairwell, Tanner reaches out to his neighbor for help, saying, “Hep me up, Preacher,” only to receive death in return (O’Connor, *Stories* 549). Following this interaction, the reader receives only a short account of this death, in which the matter-of-fact language and gruesome details contrast to give the reader a stronger read of a problematic nature to Tanner’s story. O’Connor writes, “His hat had been pulled down over his face and his head and arms thrust between the spokes of the banister; his feet dangled over the stairwell like those of a man in the stocks...They cut him out with a saw and said he had been dead about an hour” (*Stories* 549). The distance evident in this passage attributes a

dehumanizing quality to Tanner. Moreover, from this moment, it is apparent that Tanner has been rendered immobile and helpless in a very concrete way—between the spokes of the banister. Similarly, the image of his hat covering his eyes recalls the concept of blindness. These images of non-normative abilities alongside such gruesome violence again disrupt the narrative of helpless, disabled persons who exist quietly under normative life. This point is reiterated in a statement following Tanner's death and referring to his daughter's life after this point: "Now she rests well at night and her good looks have mostly returned" (O'Connor, *Stories* 550). This darkly comical nod to the undisrupted and overwriting nature of normative bodies and abilities leaves the reader with a final impression of the problematic nature of the dehumanization of Tanner as a result of his disability.

While the previous paragraphs consider the effects of this violence on the reader's understanding of Tanner, it is interesting to consider the portrayal of the neighbor as the perpetrator of this violence. O'Connor's portrayal of the neighbor's acts of aggression draw upon the myth of the black assailant, abuser, or rapist and the demonization of black men to present the neighbor as the other and as a malicious being. While "Judgement Day" is written in the third person, the narrator switches back and forth from an omniscient, unbiased perspective to the perspective of Tanner. As a result, it is important to separate the descriptions of the neighbor with regards to these perspectives. For example, when O'Connor writes, "He didn't believe the nigger was any actor," the reader can easily determine that this derogatory description of the neighbor constitutes Tanner's view of him (*Stories* 542). In the omniscient narrator's descriptions of the neighbor, he is often referred to as "the Negro" (O'Connor, *Stories* 542). It is worth noting that this descriptor is used in a similar manner to a pronoun with regards to every African American character in the story and with regards to many African American characters

in other stories of O'Connor's. Nevertheless, in the moments surrounding the first assault in "Judgement Day," the narrator's constant referral to the neighbor as "the Negro" assigns the neighbor some kind of extra-human power. While the neighbor has less institutional and societal power due to his race, this othering serves to make him more menacing and animalistic.

O'Connor writes, "A seething noise came out of the Negro before he spoke," drawing a parallel between the neighbor and an aggressive animal (*Stories* 544). Again, when "a tremor rack[s] him from his head to his crotch," the reader understands that the neighbor has little control over his anger, in turn making him seem more subject to his baser instincts (O'Connor, *Stories* 544). During the first assault, the neighbor is effectively othered from normative society and the reader.

O'Connor's presentation of the neighbor during the second assault differs somewhat from her presentation of him in the first. The neighbor is referred to as "the Negro" in all but one of the references to him leading up to the second assault. In the final reference in these pages, he is "the actor" and uses "a mocking voice," giving his action to murder Tanner a more deliberate air (O'Connor, *Stories* 549). These descriptions serve to give the neighbor a stronger indication of malice. This apparent malevolence further others him from Tanner, who "wanted to have one more try at making friends with him," from the indifferent daughter, and from the reader (O'Connor, *Stories* 545). This othering has the effect of making his violent actions seem more senseless and bizarre—despite the implications of systemic racism, assault and murder are not understandable responses to the paradoxically friendly and racist comments of an old man. As a result, it is the neighbor's unbelievable inhumanity that diminishes the humanity of Tanner—both by senselessly assaulting him and by putting him in a position in which his daughter then infantilizes him. This tragic ridiculousness allows the reader to conclude that the repercussions

Tanner experiences as a result of the neighbor's inhumanity are not inherent implications of disability. That is, it is ridiculous to accept the violence, which is restricted to occur between those who are different from normative society, as the only problematic treatment of Tanner's disability when it is clear that Tanner is dehumanized and infantilized by his daughter as well. Therefore, the reader can infer that O'Connor uses violence and her portrayal of the perpetrator as devices to disrupt the surface-level narrative of the helpless, vulnerable, disabled Tanner.

Like "Judgement Day," O'Connor's short story "Good Country People" (1954) points to a questionable relationship between Hulga's disability and other characters' actions to de-value her humanity. Hulga, a thirty-something amputee with a heart condition and a Ph.D. in philosophy, has lost her leg in an accident and is repeatedly inflicted with violent experiences. The incident that led to the loss of her leg is gruesome; "the leg had been literally blasted off" and "she had never lost consciousness" (O'Connor, *Stories* 275). These descriptions intensify the pain and horror associated with the incident, and the grisly nature of this incident attributes to Hulga a visible disability and renders her into a spectacle for an employee on her mother's farm. This employee, Mrs. Freeman, is fascinated by Hulga's artificial leg and is eager to "to listen to [the story of Hulga losing her leg] any time as if it had happened an hour ago" (O'Connor, *Stories* 275). In this instance, Mrs. Freeman's relentless interest reflects a sentiment that comes up in a number of O'Connor's stories—that of someone with a non-normative body being othered and viewed as if he or she is a display.

This notion of Hulga as a spectacle continues as she is violated further in the story. She is further rendered into a source of perverse sexual gratification for Manley Pointer, a young man pretending to be a naïve bible salesman. Like Mrs. Freeman, Pointer is fascinated by Hulga's prosthesis. Making romantic advances towards Hulga, Pointer whispers to her, "Show me where

your wooden leg joins on,” giving the reader an initial indication that his fascination with her is sexual in nature and is limited to her prosthetic leg rather than her other attributes (O’Connor, *Stories* 288). In this way, Pointer objectifies Hulga and diminishes her humanity. In fact, it seems that Pointer’s keen interest stems from the bodily difference attributed to Hulga by her wooden leg. He tells her, “It’s what makes you different. You ain’t like anybody else,” speaking in reference to her wooden leg (O’Connor, *Stories* 288). In this moment, Pointer gives another indication of othering Hulga as a result of her non-normative body presentation. This othering and objectification seem to be what drives Pointer to commit such a bizarre act of violence when he steals her prosthesis: “‘I’ve gotten a lot of interesting things,’ he said, ‘One time I got a woman’s glass eye this way.’” (O’Connor, *Stories* 291). Pointer views Hulga merely as a vessel for the leg he finds so fascinating, and he easily violates her body and personal safety, suggesting that he does not consider her emotions worthy of value. As a result of his malice and abnormal sexual proclivities, the reader can easily categorize Pointer as a character existing beyond normative boundaries and effectively other him as well. Like with the neighbor in “Judgement Day,” the ridiculous and senseless nature of Pointer’s act of violence and violation give a similar sense of absurdity to his and other characters’ diminishment of Hulga’s humanity.

The reader can continue to read Hulga’s dehumanization after the assault. After Pointer makes off with the leg, O’Connor describes Hulga as “the girl,” despite her being an adult woman, suggesting that this incident has had an infantilizing effect on her (*Stories* 291). As a result of this infantilization and dehumanization, Hulga toys with the script of the helpless disabled person—while the situation has lessened her humanity, throughout the story, Hulga has revealed herself to be a person with a complex and very human array of emotions and attributes. She is irritable, arrogant, and educated but also gullible and beguiled by the possibility for love

or lust. Consider the moment just prior to the assault when Hulga tells Pointer that “we are all damned” and that she has “a number of degrees” before giving “a sharp little cry” and giving in to Manley’s request to view her prosthesis (O’Connor, *Stories* 288). As she asserts the futility of faith and tells Pointer about her education, the reader can see Hulga inflating her ego with a lofty, performed intellectualism that is consistent with her actions earlier in the story. The contrast between this performance and the vulnerability of the cry she utters soon later reveals a very human desire for acceptance and love. O’Connor’s portrayal of Hulga as such further problematizes the work of the story’s other characters to render Hulga less than human.

Dehumanization and othering are processes often found in O’Connor’s stories with regards to non-normative characters. However, these processes seem to be tools used to point out the absurdity of the real life application of them to those who exist outside of normative boundaries, including those with disabilities. O’Connor is well known for her portrayals of violence, death, and damnation, and while these phenomena can be read under a religious lens, they can also be read as meditations on the treatment of disability and non-normativity. In doing so, the reader is able to make sense of senseless violence in O’Connor’s short stories.

## Chapter Three

### *The Context and Relevance of Narrative Medicine*

The previous sections of this thesis have discussed readings of non-normative characters in O'Connor's works, specifically noting their association with violence after the onset of O'Connor's illness as well as their ability to subvert othering narratives of disability. This chapter will speak to the value of considering the field of narrative medicine as an additional step in the analysis of non-normativity in O'Connor's works. However, before reading O'Connor's works in the framework of narrative medicine, it is first necessary to understand the guiding concepts and goals of narrative medicine. This section will argue that narrative medicine presents a framework for the close reading of literature as a relevant method of garnering empathy and understanding for the characters.

Rita Charon, professor of Clinical Medicine and Director of the Program in Narrative Medicine at the Columbia University College of Physicians and Surgeons, is an authority in narrative medicine, and this thesis will treat her theories in this field as expert. In an article published in the *Journal of the American Medical Association*, Charon states that the model of narrative medicine fosters narrative competence, "the ability to acknowledge, absorb, interpret, and act on the stories and plights of others" (Charon). She indicates that providers of medical care achieve narrative competence in part through the close reading of literature, which allows them "to grow in their personal understanding of illness" (Charon). This personal understanding of illness is closely associated with providers' ability to experience and display respect and empathy for patients' experiences of disease. This empathy is key for the creation of stronger,

more therapeutic relationships between physicians and patients, which seems to be the goal of Charon's model of narrative medicine.

Like Charon, most scholars writing on narrative medicine cite empathy and understanding as desired and useful outcomes for those engaging in the field. It is worth considering the ways in which narrative medicine may be applied to the study of disabilities. Rebecca Garden, an associate Professor of Bioethics and Humanities at Upstate Medical University and the former Associate Director of the Program in Narrative Medicine at Columbia University's College of Physicians and Surgeons, has written on this topic in an article published in the *British Medical Journal*. In this article, she suggests that awareness and critical engagement with disability narratives can broaden providers' understanding of disability and empower those with disabilities in healthcare settings. She problematizes the "normative scripts" of disability, meaning the outside perspective that each person's experience with disability begins with tragedy and either ends in recovery or continued struggle for normalcy (Garden 74). A similar problematizing of these normative scripts has been previously discussed in this thesis with regards to the works of Flannery O'Connor. Garden's discussion of the place of narrative medicine in the study of disability puts forth the foundation for the possible outcomes of reading disability narratives in O'Connor's works.

Leading scholars in narrative medicine point to close reading as one of the field's signature practices. In an article published in *Academic Medicine*, the journal of the Association of American Medical Colleges, Charon and two of her colleagues cited a body of evidence and agreement among scientists and scholars in clinical settings in their argument that close reading serves to "strengthen [students'] habits of 'close listening' or 'slow looking,' thereby improving their quality of perceptive attention" (Hermann). Here, Charon and her colleagues suggest that

the interpretive work of close reading pushes readers to pay closer attention to details and nuances within texts and to assign significance to them in such a way that leads them to a fuller understanding of the text. They further indicate that medical providers may apply this interpretive ability to the narratives presented by their patients, allowing them to more fully understand their patients' stories and experiences. This interpretive ability is essential to the development of the empathy and awareness discussed by Garden and Charon in other works.

Consensus in the field of narrative medicine speaks to the nuanced understanding and empathy for the experience of illness and disability that can be garnered from closely reading literature. However, empathy can be developed from reading texts that are less straightforward than autobiographical narratives of an author's experience. Texts with complicated interplays of themes of illness and disability alongside expanses of ambiguity, moral and otherwise, present a unique opportunity for richer readings of these themes and a re-centering of the reader's understanding of characters' humanity.

*Reading O'Connor's Works through Narrative Medicine*

O'Connor's works feature complicated, dark, and grotesque depictions of violence, hypocrisy, and non-normativity. These are particularly rich for analysis and use in narrative medicine because they provide the reader the opportunity to understand a depth to experience that cannot achieve the same effect when said outright. That is, in the case of a number of O'Connor's works, ambiguity, absurdity, and non-normativity in a text can push the reader to understand the characters exhibiting these qualities in a way he or she likely would not otherwise. This means that there are moments in O'Connor's texts when close readings of non-normativity prompt the reader to further read the text with empathy towards the character at hand.

It's easiest to see the value of narrative medicine in a short story that concerns itself explicitly and thematically with illness. Therefore, this section of the thesis will first present a reading of O'Connor's short story, "The Enduring Chill" (1958). This story follows Asbury, a struggling writer from New York, as he returns to his mother's farm in the South with an unknown and persistent ailment, which has caused him to feel certain that he will die. This ailment is later revealed to be undulant fever, a painful infection that will not kill him but instead recur throughout his life. In the preceding summary alone, the reader can find a number of similarities between the lives of Asbury and O'Connor. Recall from a previous chapter of this thesis that, like Asbury, O'Connor returned from the Northeastern United States to a Southern farm, was afflicted with an illness that proved difficult to diagnose, and found her illness to be incurable, recurring, and painful. These parallels form a surface level bridge to the field of narrative medicine: O'Connor seems to be using her personal experiences with her disease in this

story. However, these parallels are less significant than their implication that this story follows topics with which O'Connor is well versed.

In "The Enduring Chill," O'Connor repeats the presentation of non-normative bodies and behaviors discussed in previous chapters of this thesis. Asbury appears and behaves in ways that are outside the norm. Consider this description of his appearance in evidence of its difference from that of a healthy person: "He was puffy and pale and his hair had receded tragically for a boy of twenty-five" (O'Connor, *Everything* 83). This description provides the reader with an image of Asbury's illness as it is apparent to those who view him. When O'Connor follows the descriptors in this line with "for a boy of twenty-five," she indicates that common manifestations and portrayals of youth revolve around a norm of physiological fitness and able-bodiedness, meaning the appearance of health and strength displayed through thick hair, tan skin, and properly proportioned features. Her use of "pale" in this line is similarly telling. Because she uses it as an indicator of Asbury's illness, the reader can assume that Asbury was tanner prior to his symptoms and confinement to bed. Therefore, his paleness signifies his inability to participate in everyday activities and, as a result, isolates him from normative society. This isolation from society is evident when O'Connor notes that Asbury has "been absent so many days from his part-time job in the bookstore that he had lost it" (*Everything* 84). Here, it is clear that Asbury's illness has prevented him from remaining a member of society that would be considered productive. The distance placed between Asbury and normative society further apparent in his mother's reaction to his appearance, of which O'Connor writes, "The smile vanished to suddenly, the shocked look that replaced it was so complete, that he realized for the first time that he must look as ill as he was" (*Everything* 82). The mother's "shocked look"

brought on by Asbury's appearance points to the ability of his appearance to suggest ill health and halt those who lie within the norm.

Asbury's effect to disrupt normative scripts further manifests in his ability to disrupt conversation. For example, instead of engaging with his sister and mother in a seemingly run-of-the-mill family conversation and mild squabble, he refuses to "answer her or turn his head," an inaction that prompts his mother to tell his sister to "leave him alone" (O'Connor, *Everything* 89). In this moment, his silence and lack of movement are unexpected, meaning that the reader would expect a peer or a usual character to respond to those around him. Like his appearance, his non-normative behavior challenges and interrupts the social order. As a result, the reader can locate Asbury in non-normativity in a similar manner to the previously discussed characters of Haze, Enoch, Tanner, and Hulga.

After reading the ways in which Asbury exists outside of normative boundaries for behavior and appearance, the reader can interpret Asbury's experience of non-normativity. This interpretive work is something that Charon asserts to be significant in the practice of narrative medicine. Again, it is easiest to read experiences of healthcare under the lens of narrative medicine. It is therefore important to consider Asbury's interactions with his mother and his physician. When read for plot alone, meaning not in the practice of close reading, these interactions may be read without attention to an intimation of insecurity felt by Asbury in his physician's presence. Take for example the following interaction. After Asbury says, "Get him out of here," about his physician, Dr. Block ignores him "peer[ing] closer" (O'Connor, *Everything* 94). In this moment, Block treats Asbury like a child, ignoring his will in favor of his mother's wish that the physician remain in the room. It is interesting to consider Asbury's response to the physician's examination of him just after this moment: "Asbury lay with a rigid

outraged stare while the privacy of his blood was invaded by this idiot” (O’Connor, *Everything* 95). Asbury’s description of Block drawing blood from him as an invasion suggests that he perceives Block to be an aggressor, infringing upon and subjugating Asbury’s bodily autonomy. In this moment, Asbury both is and feels marginalized by his physician as a result of his non-normativity. This moment is important in Asbury’s narrative because it indicates this marginalization without him saying the words, “I feel marginalized when Dr. Block does not listen to me,” and some amount of interpretive work is required of the reader to understand this.

This interpretive work and its results are significant because the reader cannot feel empathy with Asbury without first understanding him. Recall Asbury’s last interaction with Block, before which Block has revealed to Asbury’s mother that Asbury has undulant fever: “Block leaned over him and smiled. ‘You ain’t going to die,’ he said, with deep satisfaction” (O’Connor, *Everything* 113). If the reader has observed the disrespect Asbury perceives Block to exhibit, then the reader is likely to interpret Block’s close proximity to Asbury and his smile as phenomena that would be supremely irritating for Asbury. That is, the reader can assume that Asbury would find these phenomena to be further instances of Block occupying his personal spaces. This is further apparent when O’Connor writes, “Block’s gaze seemed to reach down like a steel pin and hold whatever it was until the life was out of it” (*Everything* 113). This line points to the suffocating and imposing nature of Block’s presence around Asbury. If the reader perceives feelings of violation on the part of Asbury, then the reader is likely to perceive an increased sense of misery and pain in this moment.

Similar conclusions can be drawn regarding of all of the texts read closely so far in this thesis. Take for example the case of Enoch in the section of *Wise Blood* adapted from “Enoch and the Gorilla,” previously discussed in the first chapter of this thesis. Recall that this previous

chapter presented a reading of Enoch's non-normativity in this section of *Wise Blood*, primarily pointing to instances of his childish lack of logic to locate him outside of normative boundaries for appropriate adult reasoning and action. Reading Enoch's childishness gives the reader the ability to better understand Enoch's motivations for his interaction with the gorilla and subsequent humiliation. Consider O'Connor's description moment when Enoch shakes hands with the gorilla: "It was the first hand that had been extended to Enoch since he had come to the city. It was warm and soft" (*Wise Blood* 181). Here, O'Connor gives the reader an indication of Enoch's isolation and the loneliness Enoch feels at this isolation. When O'Connor notes that this is the first hand "extended to Enoch" and follows this with the descriptors of "warm" and "soft" that imply safety and comfort, she implies that Enoch has been unable to connect with another person in the city and that he appreciates the connection instantaneously afforded to him here. In this moment, the reader can understand that Enoch has reached out to the gorilla and told him details of his life in an effort to reduce his isolation, and the reader understands Enoch's illogical logic to be at play here. That is, once well versed in the Enoch's childish thoughts and behaviors, it is easier to the reader to identify this line as one indicative of Enoch's motivations for the absurd encounter with the man in the gorilla suit. The reading of non-normativity is important here because it not only draws the reader's attention to this detail but also gives the reader a framework with which to empathize with Enoch. This means that the reader can empathize with him rather than use his non-normativity to other him.

The reading of Enoch that prompts the reader to gain a sense of understanding and empathy for this character is indicative of the potential results of close reading and, more specifically, close reading for the lines of normativity and non-normativity in O'Connor's works. The above readings of Enoch and of Asbury suggest that analyzing non-normativity in

O'Connor's characters provides a unique window into understanding these characters, meaning that the reader can find empathy where he or she would otherwise find an other. Therefore, these readings are demonstrative of the key principles of narrative medicine—in them, close engagement with the text is closely associated with empathy.

## Conclusion

Flannery O'Connor is well known in American literature for her portrayal of absurdity, which often makes use of depictions of violence, the grotesque, and disabled or abject characters. Non-normativity becomes apparent through these characters, and it is highlighted in the contrast between the earlier and later versions of the characters she revised in the midst of her ill health. Moreover, these revised characters reveal an association between violence, absurdity, and non-normativity that is deserving of further exploration. Close reading of the pairing of violence and non-normativity, as it is discussed in "Good Country People" and "Judgement Day," leaves the reader with an impression of the problematic nature of the dehumanization of non-normative people, including those with disabilities. Close reading non-normativity under the lens of narrative medicine has a similarly humanizing effect, prompting readers to understand non-normative characters like Asbury or Enoch with empathy. As a result, O'Connor's non-normative characters can be read both through and beyond their absurdity, and the value of their humanity becomes apparent as readers attach human understanding and empathy to them.

Close reading of this topic is necessary because surface-level readings of a number of O'Connor's works may reveal a close association between non-normativity and violence that may be construed as a condemnation of non-normativity or as aimless use of the macabre. This is the same reason why satires like Mark Twain's *The Adventures of Huckleberry Finn* or the television show *South Park* cannot be read and accepted solely at the surface of their plots. Readers have a responsibility to use the information available in a text—in its tone, among other details of it—to put together a conscious reading of its themes. Otherwise, there is little to no point in reading texts more complex than Judi Barrett's *Cloudy With a Chance of Meatballs*.

That is to say that texts that initially seem morally ambiguous, like many of the works of O'Connor, prompt their readers to think and to dig within the texts to find meaning in them. O'Connor's works are valuable in that they provide a platform for readers to first notice and then more closely read the portrayal of non-normativity, finding meaning in the recognition of these character's humanity. When readers recognize moments in O'Connor's works that prompt them to feel empathy for a character that exists outside of normative boundaries, they are recognizing the value of this character as the parallel of a human being, meaning they exercise their ability to value the humanity of a peer who acts outside of these boundaries.

This greater valuation of the humanity of O'Connor's non-normative characters is important because those who gain this understanding also gain experience in empathizing with those unlike themselves or those who exist outside of normative society. This empathy is important for a wide range of readers because it may prevent them from rendering those who they perceive to be non-normative as others, thereby contributing to more thoughtful interactions and, perhaps in turn, more thoughtful societal expectations. Likewise, the development of empathy for others is critical for healthcare providers are extremely likely to encounter patients who they consider to operate apart from normative society. Strong, effective, and therapeutic provider-patient relationships cannot exist if patients do not feel respected, and patients are unlikely to feel respected if providers do not value the humanity of these patients or empathize with them. This is one of the key principles off of which narrative medicine operates. The application of narrative medicine to the works of O'Connor lends validity to the argument that close readings of these readings are significant. That is, the close reading of O'Connor's works has a beneficial outcome, and this is advocated to those outside of the discipline of English literature in the application of the principles of narrative medicine.

This thesis will end in similar fashion to the manner in which it began—with an excerpt from one of O'Connor's shocking and graceful stories. Consider the following moment from "The Temple of the Holy Ghost" (1954), a short story that follows a young girl as she attends a spectacle showcasing an intersex person: "The freak had a country voice, slow and nasal and neither high nor low, just flat. 'God made me thisaway and if you laugh He may strike you the same way. This is the way He wanted me to be and I ain't disputing His way'" (O'Connor, *Stories* 255). This story, like many of O'Connor's other short stories not included in this thesis, gives a depiction of a non-normative body and person, and there is something genuinely and damningly intriguing about the intersex character's words on difference in this moment. Although this conclusion is not the place for close reading, this passage is an example of the numerous more moments in O'Connor's works that display non-normativity and may provoke a unique reading and understanding of these moments.

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