

At some point in our lives, we all face illness—whether our own, a family member’s, or a friend’s. In these situations we are confronted with the frailty of the human body, the limitations of our abilities to heal or relieve another’s pain, and the fact that all humans are mortal. Physical suffering combines with other kinds of suffering in the experience of illness, as we face our finitude and vulnerability.

In the face of this suffering—our own and others’—what are we to say? Suffering is common to us all, and yet it is radically personal. We can respond to the pain and distress of others but never enter directly into their experience, nor they ours. The felt reality of suffering is in an important sense ineffable, un-sharable. It defeats adequate expression, and this is in part what causes the pain and distress. Sufferers often observe that their suffering is most acute when they feel alone, when they are unable to connect to others because they are unable to communicate their suffering.

Silence, especially in the face of extreme and life-threatening experience, often seems the logical response, since it allows sufferers not to speak of something that is painful and does not trivialize their suffering with all-too-easy words of understanding. But, as a matter of justice and of human caring, an encompassing silence is not an option. And this means that we have to struggle to find ways of expressing the inexpressible, of comparing the incomparable.

An important area of scholarly research has been to explore how experiences of suffering find commonalities in narrative. Through narrative we impose structure on our experience, configure meaning, plot the types of moral agents we are, and represent ourselves to others. The ways we experience suffering and tell others about it are shaped in part by stories of suffering available to us: from our family, faith community, other sufferers, the discourses and practices of professionals, and the wider society. These social narratives influence what counts as “experience,” both past and present, and can help us live our suffering and place it in a meaningful context. At both an individual and collective level, telling suffering through stories assists the work of social reconstruction and psychic healing.

In this issue of *The Hedgehog Review*, we gather together essays on several important aspects of illness and suffering, including the kinds of narratives that individuals tell to understand and emplot the experiences of suffering; the fact that willing and hoping are often connected, rather than antithetical, in the lives of caregivers; the conflicts that can arise between patients and their families, on the one hand, and the medical establishment, on the other; the ways in which mental suffering is framed by profes-

sionals and understood by war veterans, particularly in relation to the idea of injury; and how suffering is represented in drug ads. In addition to our book reviews and annotated bibliography, we also have a rich array of approaches to suffering in a small gallery of artworks created in response to suffering, a poem and interview with the new poet laureate Donald Hall, and an interview with Arthur Kleinman, author of *Illness Narratives* and a pioneer in the field of medical anthropology. We cannot erase suffering from human experience, but we can work to understand it better and to learn how to respond to those who suffer around us. Our aim in this issue is to move us a little further along the path toward these goals.

—T.H.R.