

Exploring the Transformative Power of Narrative Therapy in Bauby's *The Diving Bell and the Butterfly*: A Study of Autopathography through White and Epston's Perspective

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## ABSTRACT

*The Diving Bell and the Butterfly* is a heartrending tale of resilience and individual agency, showcasing the transformative and cathartic power of narrative therapy. Bauby (1997) inscribes his tale of a massive stroke by blinking his left eyelid, projecting his emotions, distress, and agitation through a detailed narration of everyday experiences. The given study investigates gradual changes and shifts in Bauby's outlook as the memoir progresses. The study argues that Bauby externalizes disability as he regains individual agency through narrative therapy, seizing control over his condition and refusing to be defined synonymously with the disease. Through an imaginative butterfly-like mind, Bauby reincorporates a new identity, characterized by a phenomenal will. The research uses White and Epston's concepts of Narrative Means to Therapeutic Ends, locating various stages of narrative therapy in Bauby's autopathography, and investigating each stage with respect to Bauby's emotional state of mind and physical disability. The research argues that Bauby moves from denial to an eventual recognition of his disability, attaining the ultimate goal of asserting his identity against the constraints of the circumstances. The study concludes that Bauby transcends from denial to acceptance and acknowledgment through narrative therapy, aiding him to reclaim control amidst distressing medical constraints.

**Keywords:** Narrative Therapy, Disability and Identity, Resilience and Agency, Autopathography, Psychological Transformation

## INTRODUCTION

Our lives are ceaselessly intertwined with narrative, with the stories we tell and hear told, those we dream or imagine or would like to tell, all of which are reworked in the story of our own lives that we narrate to ourselves in an episodic, sometimes semi-conscious, but virtually uninterrupted monologue. We live immersed in narrative, recounting and reassessing the meaning of our past actions, anticipating the outcome of our future projects, situating ourselves at the intersection of several stories not yet completed". (Brooks, 1997)

Fatal illnesses often carry overwhelming emotional and physical challenges for a patient, weighing immensely on the sufferer's mind. As a consolation for the affliction, narrative exercises can provide a therapeutic outlet, offering solace to the ailing writer while also projects the author's emotional terrain to their medical practitioner and the outer world. In this regard, autopathography, a bridging factor between literature and medicine, has emerged as a popular genre in medical humanities (Kearney, 2006). Autopathographies, according to Aronson (2000), are a medium of communication for ailing individuals, helping others to understand "what it is like to be a patient" or simply to experience catharsis along with removing the stigma associated with deadly diseases like cancer or neurological disorders. Autopathographies such as *The Diving Bell and the Butterfly* by Jean-Dominique Bauby are manifestations of deep psychological insights and a juxtaposition of complex emotional and physiological dimensions of the author's mind. These autopathographies provide narrative therapy to the patients as they reintroduce themselves to their life experiences. This therapeutic outlet externalizes the crisis (White and Epston 31), separating the individual existence from the illness, thus reincorporating a new experience against the previously afflicted outlook. The autopathographer, Bauby, undertakes this journey in *The Diving Bell and the Butterfly* by employing metaphors of a diving bell and a butterfly, representing his imaginative mind and a free spirit trapped inside a paralyzed and disabled diving-bell-like body. The autopathography entails a nuanced view of emotional associations with illness, providing readers with experiences of a rare medical condition. Navigating the labyrinth of illness, the experiences and worldviews projected by the author in this memoir can be observed against the backdrop of the autopathographic narration, projecting personal experiences, use of language in the process of reclaiming individual agency. The projection of individual agency is fostered by Bauby's healing and nurturing mind, for which he uses the metaphor of a butterfly, stating beautifully:

"Far from such din, when blessed silence returns, I can listen to the butterflies that flutter inside my head. To hear them, one must be calm and pay close attention, for their wingbeats are barely audible. Loud breathing is enough to drown them out. This is astonishing: my hearing does not improve, yet I hear them better and better. I must have butterfly hearing" (Bauby 1997)

The given study investigates the transformative power of narrative therapy in autopathography, *The Diving Bell and the Butterfly*, investigating the emotional and psychological impact of narrating the tale of illness by an ailing author. The study explores the change in the author's view and understanding of his illness, exploring how the grief-stricken and heartbreaking tale of an ailing writer shapes his identity in the face of a fatal illness. The study further delves into the ruminative details of the compelling tale of *The Diving Bell and the Butterfly* and explores the introspective power of storytelling alongside the cathartic influence of narrating the nuisance of fatal illnesses. Employing an autopathography-oriented mode of analysis, the study investigates how authors craft and present their respective identities as they undergo a narrative therapeutic outlet of their emotions, which shapes their outlook. The study questions how Bauby changed his perspective toward disability following narrative therapy through his autopathography. In addition, the given research traces different stages of narrative therapy in Bauby's journey of self-realization; these stages, as suggested by White and Epston, include the separation phase, the betwixt and between phase, and the reincorporation phase. The research further investigates the role of narrative therapy in Bauby's effort to construct a new Weltanschauung, complemented by a reincorporated spirit and individual agency.

## LITERATURE REVIEW

Autopathographies are a subject of rigorous academic and professional research, aiming to underscore the transformative power of expressive writing and the cathartic influence of such a medium of communication. Various researchers have explored different dimensions of the well-known

autopathography, *The Diving Bell and the Butterfly*, investigating the heartrending tale through various perspectives.

*The Diving Bell and the Butterfly* employs a sophisticated, almost poetic narrative, in order to register the suffering Bauby's impairment and the resultant trauma. According to Raoul et al. (2010), Bauby's powerful account forces its readers to reimagine the limits of communication, providing a juxtaposition of disability, disease, and the associated trauma. Raoul et al. study Bauby's autopathography through the lenses of Jakobson's Model of Communication, interpreting the author's message through six various angles of communication. The research opines that each angle provides a different interpretation, making the communicative process of the memoir multifaceted and multidimensional. Raoul et al. identify six communicative angles in Bauby's autopathography including the addresser, the context, the message, the code, the contact, and the addressee. The various angles in Bauby's narration reflect varied communicative functions ranging from emotive to literary, medical, and personalized accounts. The research opines that the multi-strand communicative techniques in autopathography make it an interesting case study for both medical practitioners and literary experts.

Autopathography has developed as a popular genre for describing tales of illnesses, communicating disease-stricken experiences, and presenting a nuanced narrative trajectory of ailment. Bauby's tale of a sudden stroke leaving his entire body paralyzed, according to Kearney, presents a bleak yet beautiful picture of disability, without glamorizing or romanticizing the particular medical condition (2006). Kearney opines that Bauby's plight culminates in artistic expression, showcasing his journey from denial to acceptance. "His eloquence is noble in the face of almost complete disability. His resolution is inspirational and a statement of great dignity in the face of adversity" (2006). Bauby's autopathography underscores his heroic struggle with an artistic intent, while throwing light upon the role of different agencies in his journey of illness. From hospital staff to his family, former colleagues, and strangers in the hospital, the paralyzed author weaves a beautifully narrated tale encompassing themes of survival, trauma, solitude, and disability. The said research investigates various aspects of autopathography, opining that Bauby painstakingly familiarizes readers with his unfortunate condition, arousing sympathies while at the same time, flaunting his meticulous writing skills and reliving his memories as an editor in Elle.

Jean-Dominique Bauby's poignant autopathography was adapted into a film in 2007 by Julian Schnabel, nearly a decade after his death. Since then, various studies have investigated the adaptation of the memoir, tracing the film's emotional resonance with the book. In this regard, Corne (2010) investigates the emotive echo of events described in the book to the scenes of the film. Corne (2010) focuses on Bauby's unfulfilled desire to write a modern version of *The Count of Monte Cristo* with a female Monte Cristo, originally written by French writer Dumas. In the book, Bauby exclaims that the stroke and resultant paralysis were likely to be a "preemptive sentence for plotting to commit this crime of lèse majesté, for disobeying some unspoken commandment that a writer ought never to tamper with masterpieces. Indeed, it was as if the gods of literature and neurology" announced a verdict of poetic justice (Corne 2010). Bauby further exclaims that after the stroke, Bauby felt more connected to a minor character of Dumas' masterpiece, Noirtier de Villefort, who suffers from complete body paralysis and speaks by blinking his eyes, much like Bauby in his condition with Locked-in syndrome. Bauby feels Noirtier's distress on account of shared linguistic impairment and the tendency to be misunderstood by the outer world. Corne draws an analogy between Noirtier and Bauby in the film when a serviceman calls Bauby "it" without realizing he is conscious and questions if he might be a woman. Corne calls the scene "script's most ingenious touches" related to the book, alluding to the gender switch to Bauby's unwarranted intention of sex reversal of Dumas' protagonist (Corne 2010). In other words, the said research traces the book's references in the film, arguing that the film "exposes the vast stakes of transmission by staging a novel fusion between words and images" (Corne 2010).

Bauby's onerous tale of pain and misery expresses a gamut of emotions, arousing sympathy among readers and the audience. Laine (2010) argues, "The Diving Bell directly engages us emotionally, in a process where not only the film is present for us, but where we, too, are present for the film in both our objectivity and our subjectivity". Laine investigates the cinematic emotional appeal of the film adaptation of Bauby's memoir through uncontrollable memory flashbacks, expressing the overwhelming plight of the unfortunate sufferer. According to Laine (2010), Bauby uses "sense memory" to create pleasurable imaginary scenarios against his cognitive memory. Sense memory, in accordance with the butterfly metaphor, allows Bauby to transcend his physical impairment, transforming his body from a "disentangled" to an "entangled" entity (297). The researcher argues that the film portrays reciprocity between Bauby's trapped body and the outside agencies through senses of touch, smell, and taste. For instance, haptic imagery, such as in manual therapy, emphasizes the importance of sensory perceptions in Bauby's access to the outer world. The researcher argues that the film's emphasis on sensory perceptions is in line with philosophical constructs highlighting the entanglement of the body with the outer world through bodily sensations.

Bauby paints a realistic picture of his paralyzed condition in his memoir, avoiding narrating a heroic endeavor of overcoming the mountainous hurdles of illness. Church (2008) argues, "Although he may reasonably wish to escape the limitations of his own body, he understands that his paralysis has become a vital part of his identity". Bauby, despite his rare disease, wishes to be treated like a normal person whose humanity is not endangered. Church uses "emotional paralysis" as a key metaphor to exclaim Bauby's inability to communicate effectively, jeopardizing his relationship with the outer world, meanwhile provoking a sense of aloofness in the suffering protagonist. Church further argues that Bauby's estrangement has the potential to "decenter perception", asking able-bodied audiences to question their notion of normalcy. Church (2008) views *The Diving Bell* as a powerful portrayal of an intact and unscathed identity, arguing that imagination plays a profound role in shaping Bauby's firm and willful self-perception, resulting in a compassionate cinematic gaze. In addition, the researcher underscores the aesthetic power of Bauby's memoir, rooted in his imaginative power and obstinate mindset.

In light of the above-mentioned studies, the given research aims to trace Bauby's acquiescence to his newly formed identity, channeled through narrative therapy. The research focuses on shifts in Bauby's self-perception and his journey from denial to acceptance of his fate and the role played by narrative therapy toward gradual realization as he comes to terms with his permanent disability.

## **THEORETICAL FRAMEWORK**

Illness can have far-reaching consequences for both the psychological and physiological well-being of a patient. Fatal diseases can shape a person's identity, leaving them perplexed by the previously unforeseeable ruggedness of life. In Jean-Dominique Bauby's case, the patient uses narrative techniques to build his post-trauma identity. The given study employs Micheal White and David Epston's concepts from *Narrative Means to Therapeutic Ends* in order to analyze the gradual shifts in Bauby's identity through narrative assignments.

White and Epston (1990) opine that problem-saturated narratives do not sufficiently represent an individual's life. A shift in narrative can play a significant role in changing the identity perceptions of a patient by inviting a reflexive posture through a sense of authorship, by continuously telling and re-telling a story. White and Epston suggest the "externalization" of "problem-saturated narratives" helps the patient to separate themselves from the core issue, thus rebuilding their identity. The reorientation of problem-saturated narratives follows three stages which include, "[First], the separation phase, perhaps from some status, aspect of identity, or role that is determined to be no longer viable for the person concerned. [Secondly] the liminal or betwixt and between phase, is characterized by some discomfort,

confusion, disorganization, and perhaps heightened expectations for the future. [Third], the reincorporation phase, is characterized by the arrival at some new status that specifies new responsibilities and privileges for the person concerned.” (White and Epston 1990)

The given study traces the three stages in Bauby’s narrative, by assuming a therapeutic impact of his illness memoir. Bauby, otherwise, suffering from Locked-in syndrome, is unable to speak or move his body. Through his autopathography, he “reconstructs a self” in response to an extreme trauma and physical disability, thus reshaping his identity, and implying a sense of rebirth through his memoir (Raoul et al. 2010). This study investigates how Bauby discovers a new sense of his identity, now as a disabled person, through the technique of narratives.

### **BACKGROUND OF THE AUTOPATHOGRAPHY THE DIVING BELL AND THE BUTTERFLY**

*The Diving Bell and the Butterfly*, by author Jean-Dominique Bauby, recounts the author’s fatal stroke that rendered his entire body paralyzed in December 1995. This massive stroke disabled Bauby’s body while sparing him a conscious mind and a blinking eye, thus conceiving the metaphor of a diving bell and a butterfly. The inaudible voice of the narrator is communicated through a code conveyed by a blinking eye, sustaining a loop thread of connection between Bauby and the outer world. According to Raoul et al., the popularity of autopathography may be attributed to Bauby’s high-profile career as an editor in the French magazine *Elle* and to the sudden, tragic downfall of the once golden boy. This riches-to-the-rags tale of a diseased man, who once led a glamorous life, has now been translated into more than twenty-three languages with over a million copies sold (Raoul et al. 2010) and a film adaptation in 2007. The autopathography entails a heroic endeavor on the part of the suffering author’s venturesome effort to compose the memoir by blinking his left eye, dictating word by word to his speech therapist, Claude, and indicating each letter of the alphabet. The title of the autopathography metaphorically represents Bauby’s state of being, characterized by his lifeless, entrapped body felt like a diving bell; heavy and immobile, while his conscious mind appeared like a butterfly, alive and vigorous. Bauby, through this heart-wrenching narration, expresses his deep emotions, shifts in identity, alienation, memories, and reflections on love and life, providing readers with a nuanced insight into the subject of human resilience and endurance.

### **EXPLORING THE TRANSFORMATIVE POWER OF NARRATIVE THERAPY IN *THE DIVING BELL AND THE BUTTERFLY***

#### **Beginning at the Separation Phase**

Jean-Dominique Bauby suffered a massive stroke at the age of 43, leaving him paralyzed and entirely dependent upon others for the rest of his life. The unfortunate author died just two days after the publication of his autopathography in 1997. One wonders, what could be a paralyzed-for-good individual’s goal to write a memoir, bearing the endless struggle of communicating each letter of every word in the autobiography by blinking an eyelid? Bauby, at the beginning of his memoir, exclaims the non-existent chances of even the slightest recovery being possible. The ailing author states, “Most victims [of Locked-in syndrome] are relegated to a vegetable existence; the evolution of the disease is not well understood. All that is known is that if the nervous system makes up its mind to start working again, it does so at the speed of a hair growing from the base of the brain. So it is likely that several years will go by before I can expect to wiggle my toes (Bauby 3). The question arises, why did Bauby go through a daunting and laborious exercise of narrating his condition to the outer world? Arguably, the answer lies in the therapeutic effects of narration, which, according to White and Epston, help individuals reinterpret their life stories and re-identify them from a different, more personalized lens. White and Epston quote

Edward Bruner, who states, “Narrative emphasizes order and sequence, in a formal sense, and is more appropriate for the study of change, the life cycle, or any developmental process. Story as a model has a remarkable dual aspect — it is both linear and instantaneous” (Bruner 1986). By dictating his memoir, Bauby regains control amidst a debilitating condition, reclaiming agency through a personalized narrative. This memoir works like therapy for Bauby, allowing him to absorb his new condition, asserting his humanity, and identifying with his disability. Through this narrative exercise, Bauby reconstructs his story, and as the memoir develops, “Denial is followed by gradual acceptance” (Kearney 2006). From White and Epston’s perspective, Bauby “externalizes” his problem by narrating it- a process that allows him to transform his suffering into meaning, thus redefining the purpose of life.

White and Epston identify three stages of identifying and mitigating an acute crisis, through the process of narrative therapy, referred to as the “rite of passage”. Narrative therapy, according to White and Epston (1990), begins with a “separation phase”, which allows a patient to identify as a separate entity from the crisis under study. This phase entails separation, “perhaps from some status, aspect of identity, or role that is determined to be no longer viable for the person concerned”. The process involves externalizing the problem from the patient, seeing it as a distinct issue that is not inherent to the sufferer’s identity. The separation phase is observed in Bauby’s autopathography as he reframes his disability through narrative technique. Bauby embarks upon the separation phase of his narrative therapy by identifying the crisis, allowing him to pinpoint the issue separate from his own existence. Bauby begins the process of externalization as he states, “In the past, it was known as a massive stroke, and you simply died. But improved resuscitation techniques have now prolonged and refined the agony. You survive, but you survive with what is so aptly known as “locked-in syndrome.” Paralyzed from head to toe, the patient, his mind intact, is imprisoned inside his own body, unable to speak or move. In my case, blinking my left eyelid is my only means of communication (Bauby 1997). Bauby, at this phase, is in the earliest stage of narrative therapy, struggling to locate the crisis in a distinct capacity, yet renewing the cognizance of the crisis. Still, at a nascent point of the separation phase, Bauby appears to be overwhelmingly consumed by his paralytic state, struggling to detach himself from the disability. The engulfment of Bauby’s identity is reflected when he narrates the grievances of his imprisoned body, exclaiming, “I have been confined these past six months, as a hermit crab dug into its rock”. So far, readers have observed the sheer force of the stroke, striking Bauby’s consciousness with devastating physical and mental assault. Nonetheless, the narrative therapy pushes Bauby toward the advanced point of the separation phase, where the patient identifies the separateness of the issue.

The separation phase begins as the patient analyzes how the problem is affecting their life and relationships (16), thus viewing the crisis as an outside factor having a considerable impact on their life. The crisis before this point is no longer an inseparable part of the patient’s identity; instead, a discrete problem that needs to be addressed in one form or another. The separation instance for Bauby is a moment of realization, a bitter and pungent but tacit truth. It is the moment when he discovers his inseparable companion from then onwards, the wheelchair. It is when the occupational therapist tells Bauby, with a smiling face, that he handles the wheelchair well, that he has his moment of epiphany. Bauby narrates, “To my ears, it had the ring of a life sentence. In one flash I saw the frightening truth. It was as blinding as an atomic explosion and keener than a guillotine blade” (1997). At this point, the suffering narrator has come to terms with his fate of disability, thus externalizing the problem effectively. In addition, at this stage, the patient further realizes the impact of the crisis on their life, narrating it to share their experiences and thoughts. Bauby lamentably narrates his profound distress, “I would be the happiest of men if I could just swallow the overflow of saliva that endlessly floods my mouth (3). Through such disturbing and heartrending narration, Bauby attains separation from his tormenting health crisis, demonstrating the transformative power of narrative therapy. In White and Epston’s view, “By achieving this separation from the problem-saturated description of life... persons are more able to identify unique outcomes” (16). The identification of the crisis through a narrative exercise allows Bauby

to recognize the crisis, thus moving ahead toward a phase of resolution and rediscovery of his identity as a disabled person.

### **Reaching the Liminal Phase of Narrative Therapy**

Narrative therapy untangles a patient's confused self-perception, allowing a transition toward a concrete resolution and an affirmative identity. Before attaining this stage of resolute identity, the patient, however, must face the dread of confusion and uncertainty in order to shatter the previously crisis-ridden identity. In White and Epston's perspective, this phase is referred to as "the liminal or betwixt and between phase," where the separation of crisis meets resolution midway. Following the separation phase, the liminal phase brings "discomfort, confusion, disorganization, and perhaps heightened expectations for the future" (7). Such bafflement and perplexity are evident in Bauby's memoir, as he finally separates himself from his crisis-wrought situation. Kearney opines that Bauby's autopathography appears almost like a journalist's reporting, with mundane suffering and steady acquiescence toward the new identity. Kearney points out, "There is no sense of revolt here: more tedium, as the chapel bells punctuate time. He lists off his clinical condition like a problem list... There is no censure, there is no relief, just a gradual realization that he is a prisoner" (2006). This suffocating, confused, and perplexed self-realization is a necessary corollary of the crisis-separation phase, that ultimately paves the way for a "reappropriation" of self, by choosing preferable narratives and shifting the individual's perspective (Frank, 2018). This re-appropriation is reflected in Bauby's narration of his disease when he expresses his confusion, discomfort, and unresolved feelings about the child-like care he receives. He narrates his confusion, "One day, for example, I can find it amusing, in my forty-fifth year, to be cleaned up and turned over, to have my bottom wiped and swaddled like a newborn's. I even derive a guilty pleasure from this total lapse into infancy. But the next day, the same procedure seems to me unbearably sad, and a tear rolls down through the lather a nurse's aide spreads over my cheeks" (4). Bauby himself appears to be unsure and confused regarding the new situation, unable to rekindle this identity, a perplexity rooted into "subjunctive mood, the mood of hypothesis, fantasy, conjecture, desire" (White and Epston 79). Bauby's distress, as well as the guilty pleasure of being treated as an infant, highlight that he has at least partially recognized the ailment as a crisis, which will play a profound role in the future turn of events for Bauby's life.

Bauby's betwixt and between phase is further complemented through his contemplation of past life, brooding over memories, in an attempt to draw analogies and find meaning. White and Epston exclaim that "analogies determine our examination of the world", constructing our perception and experiences (5). In a similar effort, Bauby attempts to interpret meaning from his memories and past experiences, to construct some meaning that he might relate to his new identity. To draw analogies, Bauby reminisces about his memories, which now feel "doubly painful" and accompanied by "regret for a vanished past and, above all, remorse for lost opportunities... Today it seems to me that my whole life was nothing but a string of those small near misses: a race whose result we know beforehand but in which we fail to bet on the winner (27). It is Bauby's disorientation and confusion that causes him to explore alternative ways to understand his life and experiences, navigating the threshold between his old life and the new reality. Bauby at this stage, steps out of his utter denial, recognizes his crisis, and interprets meaning out of uncertainty and vulnerability.

### **Achieving the Reincorporation Phase**

The paralyzed author of *The Diving Bell and the Butterfly* gradually hints toward moving the "reincorporation phase" of narrative therapy, which characterizes a new sense of identity specifying "new responsibilities and privileges for the person concerned" (7). This sense of reconciliation, authority, and individual agency is found in various instances where Bauby appears to take charge of his fate, refuting an identity that is sabotaged by crisis and uncertainty. A clear clue of Bauby's reincorporation phase is

observed when he accepts his denial in the beginning, stating, “At first I refused to believe that anything serious had happened. In my semiconscious state following the coma, I thought I would shortly be back in my Paris stamping grounds, with just a couple of canes to help me along (26). The acknowledgement of denial showcases Bauby’s assertion of agency and individual resilience in the face of adversity. The confession of denial is followed by aspirations of a hopeful future, along with a sense of normalcy and independence. Bauby, for instance, finds joy in getting letters from loved ones, including family and former colleagues, which renews his faith in individual agency. Bauby hopefully narrates, “I hoard all these letters like treasure. One day, I hope to fasten them end to end in a half-mile streamer, to float in the wind like a banner raised to the glory of friendship. It will keep the vultures at bay” (1997). Such conviction in a promising future further reiterates the third stage of narrative therapy in Bauby’s autopathography.

The reincorporation phase is the ultimate stage of narrative therapy, culminating in the growth of personal agency resulting in detachment from crisis, which further enables the sufferer to “experience a capacity to intervene in their own lives and relationships. The discovery of unique outcomes, as well as the externalizing of the problem, [encourages] persons to map their influence, and the influence of their relationships with others, on the "life" of the problem” (White and Epston 1990). Bauby grabs the reincorporation when unimaginable stoicism as he endures the wrath of his disability with utmost endurance. For instance, consider the distressing narration by the paralyzed author and the projection of the Dunkirk spirit:

“This morning... evil spirits descended on my world. For half an hour, the alarm on the machine that regulates my feeding tube has been beeping out into the void. I cannot imagine anything so inane or nerve-racking as this piercing beep beep beep pecking away at my brain. As a bonus, my sweat has unglued the tape that keeps my right eyelid closed, and the stuck-together lashes are tickling my pupil unbearably. And to crown it all, the end of my urinary catheter has become detached, and I am drenched. Awaiting rescue, I hum an old song by Henri Salvador: "Don't you fret, baby, it'll be all right." And here comes the nurse. Automatically, she turns on the TV. A commercial, with a personal computer spelling out the question: "Were you born lucky?" (Bauby 1997).

The stoicism is further reflected in the ironic name of the chapter of this narration, “My Lucky Day”, substantiating Bauby’s remarkable resilience and demonstration of stoic heroism against the crisis. Bauby’s narration provides a therapeutic outlet to the sufferer, as he sketches out his own misery, thus viewing it as a separate crisis. In addition, singing an encouraging and lively song in the face of adversity is indeed, a manifestation of meaningful recovery. The man who renders himself a vegetable existence and a hermit crab at the beginning of the memoir sings classic songs of bravery and heroism as the narration develops. This transition is the ultimate therapeutic impact of narration, which enables Bauby to see himself as an individual entity, not synonymous with a crisis, but a warrior, or perhaps, a phoenix who must rise out of the ashes. In addition, the reincorporation phase in Bauby’s narrative exudes defiance against adversity in an attempt to find meaning, connection, and identity amidst the overwhelming challenges of his disabled body.

## **CONCLUSION**

To conclude, Bauby’s tale of illness is a powerful testament to the transformative powers of narrative therapy, allowing the ailing author to find meaning amid profound adversity. The autopathographic account is transitioned into different phases of narrative therapy as the memoir progresses. Bauby observably begins at a point of an identity crisis, unable to grasp his relationship with the new circumstances. However, as he dictates his memoir word by word by blinking his eyelids, Bauby provides himself therapy through narration. It is his unique condition that he can benefit from conventional modes

of narration in an extremely limited manner. Under the unique circumstances, Bauby himself bears this responsibility, paving the way for narrative therapy by communicating his vibrant state of mind and distress about his disability. The narrative therapy allows the disabled author to phase out of his vegetable existence, seizing individual agency and reincorporating it into the vibrant cycle of life.

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