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POWER DYNAMICS AND NARRATIVE HUMILITY: A CRITICAL STUDY OF BARKER'S REGENERATION

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Abstract

This paper explores the concept of narrative humility and power dynamics through Barker's Regeneration, that delves into psychological trauma of soldiers during World War I. Narrative Humility is empathetic approach for better recovery and treatment of patients through stories without any biases and socially construct paradigms. This study examines interactions between patients and caregivers in the fictional Craiglockhart War Hospital, raises questions on systematic and institutional power. Rivers' approach towards listening and willingness to learn from his patients' experiences challenges the conventional power dynamics of social and individual morality while going through the conflict of emotions that stories have stirred. Power Dynamics refers to idea of authority and inherent structure of power and influence of collective/social narrative on individual perspective, how narrative humility helps in recognition of these pattern and acknowledging other's experiences and their stories with humility and empathy. Dr. Rivers journey in Regeneration not only critiques the dominant war narratives but also engage with the characters' experiences in a manner that acknowledges the limitations of understanding in-front of institutional and societal power, such as military demand for soldiers to return to front.

Keywords: *Literature, Medical Education, Narrative Humility, Power Dynamics And Narratives, Sayantani Das Gupta.*

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1. Introduction

This research explores the novel Regeneration Pat Barker through the lens of narrative humility, exploring how the text highlights the psychological trauma and challenge the moral dilemmas faced by individuals within the context of war (Monteith, 2005). In recent years, the area of medical humanities has gained prominence in the field of social science, like psychology, literature and medical ethics as a mean to approach the stories and experiences of patients through tools that critical theory offered. The stories of minorities, marginalized communities, individual from traumatic past with respect, openness while acknowledging biases and respecting autonomy of individual stories. This approach study the approach of listening to others' stories giving space of imposing one's own assumptions or interpretations while acknowledging the complexity of human experience and the subjectivity inherent in storytelling. Hurwitz (2000) talks about narrative and medicine, narratives are central to how we understand our reality and experiences. It helps balance medical culture by recognizing the human side of patients while maintaining clinical focus. This approach bridges the humanities and sciences, offering a broader perspective on medical practice, in era where evidence-based medicine is becoming more data-driven. It highlights the importance of doctor-patient consultation in both generating medical knowledge and keeping human connection.

Listening skills is as important as communication, physicians has to be objective regardless of their race, gender and collective believes towards certain communities and believes. In Barker's Regeneration, the gruesome trauma experienced by soldiers during World War I is showed with haunting clarity, Dr. William Rivers, a psychiatrist was appointed to treat soldiers suffering from "shell shock." Through Rivers' interactions with his patients, Barker explains the profound emotional and physical impacts of war, emphasizing that trauma is not merely a physical injury to be treated with conventional medicine. Barker in Regeneration shows how narrative shift through stories highlights the limits of medical interventions that aim to "cure" suffering. Good BJ, (1994) says "we cannot have direct access to the experience of other's illness, not even through in-depth investigation: one of the ways in which we learn more from the experience of others is to listen to the stories of what has happened to other people". This portrayal invites a reconsideration of typical medical model, especially in its application to psychological conditions that resist traditional treatment.

Barker talked about classes who were targeted in major historical events and aspects that were never been discussed regardless of severe impacts of them. The burden of one's morality while having a duty that says otherwise and you are controlled by

someone from power and authority shaping your thoughts and narratives. In her other works she talks about feminism, gender studies and minorities sharing stories of common people who were ignored in the dirt of history. Barker emphasizes the importance of giving voice to marginalized community through a character, portraying the picture of power dynamics in literature and storytelling. In her other novels like Blow your House Down and The Century's Daughter she explores the lives of working-class women, their struggles and impact of social changes on the lives of people. With the themes of sacrifice, psychological and physical scars, war, societal issues and collective and subjective morality, she explored the vulnerable side of human beings. In her novel The Silence of the Girls, Barker tells the story of Trojan war from the perspective of Briseis a Trojan princess who becomes Achilles' concubine. From celebrating the narrative of bravery by men, male heroes to experience of enslaved women. She challenges traditional patriarchal storytelling and bring light the resilience and effort of women. Frank (2013) in The Wounded Storyteller: Body Illness and Ethics talks about how narratives in life contribute in the betterment of human generation and emotional and physical stability in life. He introduces his theory of socio-narratology, in which he argues that it broadens the traditional concepts of narrative and a story is from conventional perspectives to everyday conversation. He adds that a story cannot be stopped, changed and transformed, if you are brave enough to experience your life, it can bring its characters, situation, setting, troubles, attributes in real world where you fight them through active or passive persuasion. He cited Canadian storyteller Thomas King: "for once a story is told, it cannot be called back….. so, you have to be careful with the stories you tell" (Frank, p.35).

Through her work, Barker tries to reclaim the stories of those who have been historically overlooked, offering a more inclusive and empathetic view of history. This approach aligns with the principles of narrative humility, which dictates acknowledgment and respect towards the diverse experiences and voices that make up history. Using the lens of narrative humility, this work explores the approach towards narratives with open mind, recognizing the limitation of one's perspective, and being willing to learn from stories of others acknowledging the innate biases. Dr Rivers in Regeneration builds stronger connection with his patients, cater to their needs and preferences through compassionate and effective care. Montieth S (2015) argues about the individuals in Regeneration who deal with pressure of military situation and trauma of working-class problems and war veteran and these events that change the history and also effects the personal and social life of individual. The journey of self-awareness of a person comes from within, events that are challenging, fatal and harmful but also the way for awakening comes towards healing through communication and open storytelling .

In Regeneration, Barker navigates the complexities of representing the trauma through the interactions between psychiatrist Dr. William Rivers and his patients, such as the poet Siegfried Sassoon and the fictional Billy Prior. These relationships raise critical questions about who has the authority to tell a story, how narratives are shaped by power imbalances, and the ethical implications of interpreting other's pain. By applying the theory of narrative humility, this article will explore how Barker's novel both critiques and reinforces traditional power structures in storytelling, ultimately offering a nuanced perspective on the responsibilities of storytellers and the transformative potential of empathetic, humble narratives.

Through this analysis, the article aims to contribute to broader conversations about the ethics of storytelling, the representation of trauma in literature, and the ways in which narrative humility can serve as a tool for dismantling oppressive power dynamics in both fiction and real-world contexts.

1.1.Research Objectives:

- Role of narrative humility in shifting power dynamics through communication and skills of narrative medicine.
- Storytelling as a tool to explore human emotions and complexities of moral believes during the major historical events.

1.2. Research Question

- How do the characters in Regeneration navigate the tension between telling their own stories and having their stories interpreted or controlled by others?
- In what way does the theoretical idea of narrative humility helps in understanding the power dynamics in Regeneration?

1.3. Significance of Research

The aim of my research is to explore the healing process of patients who are faced to go through negative reactions of collective believes in a society. This research explains how medicine shows compassion individually through narrative humility during the conflict between personal and social morality. It highlights the healing power storytelling as in narrative humility stories aims towards 'resist reductionism' which enhances compassion and empathy in medical professionals and patients. The purpose of this article is to explore and expand the field of literature while also introducing concepts of narrative humility to future readers and researchers.

2. Literature Review

Das Gupta (2008) talks about the formation of narrative humility as she states Charon who is colleague in narrative medicine at Columbia University, has written and portray the vocal and written images on how a physician can has so many ways to deal with his patients and their stories. The framework of medical training she talks about is the one where educational milestones are taken as competencies and coined the term "narrative competencies." over the Years with collaboration and meetings with Rita Charon and other colleagues, I've come to realize that clinicians should constantly work towards achieving narrative competence, the approach from which engage with stories of suffering must be one of narrative humility.

Gardens (2007) talks about empathy in medical education, the compassion a physician feel towards his patient is above all the gazes, stereotypes and collective beliefs especially towards marginalized community. The challenge with promoting empathy is that it relies on self, including the past memories, experiences, identities, interracial or intersectional selves. It also hinges on sense of affinity. "The problem of empathy begins with the preoccupation with self that obscures the other. Empathy depends on the experiences and imagination of the person who is empathizing, and this dependency has the potential to obfuscate or exclude the patient's suffering and the meaning the patient makes of suffering." (555)

Literature does this trick where it takes to places and to people you feel connected with and somehow without any force feel things for that character from relating to its pain to empathizing the emotions. Narrative Humility is all about taking in all the directions and spaces of a patients' story that belongs to him, while a doctor can rewrite that story, co-produce it with a different and easy direction where he can see the recovery of patient is better way without any judgement and hindrance. It gives a control to physician over the psychological and physical state of patient.

Carel (2016) explore the relationship of patient and doctor and explain new dimension to make them more accessible and peaceful for better recovery of patient. This relationship is the only access towards the illness of patient, the privilege to the new perspective and sides of patient through phenomenological toolkit. The pain and perspectives a patient can talk about is privilege to the physician who comes to first person point of view and direct approach to the first-hand experience's perspective, but there are parts that remain undisclosed, closed the illness experiences not an easy thing to talk about, these experience are inexpressible and physician can never fully know the real story or

pain. Narrative Humility is way to access the barrier between patient first-hand report and his physician, recognizing the short-comings, the subjective and emotional side of pain and story, to know about personal vulnerability, accept and coming to terms with it, physician can gain the access to the opacity of his patient. The patient's experience of chronic pain had an opacity that made it difficult for even the most empathetic doctors to fully understand or address.

DasGupta (2008) talks about medical students engaging with patients and their stories without any prior experience and knowledge about critical thinking or analysis. There are programs that encourage students to read, write and practices that include reflective writing practices in their next professional life with a self-created discipline and self-reflective practices. In these programs, materials like novels and patient stories are often taken as spaces to explore, but this approach can be uncomfortable or even harmful if not taught critically. Medical students can reduce these risks by focusing not just on the content, but also on how it's taught. The authors suggest three key approaches: narrative humility, structural competency, and engaged pedagogy. By applying these principles, medical students can create supportive learning environments that empower early professional life preparing them to be compassionate and reflective practitioners.

Shapiro (2011) argues the necessity of narrative humility in medical education and to understand the stories of patients that are supposed to be respected and valued in medical profession but sometimes taken as for granted or unreliable. She says while it’s important for physicians or scholars to analyze the stories but with the concept that patients are telling their stories for a reason, these stories might be messy or imperfect, but they are valued and should be heard. There has been a focus in academic world on stories that challenge the norms and traditional way of thinking but sometimes pushes the more common and relatable stories and experience out of mainstream boundaries.

Barker uses real life characters and events to give closer experience to reality to readers and the cases Rivers had in Craiglockhart are all inspired from the real life cases the historical figure that had suffered and explained through literature. The empathy, compassion and understanding that River possess and show to his patients are all the qualities that a medical professional meant to have during his sessions, “Rivers got up and went across to the window. He found a bumble bee, between the curtain and the window, batting itself against the glass, fetched a file from the desk and using it as a barrier, guided the insect into the open air. He watched it fly away.” (Barker, p.120)

3. Theoretical Framework

Narrative humility, a concept from medical humanities and narrative ethics, challenges traditional hierarchies of storytelling by emphasizing on a collaborative, self-reflective approach that respects the psychology and vulnerability of those whose stories are being told. The concept of narrative humility which emerged as a response to the need for more empathetic, patient-centered healthcare practices in a biased and controlled setting of society and power. It is the practice of acknowledging that patients' stories are complex but open to interpret, within the context of particular community so listener should be open to ambiguity and contradiction along with perspective within unique personal experiences. Narrative medicine, pioneered by scholars like Rita Charon, emphasizes the importance of storytelling in understanding patients' experiences of illness, suffering, and healing. Gupta has come to terms with importance of narrative but she believes that the without proper practice of empathy and openness, the conduct of empathetic approach would be futile and a burden on medical students. The addition of humility in stories comes from when students are taught to be more humane, open to any type of story and through resisting reductionism in narrative which is the main motto of narrative humility. the physician of mine who, during a recent personal illness, interrupted me to say, "You don't have to say any more. I know exactly how your story ends," clinicians cannot, of course, ever exactly know how any illness story begins or ends." (DasGupta, 2008, p. 980). This article examines Regeneration by Barker through lens of narrative humility, a qualitative framework which discussed power dynamics in a society shaping narratives towards certain classes, Regeneration bringing empathy and self-reflexivity in professional role while facing inner shift in perspectives.

This paper talks about the way Barker uses narrative to highlight the importance of compassion and empathy through narrative humility, how narrative work in power dynamic scenarios highlighting its relevance to contemporary literature and medical practices. Story talks about soldiers who have to fight in war they had no hand in, effecting the psychological and physical state of people actively and passively, and about military and authority who want soldiers back in army regardless of their mental and physical condition. The story goes by different point of views but mainly through the eyes of Dr River, shadow the perspectives and pain of other characters, learn new perspectives of story and his own biased views.

Dr River main goes through the problems of ethical dilemmas, moral consideration with sense of duty and his personal believes, when the gruesome experiences of soldiers forces him to think through the orders the military system implying on them regardless of

the health of the patients. Sassoon, Owen and Graves taken from real life historical figures, have shown their own psychological scars and moral conflicts through writing and literature. This paper shows how narrative works helps in shaping perspectives along with the game of power dynamics through which collective believes in society are built without any space for new ideas and individuality. This methodology ensures the objective exploration of text on power dynamics through narrative humility to deal with ethical and moral dilemmas on the ground level with patients, alongside the therapeutic and healing power of storytelling in literature in medicine.

Charon (2006) in Narrative Medicine: Honoring the stories of illness talks about stories, narratives that helps in understanding, through narrative patient and doctors can get the courage to face each other through empathy and trust. It recognizes that medicine is not just a science but also an art that requires listening to and interpreting patients' stories with care and respect.

While power dynamics often privilege certain narratives over others, narrative humility challenges this hierarchy by centering marginalized voices and accepting the partiality of all stories. In Regeneration, this tension is shown in the conflict between institutional power and individual conflict. Sassoon's declaration against the war is an act of resistance against the dominant narrative of patriotism and sacrifice, Rivers' evolving perspective demonstrates the possibility of reconciliation of power with humility and sense of righteousness. As he listens to his patients, he begins to question the morality of the war and his role in carrying out its violence. The internal conflict reflects the broader struggle between upholding institutional authority and practicing ethical storytelling. “within the current training paradigm, there is a pronounced emphasis on the enhancement of theoretical knowledge and technical skills, often overshadowing the significance of cultivating humanistic qualities. This suggests a need to reassess the balance between professional competencies and the development of an empathetic approach to patient health care within medical education.” (Qian et al. (2024. p.1436)

4. Analysis

The theory of narrative humility works as a framework for understanding the power dynamics in pat barker’s Regeneration, emphasizing the ethical responsibilities of storyteller, listener, reader and for writer. It explains the complex net of power and authority towards individual perspective while promoting the narratives that favor power and systematic totalitarianism. System of inflicting own ideas and perspectives on other, enforcing them with collective narrative, and even in narrating the stories of experiences

of others, consider them through the lens of prejudice and biasness of class system. Frank's seminal work, The Wounded Storyteller (1995), introduces the idea that illness transforms individuals into storytellers who must navigate the chaos of their experiences and make meaning of their suffering. He identifies three primary types of illness narratives: restitution narratives, chaos narratives, and quest narratives. Each of these narrative forms reflects different ways of understanding and communicating the experience of illness, and Frank argues that all are valid and necessary. However, he also highlights the importance of listening to these stories with humility and openness, rather than imposing external frameworks or judgments.

Narrative Humility challenges the traditional hierarchies in society through storytelling by advocating for more self-reflective and compassionate approach, empathetic sincerity towards narrative construction. In Regeneration, it highlights the complex relationship between characters, of Dr Rivers with his patients, high inner conflicts, ethical dilemmas and his position of representing trauma, stories of pain and self-reflexivity, "nothing can justify this…. nothing, nothing, nothing" (Barker, p. 180).

At the heart of Regeneration is the recognition that narratives are never neutral and shaped by power dynamics that determine whose voice is privileged and whose is silenced. Dr. Rivers holds voice and authority over his patients, including Siegfried Sassoon and Billy Prior. His role as a listener and interpreter of their stories places him in a position of power, as he has the ability to shape, document, and even control their narratives. However, Barker complicates this dynamic by showing Rivers' internal struggles and self-doubt, which reflects his self-awareness and journey towards power consciousness, towards the ethical weight of his role. This aligns with narrative humility's call for storytellers to recognize their own limitations and the potential for harm in wielding narrative authority also the vulnerability of change in perspectives in front of experiences filled with pain. "No war is ever justified because I haven't thought about it enough. Perhaps some wars are. Perhaps this one was when it started. I just don't think our war aims--- whatever they may be---and we don't know, ---justify this level of slaughter" (Barker, p. 12).

The interactions of Rivers with his patients challenge his perspectives towards the military and hospital system. Sassoon's anti-war declaration letter, his perspectives and Prior's struggles as a middle-class soldier force Rivers towards the ethical contradictions of his role. The collective narrative of nationalism, patriotism and duty, enforced by the system, clashes with the individual traumatic experiences and moral integrity of the soldiers. He begins to question the system's authority and power, how it suppress the

voices of lower class and individuals and have effect that lead towards mental and physical destruction. This psychological conflict deeps as Rivers understand the situation and power chain, also that healing the soldiers will eventually take them back to military, a place that only adds horror and mentally untenable. As the story develops, his understanding and empathy towards his patients grows with internal determination to fight the system and authority with his narrative power which adds significance in ethical perspective of individualism. “no war is ever justified because I haven’t thought about it enough. Perhaps some wars are. Perhaps this one was when it started. I just don’t think our war aims--- whatever they may be---and we don’t know,---justify this level of slaughter.”(Barker, p.12)

Narrative humility also emphasizes the vulnerability of both the storyteller and the listener, a theme that is central to Regeneration. Rivers himself is vulnerable, as he fight with the moral implications of his work and the emotional toll of listening to his patients’ pain. This mutual vulnerability highlights the importance of approaching storytelling with humility and respect for the those whose stories are being told. “If today really marked a change, a willingness to face his experiences in France, then his condition might improve. In a few years’ time it might even be possible to think of him resuming his education [. . .]. Though it was difficult to see him as an undergraduate. He had missed his chance of being ordinary” (Barker, p. 184).

By giving importance to personal stories of veterans over the dominant narrative, Rivers tries to dismantle the power dynamics that suppress personal morality. This approach shifts from enforcing conformity to generating healing and self-expression, with practice of self-reflexivity towards his own moral transformation. This shift in narrative is not without conflict, Rivers struggles with guilt and ambiguity, conscious of how his profession ultimately serves a system that he no longer believes in. Barker critiques the medical and military systems that seek to control the narratives of soldiers, often silencing their voices in the process. Sassoon’s public protest against the war is dismissed as a symptom of shell shock, undermining his agency and the validity of his perspective. Prior’s struggles with class and identity highlights how societal power structures shape whose stories are deemed worthy of attention. Through these portrayals, narrative humility invites readers to question traditional hierarchies of narrative authority and to consider the importance of listening to the marginalized voices, stories with empathy. In Regeneration, Rivers faces this dilemma as he documents and interprets the stories of his patients, While he aims to help them heal, his role as a mediator of their narratives raises questions about whose perspective is being prioritized and whether the patients’ voices are being fully heard. Barker does not provide easy answers to these ethical questions, instead

highlighting the complexity of representing trauma and the need for humility in approaching such narratives, leaving the readers to explore the dimensions of power in a society. “Surely what had happened to Burns was merely an unusually disgusting version of a common experience” (Barker, p. 173)

Siegfried Sassoon, a poet and soldier, embodies this tension through his public protest against the war, through his declaration letter against the continuation of war. Sassoon’s act of defiance is an attempt to reclaim his narrative and assert his voice in a society that expects soldiers to conform to ideals of patriotism and sacrifice. “I believe the war is being prolonged by those who have power to end it” (Barker, p. 3). His protest is quickly pathologized by the military and medical authorities, who label his actions as a symptom of shell shock rather than a legitimate political statement of a war commander. This interpretation undermines Sassoon’s agency, reducing his carefully reasoned critique to a manifestation of mental illness. The system are unsure of how to deal with Sassoon's "act of willful defiance" because the declaration has drawn a lot of attention, from soldiers and public and could jeopardize the narrative of the war effort and perfect patriotic narrative “I believe the war is being prolonged by those who have power to end it” (Barker,1991, p.3). His poetry becomes a space where he articulates his experiences and emotions without being filtered through the interpretations of others.

Billy Prior, another central character, navigates this tension through his complex relationship with Dr. Rivers and his struggle to maintain control over his identity and story. Prior is a working-class officer who feels caught between the expectations of his class and his role in the military. Prior often challenges Rivers’ interpretations of his behavior, refusing to be reduced to a mere case study or a passive recipient of medical authority. For instance, Prior’s refusal to fully disclose his traumatic experiences or conform to Rivers’ therapeutic expectations demonstrates his resistance to having his story controlled by others. At the same time, Prior’s vulnerability and moments of openness with Rivers suggest a nuanced negotiation of power, where he selectively shares his narrative on his own terms.

This paper argues that narrative humility offers a way to restore the power dynamics between collective narratives and personal morality through act of listening and respecting narratives. By practicing empathy, self-reflection, and a willingness to question dominant narratives, it can create space for marginalized voices and ethical resistance within the context of peace and resilience. The study conclude that narrative humility is inclusive space only, a tool of literary studies but also vital for addressing power imbalance between two classes, groups or institutes. The tension between telling one’s own story and

having it interpreted by others is further complicated by the broader societal and institutional contexts in which the characters exist. The military and medical establishments in Regeneration function as systems of control that seek to regulate and suppress individual narratives, particularly those that challenge the status quo. For example, the soldiers' trauma is often framed as a medical problem to be treated and managed, rather than a legitimate response to the horrors of war. This framing denies the soldiers the opportunity to fully articulate their experiences and imposes a narrative of recovery that serves the interests of the institution rather than the individual.

Despite these challenges, the characters in Regeneration find ways to assert their views and resist external control over their stories. Sassoon uses his poetry to reclaim his voice, Prior selectively shares his narrative to maintain his autonomy, and Rivers grapples with the ethical complexities of his role as an interpreter of others' experiences. Through these struggles, Barker highlights the importance of narrative agency and the ways in which individuals navigate the tension between self-expression and external interpretation. "what method of treatment do you favor-----well, anything you want to tell me" (Barker, p. 38). The novel ultimately suggests that storytelling is not just a means of communication but also a site of resistance, self-awareness where individuals can assert their humanity and challenge the systems that force them to define.

5. Conclusion

In conclusion, Pat Barker's Regeneration completely explores the tension between telling one's own story and having it interpreted or controlled by collective, revealing the profound power dynamics at play in the act of owning personal morality. Through characters like Siegfried Sassoon, Billy Prior, and Dr. William Rivers, Barker delves into the complexities of narrative, particularly in the context of war, trauma, and institutional authority. Sassoon's use of poetry to reclaim his voice, Prior's resistance to being reduced to a passive subject, and Rivers' ethical struggles as a connection of others' stories, all highlight the ways in which individuals navigate the fraught experience of self-expression and external interpretation. It resist the concept of reductionism, giving the same importance to every story and traumatic experience while being sympathized towards challenging social attributes.

The novel reveals the importance of narrative humility, emphasizing the ethical responsibility of storytellers and listeners to approach narratives with empathy, respect, and an awareness of their own limitations, regardless of challenges faced by system and society. By portraying the soldiers' struggles to assert their point in the face of societal and institutional control, Barker critiques the power system that seeks to manipulate individual

voices through physical or psychological control. At the same time, she celebrates the resilience and creativity of those who find ways to resist and reclaim their stories, thoughts, narratives and morality, whether through art, selective disclosure, or acts of defiance. The novel invites readers to reflect on the ethical dimensions of storytelling and the importance of listening to marginalized voices with humility and openness. In doing so, Barker's work resonates far beyond with its historical setting, offering timeless insights into the power dynamics of narrative and the enduring human needs to be heard and understood. Through its distinctive exploration of these themes, Regeneration challenges the society to consider how we take, interpret, and honor the stories of others in our own lives.

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