

**THE PORTRAYAL OF THE DOCTOR CHARACTER IN YUSUF
DAWOOD'S OFF MY CHEST AND NO STRINGS ATTACHED**

BY

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A project paper submitted in partial fulfillment of the requirements to the degree
of masters of arts in literature at the University of Nairobi

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DECLARATION

This project paper is my original work and has not been presented for a degree in any other university

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This project paper has been submitted for examination with our approval as University supervisors.

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**This work is dedicated to my mother the love of my life,
May there always be an abundance of affection and love.**

ABSTRACT

The prime concern of this project is to give critical attention to the portrayal of the doctor character in Yusuf Dawood's Off My Chest and No Strings Attached.

The works are a depiction of the world of the doctor within the environment he understands best: the hospital.

There is a great difference between how people live and how people ought to live. In cognition of this the study delves into the explicit and implicit world of the doctor as revealed in the autobiographical work. The assumption is that the emerging portrait is that of a profession whose nobility and glamour has been tainted by forces beyond an individual's control.

The study recognizes Dawood's attempts to create a better world and a better physician through whom the nobility of medicine is upheld, who escapes the drudgery of everyday existence to a glamorous life within and as a result of the profession. A profound belief in men's potential to do good contributes significantly to the positive portrayal of the characters.

Adopting a thematic approach the sociological theory is found relevant since the individual and the society remain at the core of the study. Writing within an African context, the study is further enriched by the postcolonial literary theory.

CHAPTER ONE

INTRODUCTION

Yusuf Kodwawwala Dawood is a prolific Kenyan writer of Asian ancestry. His works fall into both fiction and non-fiction and range from the lengthy autobiography, and the novel to the novella, the short story and newspaper columns.

Dawood's foreign origin is two-dimensional, in terms of country of origin and as one who has ventured into the literary world from the field of human medicine, with little prior academic association with any literature institution. Dawood was born in Bantwa a small town in Junagadh state, part of Bombay province in India. The early part of his life was spent mainly in India.

After his A-Levels Dawood joined Miraj Medical School ran by American Missionaries, from where he moved on to Grant medical school, Bombay for his undergraduate studies in medicine. After qualifying as a doctor, he left India for Britain. There he joined London University where he took his intermediate fellowship examination in surgery. Finally, he moved to Guys Teaching Hospital in Leeds where he took and passed his final fellowship examination in surgery. Dawood is representative of a minority migrant community and also the elitist profession of medicine.

His works have attracted a range of scholarly interest. For Dawood's thematic concerns, characterization values and social vision have been seen as an insight into the intricate lives and workings of rather alienated groups of people.

However his appeal is not dependant on his 'foreignness' but rather on his proven literary prowess.

Studies on Dawood have mainly been pegged on two of his characteristic features. His Asian origin has attracted critics who have looked at the various shades of the issue of identity in his works. These critics include Masumi Odari, in her essay 'self-identity, Reflections on Yusuf K. Dawood, in the Nairobi Journal of Literature. In his unpublished M A Thesis, Siundu, M. Gordon looks at 'The vision of multiculturalism in selected novels of Yusuf Dawood'. He has then been studied as an author of popular literature. Kairu Kamau Benson investigates the content, form and style utilized by popular works using selected works by Dawood. The present study focuses attention largely on his profession which in essence informs his works. A contention that can be inferred from the overview of his works below. Dorsey notes the following;

All the works employ the hospital for scenes of crisis, passion
Suspense, esoteric expertise and ineluctable or unpredictable
fate... [2]

This observation is true of Dawood's work. In The Price of Living, we encounter Maina Karanja for the first time at the hospital, where he has gone for a medical check-up. Its here that he meets Valerie his future love. The climax of the novel is when Karanja gets a heart attack and has to be operated on. His son Muhoho is involved in a road accident. So it happens that in the hospital, twin surgeries

are carried out at the same time, one on the father the other on the son. With their miraculous recovery their disagreements are resolved and the novel ends. The anesthetist in One Life Too Many, Dr. Hyder, develops the close relationship with the protagonist Sydney walker after the latter's operation. It is mostly through the eyes of the doctor that the action unfolds. The prologue to the novel has Sydney walker in hospital after accident. Walker never survives the episode in the accident. With his death, the story is wound up.

Water Under the Bridge also employs a sizeable number of hospital scenes.

The old man Desai succumbs to a heart attack, and has to be rushed to the United Kenya Hospital, after his clash with Dilip. He undergoes surgery under doctors, Bradshaw and Musyoki. Whilst at the hospital Rajoo the youngest son commits suicide which complicates the old mans case. In time, the doctors' dedication bears fruit and the old man recovers. Oloo paves his election to parliament through conducting a harambee to assist in the heart surgery of Mariam Agada. With the success of the harambee, and Mariams's treatment Oloo becomes very popular. Notably, Oloo is only able to reconcile himself with Ndegwa a Kikuyu, after the later goes to visit him in hospital.

Symbolically most of the children in the work, who represent a future of cross racial intertribal marriages, and cultural integration become doctors, Meana Kanti is a dentist, Malaika Oloo becomes a dental surgeon also, while Ndegwa qualifies as a surgeon.

Return to Paradise, though most of the action takes places in England has the doctor couple of Alan and Azra Simpson who play an extraordinary role in rebuilding the shattered health facilities in Uganda.

The autobiographical works also revolve largely around Dawood's work in the hospital. The earliest, Yesterday, Today and Tomorrow largely covers the period of his training as a doctor. He touches on his early life in India and gives an incidence that might have aroused his initial interest in medicine. That is the saving of the life of a neighbour's child by a doctor. He talks of his admission into a medical school in Miraj followed by further study in Grant Medical Schol in Bombay. He then leaves India for Britain. The work extensively covers the author's stay in England. His training and practice in various hospitals and colleges is well documented. The work reveals the professional malpractices that forced Dawood to escape from Pakistan and how he landed a surgeons job in Kenya.

Behind the Mask, written much later in life, contains the doctors' experiences, as a consultant surgeon for the Nairobi Hospital, Kenyatta National Referral Hospital and the Aga Khan Hospital. In the oral interview Dawood said that he understands the hospital and the intricacies, therein, like the back of his hand. To achieve credibility he can therefore not avoid writing about the hospital and doctors. It is with this in mind and the evidence deduced from the overview of his works, that the study focuses on his profession. We aspire to look at the image of the doctor (s) in Dawod's works and incisively see what he reveals of

the medical world as an insider. It is our contention that this endeavor will reveal the man behind the creations. His life, yearnings and aspirations, what social values and ideals he embodies. Consequently, the study hopes to unravel the role of literature to as diverse a field as medicine.

DEFINITION OF TERMS

The centrality of image to the study calls for a look at the term. Image as applied to literary criticism may be conceptualized at two levels. Image may be taken to refer to a figure of speech, a metaphor a simile or a symbol. However, the term takes on a deeper and extensive application when taken to imply the general impression or concept created in the minds of the public through a vivid or graphic description by speech or in the writings of someone, an institution or even a country. This study will adopt the later application.

The essence of the conception and comprehension of the author's recurrent image cannot be over emphasized. The image becomes the tool with which the author presents, describes ideas and actions that goes with them. The fictional images, authorial voices evocative in the works are reflective of the cultural, social economic and ideological structures that the works propagates. The image helps the reader to visualize and interpret the author's ideas in various dimensions. The varied response elevates the work above mere statements of facts. Understanding the image will enable us to fathom the type of life a doctor leads. We shall understand his perception of life, the society and the opinion he holds of his work.

The term nobility has been taken to mean the quality of possessing surpassingly good moral ideals. The inclination towards selfless dedication to the welfare of mankind.

Glamour in the study refers to the attractive and charming quality associated with a person, institution or a profession owing to its being special and unusual. The strong attraction which excites admiration towards somebody or something.

STATEMENT OF THE PROBLEM

Somerset Maugham in Of Human Bondage notes that to the poor people, the greatest loss is not that of a loved one but the loss of work. The observation brings to the fore the essence of work to the life of modern man. Work has become central to human life. The work that a person does determines all aspects of one's life, where one lives, what one wears, eats, who one interacts with. Indeed a person's life is heavily dependant on the job he does. A person spends most of his working hours at the workplace. Soon the work place becomes a closed in micro-society with its own rules, ethics, values, lingo or register, indeed all those aspects that characterize a community. Lots of creative energy have gone towards portraying man in the society, at home, in the political arena. Not much literary voice has been given to the man at the workplace and even less criticism has dealt with the professional worker. This study dwells on the literary portrayal of the doctor by a doctor. The self-portraits and those of the other doctors that emerge and what they reveal of

that society. Literature is a reflection of society and its role in such a setting cannot be ignored.

The other part of this study stems from the recognition that just looking at the rather unpleasant autobiographical realities of a doctors existence may not suffice. It is the contention of this study that within the more colorful and thrilling works of fiction lies Dawood's aspired for ideals for the profession. Emphasis being on how individuals are encouraged to strive for good through positive motivation.

HYPOTHESIS

This study is founded on the following hypothesis:

- i) A study of Dawood's autobiographical texts and fictional works will reveal both an implicit and explicit image of Dawood, and the other medical personnel.
- ii) That the author consciously and purposefully fictionalizes his own experience.
- iii) That embedded in the fiction is the author's aspirations and yearnings. His attempts to create a better world.

OBJECTIVES

The aim of this study is to:

- i) Examine and understand the image of the doctor and the impression of the medical world as presented in Dawood's works.
- ii) Uncover how the author fictionalizes his own experience.
- iii) Determine how the fictionalization serves the writer's objective in a particular work.

JUSTIFICATION OF THE STUDY

Though Dawood draws most of his literary material from his professional life; Not much critical attention has been focused on the significance of his being a medical doctor in Kenya who explores the medical world through creative writing. Further Dawood represents rather alienated groups of people. Indians in the country remain the least culturally integrated of the ethnic communities in Kenya. The study looks at how Dawood portrays the possible integration of people across, racial and cultural boundaries. On the other hand the doctor, to the lay man, comes across as what Dawood refers to as, 'god incarnate..(YTT 81). To the people, the doctor is a pillar of emotional and even spiritual strength, to whom they reveal the most concealed secrets of their life. The doctor is a panacea to their psychological, emotional and physical pain. With such an aura of awe surrounding him, the doctor is indeed an alienated being. We examine how Dawood humanizes the doctor in his

works, since eventually the doctor remains a human being, with the same human weaknesses and strengths as everybody else.

In the Kenyan society where doctors fore-sworn to the Hippocratic oath go on strike leaving patients dying in hospital wards unattended, it becomes imperative to listen to the voice of the doctor. Dawood is himself a doctor, then a prolific writer of both fiction and non-fiction texts, which revolve around the hospital.

This places him in a uniquely advantaged position to give an incisive portrayal of the inner life of the doctor and his world.

Scarry Elaine, in The Body in Pain correctly notes that:

..... of human experiences the most universal is that of birth, ailing and death Pain is the most absolute definer of reality ... (sic) (64)

By the nature of the doctors' occupation these are experiences inextricably tied to their every day work. A key function of literature is to concretize human experience. The study endeavors to see how a doctor, who is at the same time a creative writer captures this human experiences and reshapes them into literary works of art.

In a published newspaper interview Dawood explains that, he was once accused of writing only on the positive side of people. This is what Dorsey refers to as 'a laudatory appraisal...(13). This trend is unique within a society, where the majority of literary voices are those of criticism; most authors portray the deprivation and criminality to which Kenyans are driven to.

The study is further justified as a means of unearthing how Dawood, fictionalizes the reality of his experiences. The paper endeavors to probe why he positively fictionalizes reality guided by the questions; What prime message does he intend to pass on to his audience? What change of mental attitude does Dawood aspire to bring about to his readers and by extension the Kenyan Society?

Dawood's works reflect the Kenyan society immediately before and after independence. So an examination of his writing is relevant not only in enhancing our understanding of post colonial literature but also in aiding us fathom the societal changes through the application of the sociological literary theory. Running through all works of Dawood, is the image of the hospital, the doctor (s) and patients. The other medical personnel like nurses and sisters are found playing minor roles or simply provide an audience to the doctor at work. The title is derived from the need to understand the images recurrent in the author's works and the thematic concerns they portray.

The present study departs from previous studies on Dawood by laying emphasis on his character and profession. This compels a scrutiny of his autobiographical works, which has again not been done in detail so far.

LITERATURE REVIEW

Mineke Schipper in Beyond the Boundaries: African Literature and literary theory observes that:

The authors of autobiographies wish to reveal themselves to us ...to bring order into their past ... ultimately wish to explore themselves (qtd Indangasi)

Indangasi goes on to argue that however, she (Schipper) does not reconcile this self-exploration with what she correctly sees as a pre-occupation with colonialism in African autobiographical writings (113)

Schipper has pointed out key aspects of any autobiographical writings. That in writing, the author is revealing himself to the audience. Hence a careful look at Dawoods autobiographical works will reveal the authors character. This becomes even more detailed when we look at what he says and what he does not.

Indangasi goes on to acknowledge the instance of neutralizing one's personal experiences and presenting them as fiction ... Dawoods fiction therefore becomes part of the self-exploration and revelation. True to Schipper's claim and proof of the African sensibilities that inform Dawoods works, the colonial

and immediate post colonial period is a recurrent feature in both his fiction and non-fiction.

Dr. Rita Charon in 'the history of medicine' asserts that;

Narrative medicine encourages physicians to read literature and increase their understanding of the human condition, emphasizing the use of reflective writing as a means to develop empathy, aid memory and to help physicians solve ethical dilemmas (3) In looking at Dawood's literary works the study will endeavour to trace the point(s) of convergence between Dawood's creative writing and his medical practice whether it makes him a more reflective and empathetic physician.

Commensurate with his rising stature as a literary figure Dawood has of late attracted an increasing number of literary critics.

Masumi H. Odari in her essay 'self-identity, Reflections on Yusuf K. Dawood focuses on the theme of self-identity in Dawood's works. Odari explores how our identities are shaped in dynamic relationship to our environments. This is in a bid to unravel the formative role that particular localities play in people's lives. The gist of Odari's argument is the identity of the writer, whereby she questions. 'Can one who is not of African descent but writing about Africa claim heritage to the throne of an African writer? (12)

Citing evidence from Dawood's works Odari convincingly argues that Dawood's works carry the mark of a Kenyan identity. Though Odari mentions Dawood's profession it is note worthy that her article does not carve out his image as a doctor.

Godwin W. Siundu in the essay "Transcending racial/cultural space:" looks at the politics of group identity from a gender perspective. Siundu is mainly concerned with the role of women in the politics of group identity and cultural purity. He seeks to demonstrate how the portrayal of women in literature as defenders of cultural traditions which perpetuate male dominance, has been subverted.

Using The Price of Living and Water Under the Bridge Siundu posits "that for Dawood, women are no longer passive embodiments of notions of purity and identities but rather facilitators of change through their decisive initiation of cross-racial/cultural unions (57). The essay highlights and explores the cross-cultural relationship and the underlying social economical circumstances, which lead to this unions. To achieve this Siundu isolates and studies the interracial marriages that occurs within the two novels.

Weche H.O. in his unpublished M.A. thesis (2002), titled, "the quest for identity in selected works of Dawood: No Strings Attached, Water Under the Bridge and Return to Paradise has done an incisive study on Dawood's works of fiction.

The study considers the quest for identity within the confines of class, race, social affairs and marriage, religion and cultural aspects as they come out in the selected texts.

Approaching the works from post colonial and new historicism theoretical frameworks, the critic explores the author's quest for distinct identities that may covertly be underlying his overt social vision of racial integration in the changing historical settings in East Africa.

In his M.A thesis 'An investigation of form and style in Yusuf Dawood's works' Benson Kairu Kamau investigates the content, form and style utilized by popular works using selected works by Dawood as illustrative material. The books are Yesterday, Today, and Tomorrow, Off My Chest, The Price of Living and Water Under the Bridge.

Kamau's thesis gets its thrust from the opposing schools of thought raging in the seventies. That is, the position and function of popular literature vis a vis serious or committed literature. This observation is evident in the study's first objective.

The study investigates whether works can be both popular and serious and if so what particular elements make duality possible

(ix)

Kamau therefore defines what is considered popular and what passes for serious literature. The thesis then endeavours to show that Dawood's works fit both definitions.

The critics' interest in Dawood's works can also be inferred from the theoretical framework he uses. Kamau points out that his study uses New Historicism literary theory because;

The theory treats all texts in a culture as necessarily expressive of its values and trends. It does not privilege any kind of writings over others in addition this approach recognizes the symbiotic relationship that exists between social historical context and 'literary context' New Historicism enables an analysis of the link between Dawood's works and their immediate Social-cultural realities that influence them (ix)

Kamau is interested in the relationship between literature and society, so he interrogates how Dawood's subject matter is directly influenced by the prevailing social realities, such that at the end Kamau observes.

Themes like the improving racial relations, the emergence of an elite class in Kenya, corruption and disease associated with affluence forms Dawood's subject matter (105)

In studying Dawood, Kamau concentrates on the authors social concerns, and the stylistic elements in the works, Kamau has therefore used Dawood's works of fiction for this feat.

David Dorsey in 'Yusuf Dawood's pastel paradise' has made a review of four of Dawoods works guided by aspects of race as a reading trope. These are Not Strings Attached, The Price of Living, Water Under the Bridge and One Life Too Many.

After making a corpus review of Dawood's fiction, Dorsey concludes that,

... except for a few servants, all characters belong to the most privileged Kenyan Social strata indeed some effort is made to suggest that this elite is but one harmonious stratum consisting of Europeans, Asians and diverse African ethnicities sharing unanimity of values aspirations and ethics (2)

In studying Dawood, Dorsey lays emphasis on the aspects of class and race. He endeavors to unearth racist undertones prevalent in Dawood's works. The critic is also concerned with Dawoods portrayal of the social classes in Kenya. This leads to what Dorsey terms as 'Dawood's principle of a natural elite ...(ii)

The present study departs from previous studies on Dawood by laying emphasis on his character and profession. This compels a scrutiny of his autobiographical works, which has again not been done in detail so far.

THEORETICAL FRAMEWORK

This study proceeds from two theoretical frameworks, sociological literary theory, and postcolonial literary theories. These approaches were not applied separately but rather interjected in a bid to give a comprehensive analysis of the texts studied. The theory works on the premise that there is an intimate relationship between literature and society. In discussing this theory Rene Wellek and Austin Warren in their text Theory of Literature posit.

Questions are asked about the relations of a text to a given social situation, to an economic, social and political system. Attempts are made to describe and define the influence in society, on literature and to prescribe and judge the position of literature in society... (94)

Sociological theory advises that literature is a product of society. It creatively uses language, a social creation, as its medium: it represents life and life is a social reality. It has a communal; function, or use. A majority of questions that a literary work raises are social since the writer is a member of the society.

Hippolyte Taine (1829-92), A French philosopher provided the first systematic treatment of the relationship between literature and society. Taine (1866) viewed literature not as sheer idiosyncratic play of imagination or the isolated caprice of a mind gone wild but as a manuscript of contemporary behaviour and experiences.

The advent of independence in Dawood's work not only brings social changes but is also reflected in the medical world: people who had hitherto succumbed to diseases of poverty, like kwashiorkor now start experiencing diseases of affluence like obesity.

As a proponent of the sociological literary theory (Henry James Selden 1988) contends that the air of reality is the supreme virtue of a literary work. This he maintains is the merit on which all other merits of literary art submissively depend.

Art for arts sake is regarded by George Plekhanov (1953), a Russian critic as the direct expression of the alienated artist wallowing in hopeless discord with his environment; According to Plekhanov.

Art begins when the human being recalls within himself feelings and ideas that he has had under the influence of the reality surrounding him, and gives him a certain figurative expression (20)

Plekhanov thus explicitly states the sociological foundations of literature. Plekhanov also emphasizes that art has significance only when it illuminates, arouses or conveys actions and happenings that are of relevance and indeed importance to society. The Sociological literary approach is thus concerned with the questions of realism in literary art.

Realism is the label given to the theory or practice in art and literature of fidelity to nature or real life or provision of a convincing illusion of life as we normally think of it without an incorporation of idealism. On the potency of realism, Peck and Coyle (1984) assert:

A realist approach allows the writer to create a very full impression of what it must be like for certain people to be caught in certain dilemmas. There is a searching presentation of the full range of psychological and social factors that are involved in any experience (115)

Dawood analyses the questions of the doctor practicing within Pakistan. The country has no health or social security systems. The patient has to foot his

medical bills and this payment is the doctor's source of livelihood. The doctor is caught in a dilemma. The patient is unable to pay the medical bill yet withholding treatment means sure death for the patient. Yet, the Hippocratic oath binds the doctor to protect life. Dawood does not idealize the profession through creating doctors who forsake self-interest for the sake of the patient. He candidly presents doctors who succumb to medical malpractice.

Christopher Clouwell (1969) sees literary art not as enmeshed in some stagnant pool but as a versatile process. To Clouwell literature and society co-exist in a dialectical oneness and hence not only does society impact on literature but literature also influences society. Literature is thus not only a product of society but also a force in the society. Clouwell asserts that art is useful in affecting and even inculcating attitudes since art works on emotions.

Okot P. Bitek elevates the artist to the level of a ruler; according to him the artist creates laws, which are used by politicians to govern. Ngugi wa Thiogo (1981) writes "... the writer is not only influenced by society he influences it. Nurtured and propounded by such scholars as emile Durkehim, Auguste Comte in Europe, Chinua Achebe in Africa the sociological theory advances that.

- i. Literature and society have an intimate relationship. Literature is socially conditioned and reflects certain ascertainable facts and emotions. Art has significance only when it illuminates, arouses,

or conveys actions, emotions, and happenings that are of relevance and indeed importance to the society.

- ii. Literature has value as a criticism of life. It makes a declaration about the qualities life does not have but should have. As society changes its literature also changes although often in unexpected ways.
- iii. Literature and society co-exist in a dialectical oneness and hence not only do social happenings impact on literature but it also influences society.
- iv. Each genre of literature is not only rooted in a certain social and geographical environment but also performs specific functions to the society.

The sociological theory makes the following basic assumptions;

- i. That human growth and development is regular and that human behaviour is partially predictable.
- ii. Human behaviour springs from the inter play of opposing forces.

Literature in as much as it reflects people's activities and relationship to their environment, also embodies the author's vision. Thus each writer has a way of looking at society and reality of art; but a writer's vision is dependent on his character, circumstances, and experience in a specific time and place. A writer's perception of the future may be deduced from his treatment of the characters in his work.

The sociological theory holds that a writer writes with a purpose. As a member of the society with which he deals, he holds certain views, attitudes, opinions, and desires on his audience. His writing becomes an endeavor to cause that audience to adopt a certain stance towards them. Thus being a member of the society and operating within that particular social framework, the artist does not write as an indifferent or disinterested observer. He actively seeks to affect his audience so that it views reality from his vantage point.

In analyzing Dawood, the study lays particular emphasis on the early sociological theory of the 19th century Europe. The proponents of the theory were conservative, believed in the society and wanted to preserve it. The proponents were deeply influenced by the thinkers of the enlightenment period.

The philosophies of the enlightenment age are summed up by Robert Niklaus as: Acceptance of nature as opposed to asceticism. The adoption of reason as opposed to naïve faith in the supernatural. They advocated tolerance as opposed to religious persecution; the vindication of the rights of man and the need to establish a better world on earth, as a means of heralding modern times.

Dawood's works cover the period immediately before and after independence. This was a period of momentous social changes. The sociological theoretical

framework has been adopted, since at the centre of the framework is the how and the why society changes.

The theory was also adopted owing to the fact that the individual and the society are at the core of this study. The author is treated as one informed by and drawing his material from the society. Within this framework literature is endowed with the ability to tell a lot about the kind of society it is set in. The study is further enriched and deepened through the integration of the post colonial literary theory.

That Dawood views being anglicized as a compliment is evidence of a reasonable degree of alienation and also the hybrid identity his life experiences have imposed on him.

Dorsey goes on to argue that 'Dawood's worldview is emphatically, insistently political.. (12). Indeed Dawood in both the autobiographical and fiction works is thoroughly conscious of his position as an ex-colonial subject. This in the autobiography becomes clear whenever his professional ability is negatively compared to that of a white colleague. This also explains the careful and conscious naming of characters in his works. The fictionalization and reshaping of his experiences, all bear testimony to his endeavors 'to move the center.' It is in this regard that the postcolonial literary theory was seen as enriching to the present study.

METHODOLOGY

The study will adopt a multi dimensional approach. The library research will include a close analysis of Dawood's published works. This will be followed by an examination of reviews commentaries and criticisms on the works.

The projected images will be isolated, analyzed and discussed from such aspects as language setting and plot. Psychoanalyzing the character will mean a close study of the characters actions, and a search for the underlying missive. This is taken rather, in a bid to unravel the author's concealed desire in creating such a character.

Autobiographical silences will be sought for and the concealed attitude and significance elaborated upon.

A limited fieldwork that will involve interviewing the author will be conducted to enrich the perception of the image of the doctor. Further information will be sought from close acquaintances of the author, especially from the Aga Khan hospital to build on the perceived image.

Relevant materials will be sought and incorporated into the study from the Internet.

SCOPE AND LIMITATION

In examining the image of the doctor and the impression of the medical profession, the study will be largely confined to two works as the primary texts. That is No strings Attached and Off My Chest.

Dawood's other texts will on occasion be consulted to verify situations or complement ideas. Articles from his newspaper column, 'The surgeon's Diary' will not be studied, because the autobiographical texts are collections of the same articles.

In the two texts, the Doctor character has been given a wider coverage and prominence than happens in the other works. Study has been narrowed down to the two texts to allow an incisive and focused study of the image of the doctor and the medical profession. This is backed by the high potential for intratextuality latent in Dawood's works. The texts can therefore be relied upon to give a fair and credible presentation of Dawood's character, thematic concerns, social vision and worldview.

CHAPTER TWO

YUSUF DAWOOD: A LITERARY BIOGRAPHY

Yusuf Kodwawwala Dawood was born on 13th September 1928 in Bantwa a small town in Junagadh state part of Bombay Province. India is therefore his ancestral land. However while still a student in Miraj Medical School the partition of India took place and the communal riots, which followed in his village, drove the family out of India to become refugees in Karachi, Pakistan. This experience meant that the bond that anchored the family to the Indian subcontinent and identity was cut, setting them adrift. Dawood's case is heightened in the sense that he was parted from his family, since he was left to complete his studies in Miraj, from there he continued to Grant Medical School, Bombay, for his undergraduate studies in medicine.

Overcoming pressure from the family, that he 'return to the (family) fold' (13). Dawood left India for Britain, for further studies. So Dawood not only loses ties with his motherland, but circumstances also weaken the strong family bond that confines members of a family within close proximity to each other. This period of separation makes it possible for him to resist living and practicing in Karachi; and he ends up a permanent resident of Kenya. These experiences can be seen to influence aspects of his literary works such as plot and characterization.

Despite the movement and being uprooted, Dawood traces his earliest literary roots in India, in an oral interview; he described himself as a studious man who shunned outdoor sports. So he notes that he read a lot in his early life.

...'At the public town library (YTT 4). His father though not a creative writer was according to Dawood, "fond of writing long letters, in flowery Gujerati, which were excellent pieces of literature" [interview]

Dawood's eldest brother Jan Mohammed has written books both in English and Gujerati. The books are on politics, his views on fundamentalism and on law. Jan Muhammed's most popular work was his memoir serialized in the daily papers in Karachi in Gujerati. Sattar his other brother also wrote a lot in his (Sattar's) college magazine. All of them have influenced Dawood in his writing.

Dawood admits to having been influenced a great deal by Somerset Maugham, the medical student who qualified as a doctor but opted to become a fulltime literary writer. Dawood in accordance with Maugham (interview) is of the view that a writer should write about the social "structures" as he sees them and should not 'sermonize' [sic] [interview]. This was elaborated to mean that an author should not be seen to prescribe a given mode of life, or conduct but rather narrate the story as he 'sees it.'

Dawood advocates that a good writer should, "write on what he sees in reality, pick a real life character or incident and build on it" [interview]

Dawood therefore acknowledged that his book, The Price of Living was based on an industrialist friend of his who believed that, ' money was everything.' The friend had a son studying in England who totally rejected the father's philosophy. The book according to Dawood revolves around the class

between the capitalist father and the socialist inclined son. Maina Karanja's visit to Cambridge was facilitated by notes that Dawood had taken while on a visit there.

The hero in One Life Too Many Sydney Walker was actually a patient of Dawood who went under the same name. Return to Paradise was based on real life stories of what used to happen in Uganda during the reign of Idi Amin. The plot captures the atrocities meted to people at the roadblocks and in the State Research Bureaus. The story then follows the lives of those Indians who left and settled in England. Ugandan's President Museveni's gestures of recalling of the exiles Ugandan Asians forms an integral part of the story.

The episode of Amin's hunt in Saudi Arabia was built from notes that Dawood had written while on his Umra or small pilgrimage there.

As an author who draws a lot of his literary material from what's happening around, Dawood's personal experiences can be seen to influence such aspects of his literary works as plot. Part of the action in his novels has to do with the relocation of either entire families or individuals from their countries of origin to foreign lands. There they get accommodated, settle and prosper. This may be seen as the motif of the exile in his works. In Price of Living, Valerie Collins and Dr. Crossley are both Britons who have made Kenya their country. The cross-racial marriage of Christine to Kevin implies that either of them will have to migrate to the other's country, or they will move to a neutral country.

Sydney Walker the protagonist in One Life Too Many is a world war two veteran. A Briton, after the war he worked in India and Malaysia, then West

Africa before finally settling in Nairobi. His Marriage to Ann Means she relocates to Kenya.

When the marriage fails she leaves for Britain, while Patricia his second wife migrates from Britain to Kenya.

Return to Paradise as a title symbolizes movement. Someone had left, so he or she is returning. Masood Khan's family is exiled from Uganda to Britain by Idi Amin. The work basically revolves around the theme of exile.

Dawood's early experiences can also be seen to inform the characterization of his characters.

The works contain that character, who either out of an innate streak of rebelliousness or adventure cannot be tied to his country and what is, usually a notable family property.

Maina Karanja's son, Muhoro in the Price of Living is this type of character. However he is redeemed by the accident and the consequent brain surgery and made to work in his father's industrial empire. Sydney Walker is also footloose; he ends up dying in Africa, such that in reading his eulogy, Charles Gethis says,

Here was an expatriate who was bewitched by
Kenya. He made it his home and his country [...] even in
death he decided to stay with us ... 147

This is a character who has physically and psychologically severed all ties with his native land and is now wholly a citizen of his adopted country.

Irene Fraser comes to Kenya on a two-year contract; she ends up teaching at City Park Secondary School for over twenty years. In the course of her lengthy stay she invites her mother Muriel and David- Fraser who in turn become permanent residents in Kenya.

Another character in Water Under the Bridge Mr. Jaffer migrates to Canada, then migrates back to Kenya after the death of his wife.

In Return to Paradise, the Doctor Couple of Alan Simpson a surgeon and Azra an anesthetist leave Britain for Uganda, where they do outstanding work in surgery, research and teaching, much like Dawood does In Kenya.

However the most poignant of this type of character is the real life friend to Dawood, Iain McNair in Behind the Mask. The only son of a wealthy industrialist father Iain opts for surgery. His row with the father who would have liked him to take over the industrial empire leads to the father's death. When his mother dies Iain sells the industrial concern and relocates to Malaysia where he has all along had a wife Zahrah and a daughter Julia.

Dawood was severed from his ethnic background and thrust into the sophisticated British culture as he trained to become a surgeon. This must have produced a culture shock then adjustment and a notable degree of assimilation. On completion of his studies, he took his British born wife to Pakistan. This again meant adjusting to a different culture since he was from India. He describes a Pakistan as:

... a very different country ... Karachi was a hot, humid, sprawling city. Spawning by miles and thousands every day
[YTT 78]

His arrival and stay in Karachi was by no means a homecoming. He had simply been thrust into another alien culture. The two-year stay in Karachi was followed by a brief stay in England, then the permanent residence in Kenya.

This encounter with different cultures and the ability to adjust within the different environments, must have led to the fluidity and hybridity evident in Dawood's works: what he describes as;

I am a child of three continents and feel at home in all three. I have imbibed the three main cultures of the world born and brought up in India trained as a surgeon in England and settled for most of my life in Kenya. Putting it differently, I am an Asian by birth and upbringing. European by marriage and education and African by adoption or choice [Nothing But The Truth 330]

This in turn influences his literary creations. Dawood comes up with characters who are thrust into new environments and cultures. The characters unexplainably blend in so well in their adopted cultures, that they even outdo the natives. Hence Ahmed in No Strings Attached is an "Asian more anglicized than the British" (62). From their conduct, during Maina Karanja's visit Muhoho and Christine are literary English, save for their names.

Charles Gethi in One Life Too Many has "refinements and mannerisms which made him almost more British than the settlers and expatriates put together ...24. In Return to Paradise the exiled Indians are so well entrenched in Britain that Jamil sums up their position thus:

Our people have attained positions here they never imagined they could ever hold ... amongst us here, we have judges, mayors, professors and also people who will soon stand for parliament... all the three parties, conservative, labor and liberal are assiduously wooing us199)

The former exiles have now become part of the British society; indeed the Britons are ready to give them even political power. Dawood portrays the Britons as so welcoming that there is no trace of racial hostility. This could perhaps be explained by Dawood's comment:

Perhaps I was in England at the right time when foreigners, more so from the commonwealth countries were still welcome ... there was goodwill on all sides [YTT 76]

This is possibly why Dawood's characters are well received in their countries of adoption. They do not encounter racist discrimination and in return they embrace the foreign culture, specifically the British one unreservedly.

Despite what he terms as the

"The inhuman practice of working for ten months of the year in cities a long way away from home and family" [YTT 79]

A practice his father and all the men of Bantwa ascribed to, Dawood describes his family as being stable and well integrated. Love and concern for the other abounds within the family. Therefore the father despite an yearly ten month absence, gets time and resources to guide Dawood's three older brothers into law; Then, "with his characteristic perseverance " he secures Dawood a place in a medical school in Miraj. This was indeed a feat in human patience, endurance and determination as Dawood narrates:

He [canteen manager] told me how my father sat outside the office of the dean, Dr. Airon, the whole day and then in the evening when Dr. Airon came out my father followed his hallowed steps and at an opportune moment ... he rattled out the crammed sentence " I beg you, please grant my son a seat in your medical school ... in the end I got a place on his twenty sixth visit [YTT 194/195]

Indeed the father figures in Dawood's works are kind, benevolent and totally dedicated to their offspring's, Such that even as detestable a character as Hugh in Water Under the Bridge is very caring of his daughter Diana. Hugh breaks his affair with Irene Fraser after David her son and Diana get involved in an accident in which Diana dies. With the death of his daughter Hugh seems to lose meaning for life and becomes a womanizer and an alcoholic, till he succumbs to AIDS. Marriages in Dawood's novels flounder and break when a father feels that the mother has harmed a child. So Walker in One Life Too

Many divorces Anna since he feels that her attempted suicide led to the death of their newly born baby, Tania.

Dawood lost his mother at age nine from post partum hemorrhage: this was at the end of her fourteenth pregnancy. He concludes the sad helpless occasion thus, "we just stood there as my mother's life ebbed away" [YTT 54]. This vivid scene is recreated in Price of Living when Maina Karanja loses his wife during her third pregnancy.

The baby had been delivered at home, like the two previous children, but Wanjiku had had to be moved to the hospital because she would not stop bleeding. "Take my blood, Maina Karanja had shouted in exasperation. (55) Just like Dawood's father who had "thrust his forearm and begged, take as much blood as you need but save my wife" [YTT 52].

This may explain the source of the responsible and caring father figure in Dawood's works.

Even with the demise of the parents the strong family bonds remain among the siblings. The eldest brother Janmohammed and Zainab his sister take over, the role of his parents. It is this family bond that enables Dawood to complete his studies and finally leave India for Britain to acquire his fellowship at the Royal College of Surgeons. Dawood has in his works, decisive responsible offsprings who takeover the running of family concerns when their parents are no longer capable. These include Muhoho in Price of Living David in One Life Too Many, Kanti Desai in Water Under the Bridge. The most

outstanding ones are the twin bothers Imran and Jamil in Return to Paradise. They have to rebuild the lost family fortune, a feat hard to achieve but finally they, even surpass the father's achievements.

Dawood married Marie on 24th May 1958. This was a radical move in many ways. Cross-racial marriages were unheard of in his conservative Indian Society. In their culture marriages were organized by parents who would seek a fitting match, such that the Bridegroom met his bride on the night after the wedding for the first time. His elder brothers and sister had all married within the community and according to established traditions. So his decision was a major departure from tradition, as he notes;

"I had to consult my family... I realized that my letter would produce an earth quaking impact on a family so immutably rooted in traditions [YTT 63]

As it turned out later, the family was very open minded and let him wed the woman of his choice. Again this may be a pointer to the ever- present feature of cross- racial and cross- cultural marriages in Dawood's work. Summarized by Siundu as

Human relations across cultural borders seem t be a feature that is common the most conspicuous ones occur when we see white women getting involved in marital unions with African Men... there are also unions between whites and Asians .. as well as interethnic unions ...[NSL 57]

In the oral interview, Dawood explained that East Africa is a multi-ethnic society. Therefore in writing about the society, interracial relationships become an inescapable feature. In his case, this is further reinforced by the aspect that he is in a cross racial marriage.

THE MAKING OF A SURGEON AND THE BIRTH OF A WRITER

Dawood's literary work is inextricably intertwined with his medical career. He not only recounts his own autobiographical episodes from the time he comes into contact with medicine but also usually builds his doctor characters, from their moments of initiation into medicine.

Yesterday, Today and Tomorrow though not chronologically laid out, details Dawood's early life. His earliest interest in medicine is aroused by the reverence accorded to members of what he refers to as 'this noble profession' (2). This image is imprinted into his young malleable mind by an incidence where a doctor saves a neighbour's baby. Dawood notes, "the neighbour remembered the doctor most reverently as a saint who had rescued her daughter from the throes of death (3). He is further goaded into medicine by his family, especially the father who made it clear that 'a doctor was needed in the house.'

Becoming a doctor becomes, the author's most cherished goal in life. This is evident from the concerted effort the family puts towards this end. When it

becomes impossible to get state nomination to the Grant Medical School the father literally camps outside the medical school in Miraj, till an accidental chance turns up on the father's twenty sixth visit. He (Dawood) has to spend four years training in Miraj before he is admitted to Grant medical college.

The awe in which he holds his chosen career can be inferred from his choice of vocabulary; his second college is referred to as 'the hallowed precincts of Grant Medical School' (5) to his mind it is almost a holy place, set apart and not just an ordinary college.

When he gets to the Royal College of Surgeons, London, Dawood observes;

I stood in front of the building with awe and reverence
looking at it as a hermit would look at a shrine having
arrived there after a long lent of self denial ...15

He deifies the profession, creating the impression of an institution almost holy and sacred, set apart for the chosen few.

Dawood draws a distinct line between medical lecturers and consultants on the one hand and registrars, matrons, sisters and nurses on the other. His teachers are painted in glowing terms. Professor De sa is described as "a brilliant teacher, words flowed from his mouth fluently and smoothly ...7

Mr. Khwaja was said to be "a cool calculating surgeon, safe and sure with his scalpel and with very gentle bedside manners ... 14. Dawood accords great esteem to anybody who has excelled in medicine. Dawood is also a medical

lecturer. Portraits of himself or his lectures keep emerging in his literary works as can be seen in his won last lecture in surgical pathology.

"Sir, "I said with deference in my voice, 'for the last ten weeks you have talked to us about the surgical pathology of almost every organ in the human body. Strangely enough you have not said a word on your pet subject.... I added, I am referring, sir, to carcinoma of the breast ...YTT 61

These words are addressed to Sir James Dawood's Lecturer in Britain. The episode is reenacted later in Water Under the Bridge, this time under professor Kawala.

The professor asked Christine Menya a medical student, " what would be your first clinical diagnosis?" Christine took a little time and then answered, " carcinoma of the breast" ... 222

Like in Dawood's real life situation, the character students are on their last lecture before taking their exams. Those who succeed are hosted to a dinner by the university where they meet their examiners. The same had happened to Dawood and his colleagues at Guys teaching hospital in Britain.

In Dawood's writing the consultant is accorded, an almost demigod status. There is Michael Langley, a consultant from Leeds General Infirmary. A nurse happens to confuse the instructions he has given regarding a patient. For this the consultant harasses everybody in the hospital, with Dawood trailing in his wake:

"our first stop was in the female surgical ward where sister Littleton got the first blast... before the sister recovered from her shock, we were on our way to the Matron... by this time the hospital internal phones were buzzing with the news of Mr. Langley's itinerant blow out... (44,45,46)

Due to the position he holds, the consultant is able to verbally assault, and intimidate all the other hospital workers.

A consultancy is such a venerated position; it is almost akin to the aristocracy. One can only ascend to a consultancy after the demise of an incumbent. What Dawood calls "waiting for a dead man's shoes," ... RTP 195

Dawood as an aspiring doctor, lecturer and consultant had to build this elevated mental images, which would in turn spur him to work even harder to achieve what was mapped in his mind as great feats. In Dawood's creative works, his favoured characters usually end up becoming doctors.

Hoff Rhoda in her book, Why they Wrote, in discussing Charles Dickens notes; Even at twelve years of age Charles Dickens, had a seeing eye, some of the most famous episodes are built on the things he observed when he was an unprivileged boy visiting his father in prison...6

The 'seeing eye' may be seen to imply the ability to perceive phenomena at a deeper level. Having an eye for detail and the ability to describe what is perceived in an artistic manner.

Dawood displays this 'Seeing eye' in his ability to capture poignant moments of his life like when he has to earn his keep and study for tedious exams in a strange country. Subtly he brings out the helplessness of the medic when confronted by unexplainable outer forces. He juxtaposes the case of the young buxom lady, the wife of a rich company director. Operated on by the consultant surgeon, anaesthetized by the consultant anaesthetist, to the case of the frail old lady, who lives in a home for the aged, she is operated on by the inexperienced surgeon and anaesthetized by a trainee anaesthetist. Incidentally both ladies arrive at the hospital at the same time, and both had a fractured neck femur. The irony is that though all the odds are pitted against the old lady, she survives while the younger dies. True to prototype, the inexperienced surgeon is Dawood.

Dawood derives his inspiration and literary material from his medical work, unraveling his medical life shed's light on his creative works.

As an author, Dawood feels that there is need for the emergence of many more writers. However he observes that Kenyan writers should aspire for a multicultural appeal, and come up with works, which are more universal, in thematic concerns.

Dawood is of the opinion that Kenyan Publishers do not do enough in far as marketing published texts goes. The publishers should make concerted efforts to market Kenyan works, in the English speaking Africa. The government

should promote literature, through such means as honouring outstanding literary figures. In a bid to promote literature, Dawood is trying to initiate the Yusuf Dawood prize of literature, to be awarded to the best undergraduate student of literature at the university of Nairobi.

The chapter has traced Dawood's literary journey in order to get a closer understanding of the contents of his work. There is an influential connection between his professional experience and the depiction of the characters and events in the works. It is this autobiographical elements that draw his readers to his work. Chapter three aspires to unravel the reality beneath the glamour and nobility associated with the profession.

CHAPTER THREE

INTRODUCTION

The first part of this chapter looks at the form of Dawood's autobiographical text, Off my Chest. The aim is to expose structure and therefore show how the various elements of the text are interrelated. In other words how the various units work together to contribute towards thematic elements of the work.

Informing the argument herein is Wallace Anderson and Norman Stageberg's contention in their book Introductory Reading on Language that one of the chief concerns of both modern linguists and modern literary criticism is structure. Anderson and Stageberg further argue thus about modern linguists and modern literary criticism:

Both assume that structure is more than an accumulation of primary items.

Both look at the object which they study ... as essentially a kind of gestalt, in which there are physical items, so that any unsystematic rearrangement of the items is destructive to the whole [Pg 141]

It is the systematic arrangement that this part aims to uncover in Off My Chest.

The autobiographical work Off My Chest is compiled from articles submitted to the Sunday Nation's column, 'The Surgeons Diary'. The nature of the column has a marked bearing on the appearance of the work. Each article in the

newspaper is written as a complete and independent story. A reader needs no reference to a previous story to understand the one at hand. A cursory reading of the work, therefore gives the impression of a collection of loosely connected stories.

This impression is a misconception that must be overcome, if one is to arrive at the wholistic significance of the work. An incisive evaluation of the stories reveals that a conscious and consistent care has been put in the selection and arrangement of the episodes. Hence Off My Chest is not simply a collection of articles from the author's column, 'The Surgeon's Diary'.

Indangasi in 'The Autobiographical impulse in African and African-American literature' observes:

The writer of an autobiography being the artist that he is, selects reorganizes, rearranges and reshapes the facts of his life in order to communicate a higher truth...114

These aspects are evident in the work such that at the end one can discern the higher truth. This way we get an imposed order in the work that is aesthetically appealing to us, due to the coherence achieved in the reshaping of lived experiences.

An appreciation of the cohesion inherent in the work entails a perception of Dawood's mode of narration. In simulating his life experiences, the author makes unlimited use of allusions and anecdotes. These allusions are not presented chronologically, but reordered to reveal causes and events. For example when advancing a given viewpoint, Dawood will reach back in time

and give an anecdote that either exemplifies, justifies or leads to the view he has taken.

The structure of Off My Chest makes it possible to mentally delete all the anecdotes in the work. When this is done one is left with the bare essentials that comprise Dawood's life.

Ignoring the anecdotes in the text, demystifies Dawood's plot. One discovers that underlying the largely independent episodes in the autobiographical work is a consistent and systematic super structure which joins the component parts into an organic whole. Without the anecdotes one is left with a chronological arrangement of Dawood's life history his experiences both social and professional, the philosophies he has evolved from the experiences and therefore his world view.

With the idea of the superstructure, one can easily summarize the work. The book opens with Dawood's justification of why he became a surgeon. He then captures his arrival in Kenya at the onset of independence. His interaction with the personalities associated with the freedom struggle makes him identify with the country. He then embarks on a struggle to build his reputation as a surgeon. He also works towards making the Aga Khan a popular hospital. Consequently, he is elevated to the position of executive director of the Aga Khan Hospital and appointed lecturer at the Nairobi University School of Medicine.

The pressures of running a hospital leads him to writing and he publishes his first book, No Strings Attached. He loses the seat of executive director in 1978 and his formal ties with the Aga Khan in 1983. This was as a result of

infighting between the consultants in the hospital. The experience was very traumatic to him

However his leaving the Aga Khan proves to be a blessing in disguise for he now opens up. He starts working in other hospitals, playing golf, spends time with his family. He joins the association of surgeons and revitalizes his rotary membership. Finally writing became a 'panacea and a compulsion'. The accomplished Dawood therefore emerges after the traumatic experience of being forced to leave the Aga Khan. An institution he had devoted his life to, neglecting his family, going without holidays, undertaking precarious operations for the hospital sake. His painful disengagement leads to a self re-discovery, what he terms as:

"in time the phoenix rose from the ashes and what happened at the Aga Khan proved a blessing in disguise"

[147]

He seems to awaken and discover that a whole wide interesting and varied life existed outside the narrow life he had confined himself to, of running the hospital. It is the contention of the study that here in lies the higher truth, letting go.

With this, Dawood really starts living. Indeed in the oral interview he confessed that the title of the work is symbolic. He was getting the bitterness of the betrayal by people he had worked for and with, people he had taught

how to operate, ' off his chest' with the purging, life blossomed. The re-discovery really marks the end of the text. Shortly later his two children leave the family nest for further studies abroad. He sums up the work by looking back, in time. He has lived and worked in Kenya for twenty-seven years and synthesized three main cultures.

The work like other autobiographies reveal that Dawood's life is shaped by the impact of his family, social events and personalities he has encountered.

The tone in the work has changed to suit the various periods: the optimism and idealism of his youthful years, the ambition and drive of running a big hospital, the bitterness of rejection and finally the satisfaction of re-discovery and rebuilding his life.

As shown, Off My Chest is a systematic progression of Dawood's life. However the work is so literary that the text reads like fiction, a fact that Dawood acknowledges in the prologue of Behind the Mask

Many regular readers of surgeon's diary have asked me if it is based on fact. A few have assumed that it is a work of fiction [B M 1]

Dawood's observation that a few people have assumed it is fiction is actually an understatement. The works have all the elements of fiction and essentially this is what contributes to the popular appeal of the column and by extension the texts.

Dawood achieves the aesthetic appeal in his autobiographical work through the conscious and systematic application of myriad literary techniques. His

thematic concerns, philosophies and worldview can only be arrived at after an appreciation and analysis of the literary techniques used in the work.

The author adopts the I narrator. This ensures that he is not only an eye witness to what he tells us but also usually one of the actors, giving credibility and cohesion to his narrative. This also adds weight to the societal concerns and philosophies he espouses. He is able to effectively manipulate this I voice so that while the narrative voice remains a central one, his voice at the same time ceases to just represent Dawood but becomes a representative of a group of people. This happens when pronoun I is substituted with such nouns as a surgeon, consultant, physician or the pronoun we. " every surgeon in the course of his career picks up a pet subject...[UMC 125]... " We the consultants at the hospital accepted a medical director in good faith" [103]

Through this narrative device, Dawood manages to generalize his situation to include other people. This enriches the work in that through him the reader is now able to visualize the kind of life the surgeon in Kenya lives, as opposed to the life of an individual known as Dawood.

The most dominant technique however is the anecdote- each important event in his life has an anecdote to go with it. The themes and opinions are also brought across through anecdotes. These anecdotes really contain the beauty in the autobiographical work.

Dawood purposefully creates literary characters, through whom, his anecdotes unfolds. These characters are typical and evidence in the text is availed to show that the character is a kind of a derivative of social forces. One of the characters in the text is described thus:

Mr. Mathu brought his wife from Meru to see me. He was obviously an outdoor man who relished the fresh air and the warm sun of his beautiful country. His rustic, ruddy face bore testimony to it. He wore an old woolen suit, creased and ill fitting and a trilby hat frayed at the edges...[14]

This description presents a typical provincial character visiting the city and can fit many African men from the countryside. The irony here is that Mathu is reasonably rich as he [Mathu] points out;

I am thinking of taking a second wife who can help my present wife in the house and also produce more children who will be able to run my shop, make my farm more productive and also supervise the buses and trucks in my transport business...[16]

So naturally, Mathu can be able to dress better. However in the text he represents a type of people, which is why he is presented thus, just how typical he is, is qualified by Dawood when he gives the same description to the hero in his fiction, Water Under the Bridge;

Mr. Oloo held a frayed old trilby hat in his left hand. He wore an inadequately pressed three piece suit, with a too tight jacket and a waist-coat which had some buttons missing [W.U.B 11]

The person from the real life and the character in the fiction are both typical. In the autobiographical works, Dawood chooses his characters, then describes them, in a way as to persuade us to take an attitude.

He says of Mathu;

his quiet dignity, his kind manners and his 'salt of the earth personality, all become very obvious...[14]

From the terms used, Mathu comes across as a positive character. Then Dawood describes Miss Falkland a masochist and a sex pervert who had knowingly almost misled him to operating on the wrong arm:

She was short and stubby, her legs were like oaks, sturdy and unsightly and she had a mild duck-like waddle...[27]

... As I said this a vicious look came into the eyes of Miss Falkland which reminded me of a cross between a witch and a vampire...[YTT 29]

In the world of reality, it is not possible to have people categorically divided into either good or bad. Traits which are then reinforced by their physical appearance.

These are characters developed by Dawood to tell his story. Though the characters are individuated they still remain typical. This may possibly explain why all the African families in Off My Chest are large. Kaggia has two wives and eleven children; the unnamed Mzee from Nyeri has four wives and many children. This typification contributes to the universal values in the work. Dawood creates the people from his world of reality in a way that makes them appear like characters.

The literary nature of the work has led to the presence of stories within the story. There emerges portraits within the story which is addressed by the second part of this chapter.

PORTRAITS OF THE MEDICAL WORLD

OF LOFTY IDEALS AND THE MUNDANE

Diederich Westerman, the German Anthropologist who published the first modern collection of African autobiographies emphasizes that it is the duty of anthropologists to let the African

“ speak for himself in order to get his method of expressions and to understand his method of expressions and to understand his reasoning and explanations [qtd African autobiography 8]

The above statement can be rephrased to read, let the doctor speak for himself, for indeed the autobiography provides vivid impressions of the life and thinking of the author. The autobiography provides insights leading to a correction of certain erroneous stereotypical descriptions given by ‘ outsiders’. Naturally the autobiographies contain descriptions of outstanding events that are common in the experience of most doctors. The works therefore elicit information that may not be got anywhere else.

So the insights Dawood provides into the medical world are as close as we can get to an understanding of that group of people. As a job that deals with human life, medicine has from times immemorial been associated with such ideals as the tenets contained in the Hippocratic oath. This section of the study looks at the ideals of medical practice, in the face of day-to-day realities. Dawood’s earliest impressions of medicine are as superficial as they are idealistic. He contends that:

My decision to take up medicine was based on two reasons.

Firstly, I was attracted by the halo that members of this noble profession carried over their heads in those days. The doctor not only belonged to the elite of the society he served but he was supposed to have some influence over life and death [YTT 2]

This is a very elevated perception of any profession. The diction is telling ... this noble profession... how noble becomes of interest to the present study. Dawood goes on to contend that:

Thirdly criminal law, like surgery, is considered a glamorous profession and T.V and films all portray the surgeon in the operation theatre and the attorney in a court of law as brilliant, colourful characters [O. M. C 57]

As afore noted autobiographies provide insights. Glamour was Dawood's idea of medicine as an outsider, but now writing from within reveals a different picture. That the halo and the glamour is a façade that is left on the cinema screen. Through writing Dawood humanizes the profession. Showing the weaknesses, the petty jealousies, the frustrations and triumphs that assail the doctor.

Dawood's aspirations as a student, of the kind of physician he would like to be, are equally idealistic:

When I was qualifying as a doctor I was often asked why I had chosen medicine as a career. At the time there were two topical answers to this question. The decision was either motivated by the missionary zeal of Albert Schweitzer to serve the sick in Africa or dictated by a burning ambition to discover a cure for

cancer collect the nobel prize in the rich setting of the Concert Hall in Stockholm [YTT 1]

However this selfless almost messianic aspirations are in time modified by the realities of day to day existence. The need to meet the requirements of life, what might have led Somerset Mangham, in Of Human Bondage, to say of Phillip the aspiring doctor:

He found it very comfortable to be heart free and to have enough money for his needs. He had heard people speak contemptuously of money; he wondered if they had ever tried to do without it. He knew that the lack made a man petty, mean, grasping. It distorted his character and caused him to view the world from a vulgar angle ...[573]

It is this modification of ideals that leads Dawood to say;

On the other hand I had devoted all my formative years to become a surgeon, had nurtured certain ambitions and aims and I could not see any chance of their fulfillment in the very strange environment in which I found myself [YTT 83]

This is Dawood talking after making the decision to leave Pakistan, to escape the raging poverty, and particularly the medical malpractise enforced on the medics by, their sense of insecurity...82' Dawood therefore opts to go back to England. Which is in total contrast with his earlier stated topical answers. That is a desire to serve the sick amidst the 'hardships of deserts and jungles' [OM.C 2]

A more down to earth and reflective Dawood, gives his reasons for abandoning the earlier ideals:

Having come from humble beginnings, I had experienced the pangs of poverty. Living on meager bursaries and loans, working in the evenings to augment my constantly dwindling funds, walking long distances to school... All these were great fun at the time but had left deep scars of insecurity [YTT 108]

With these words, Dawood looks back at his earlier experiences, apparently with trepidation. Armed with the knowledge of the horrors of poverty he goes on to state his new ideals

Be that as it may, I decided that I must achieve financial independence for myself and my family. It was not greed to fill a bottomless pit or to make money as an end in itself. I wanted money as a means to achieve ends, which I had already defined. I wanted money to live well, to educate the children and to be permanently free from want and shortages [YTT 109]

So, social economic pressures here have already started puncturing holes into the façade of the nobility and glamour of medicine. External forces are forcing Dawood to dispense with the lofty ideals of missionary like service to mankind and come to grips with the rigours of reality. That is, much as medicine is a noble calling, the practitioners' financial aspects must also be considered.

The new ideals shape Dawood the physician. He is able to resolve the dilemma that confronts him when he starts charging fees to his patients, he emphasizes that:

Until then I had not worked in a system where I was directly paid by patients for services rendered to them and somehow this did not seem right to me. I would have quite happily settled down into a full time appointment preferably in a teaching hospital where I could do clinical work, teach the students and do some useful research [OMC 49]

In as much as Dawood would have aspired for a scholarly career, he is forced by circumstances to work for money.

Though he states that 'the new arrangement (of charging fees) was reluctantly accepted by me ...' [OMC 50]

He comes up with anecdotes that not only justify the arrangement, but seem to suggest that patients prefer paying.

Dawood recalls the case of Sir John and Lady Pickering. A couple he met at the national theatre. Whilst coming in for the second act Lady Pickering had tumbled and sustained a fracture on her wrist. Dawood identified himself as a surgeon examined her and explained that she needed an x-ray. Dawood comments:

I was glad that in my ignorance of the social strata they belonged to, I did not mention an ambulance ...[51]

Dawood's encounter with this couple is as interesting as it is revealing. After an uneventful operation, Lady Pickering's hand had mended. However she had opted to stay in the expensive private ward for an extra three more days.

After a time, it was Sir John's turn to be attended to by the doctor. For what Dawood saw as a simple operation on Sir John's finger, the latter's personal doctor had recommended that he be flown to Britain.

Dawood convinced the aristocrat that he could carry out the operation. This, he did and very successfully too. Again Dawood sent a statement of his charges: a modest two-figure sum in Kenyan pounds

Two days later, Sir John was in the doctor's office, flinging the fee note on the desk he protested:

" I am very unhappy with your fee note".

Dawood had responded by asking him to pay what he [Sir John] thought was right if he felt the charge was steep. Sir John rejoined that if he had flown to London for the operation. It would have cost, roughly two thousand British pounds, Sir John summed his argument:

" I feel that you should charge at least half this figure" [56]

The irony here is that of patient's options to stay longer than necessary in the hospital. The deeper irony is that of somebody coming to complain that he has undercharged, then multiplying the charge almost a hundred fold and actually paying the sum.

As stated before the anecdote is very telling, for if the Pickering's conduct is unusual, Sir John's teaching is not. His last words to Dawood are;

" take my tip, never undervalue or undercut yourself" [OMC 56]

The implication here is that once you have worked, you should demand payment commensurate with your work or service. To a doctor gingerly learning to charge a fee for his services this quip most have been an eye opener. Only that, then he was dealing with a super rich British Aristocrat who could be by no means a representative of the typical patient.

In the same vein, Dawood in Behind the Mask recounts the story of Mariam, A lady he met when he was starting his private practise. Noting he was hard up, the seamstress opted to sew his office curtains free of charge. In return they agreed that she and her two sons would receive free medical services. In time Mariam kept on coming for free medical services from Dawood. A facility Dawood notes she never abused through out their stay of ten years. In time Mariam got married to a rich Arab. Her last visit to Dawood's office was to force Dawood's secretary to calculate the cost of all the services she [Mariam] had received from the doctor, a sum she promptly paid up after deducting her charge for sewing his curtains.

These episodes show that underlying the doctor patient relationship is the issue of sufficient remuneration of the doctor by the patient.

This way the nobility of medicine is compromised by pressing social economic factors. This contention is further reinforced by Dawood's encounter with surgeons in the poverty-ridden Pakistan.

In Karachi Dawood met Aziz a boyhood friend. Aziz was a hard working poorly paid building contractor. One day while supervising the building of the third floor of a building he fell and broke his spine. Dawood examined his friend [Aziz] and told him that a broken spine was an irreversible condition, for the

spinal cord could not be rejoined again. Dawood therefore advised Aziz that his only recourse was a programme of rehabilitation.

To Dawood's surprise, three days later, he found Aziz in the ward of a private nursing home owned by a surgical colleague. On asking, Aziz told him that the other surgeon had told him [Aziz] that he [surgeon] could join the spinal cord through an operation though at the cost of Aziz's life savings.

Aziz died three months later, his body riddled with bedsores and an overwhelming urinary infection. Two natural consequences of the injury when left without the rehabilitation Dawood had insisted on.. Aziz left a young widow of twenty-three and six children penniless. All of them believing that the death was an act of God.

When Dawood confronted the surgeon with the question, " how will this operation benefit the patient?"

The surgeon's response had been as callous as his deed;

" I can't tell you how much the operation will benefit the patient but it has certainly helped the surgeon [YTT 81]

Here is a surgeon who has forgotten the Hippocratic oath, and has sacrificed all the medical ethics. With no guilt conscience, he cheats a desperate disabled man of his life's savings, which would have sustained the orphaned family. Hence his profession becomes a means to enrich himself while killing not only the patient but even the family, since taking their vital savings is condemning them to sure death.

Dawood also recalls the case of the Muslim priest, cheated by a surgeon that his impotence could be cured through bone grafting.

Dawood notes:

As expected, the whole experimental procedure had failed and had left him [priest] with a large wound pouring pus ... the money he begged and borrowed to pay for this fantastic piece of surgery had finished and so had his further treatment by the hand of the surgeon...[YTT 81]

This type of degenerate physician is a product of harsh economic circumstances. The surgeon subverts medicine and all the profession's ideals, in his struggle to survive. This is summed up by Dawood as being caused by the surgeons " sense of insecurity, their rising expectation of life and spiraling financial needs [YTT 82]

Hence the prevailing social circumstances ends up producing a con and a killer who has ironically been entrusted with the protection and sustenance of life.

The doctor therefore becomes a reflection of the societal circumstances of the day.

INSIGHTS INTO HUMAN NATURE

Dawood's encounter with the medical fraternity not only as an integral member but also as an observant participant in its affairs makes him a valuable reservoir of the society's values and trends.

Susan Smernoff in her article, ' irony' observes the following in regard to Solzhenitysyn's works:

Most of the significant action occurs in a very confined area explained, in part, by the fact that he (Solzhenitsyn) has spent so much of his life confined in prison camps and hospital wards...

She goes on to posit that the device of artificial confinement,

... places the characters in certain relationships, and establishes special ties among them, be they inmates, or the guards and their bosses, or other administrative personnel. The technique provides the writer with many new opportunities to penetrate into the souls and minds of the heroes, to open them before the readers eyes and to allow an intense and sincere exchange of opinion among them, more sincere than was possible outside the prison's or the ward's walls. [Chekhov's art of writing 170]

Much as Dawood's style of presenting personalities is different from how Solzhenitsyn creates his characters. The two share the aspect of writing within confined environments. The autobiography hardly ventures outside the hospital. Dawood narrates about his life in the wards, his encounters with doctors, patients, nurses and their relatives. Within such confined spaces the relationships that Smernoff talks of are bound to develop, so do the chances to penetrate into the souls and minds of people.

This part of the study looks at the insights Dawood provides into the natures of people. The hidden at times ugly personalities that only come out during moments of duress.

IRONY OF THE DOCTOR AS THE PATIENT

In the course of treatment, physicians are urged to perceive patients as human beings not cases to be solved, but the nature of the profession dictates against this. To a large extent, the profession dehumanizes the doctor and alienates him as is evident below.

In the case of reversal of roles, whereby the doctor becomes the patient the Swahili saying rings true:

Mkuki ni kwa ngurue, kwa binadamu chungu.

Translated : A spear is for stabbing a pig, used on a human being it is painful.

Dawood is suddenly inflicted with a chest infection, which requires an operation. It is Dawood's first major ailment. The surgeons reaction is reminiscent of Chekhov's Doctor Ragin in 'Ward No. 6' who:

" Suddenly, in the midst of the chaos, the terrible unbearable thought flashed clearly through his mind that these people, who seemed now, in the moonlight, like dark shadows, had had to experience, for years, day in day out, exactly this kind of agony ... [qtd in Chekhor,s Art of writing 167]

The physician like the persona in the Swahili saying is able to maintain an impartial distance when dealing with disease in other people's bodies. Till the disease now racks his own body, with the personalization of a phenomenon the doctor has viewed from the detached position of 'the other' for so long, crumbles the aura of invincibility, Dawood confesses:

things I had been dishing out to my patients, like intravenous drips, large operation wounds, coughing exercises after surgery, drainage tubes all became very painful as I imagined having them. I realized then that it is a different kettle of fish when one has to take a dose of one's own medicine. [OMC 42]

Dawood learns that what is bearable and even justifiable in the abstract, is quite another matter when it becomes concretized and personalized, when the victim is one self. This when juxtaposed with a later statement by Dawood becomes instructive, " like a chain smoker missing his ubiquitous cigarette from between his fingers, I knew my hands would sadly miss the scalpel...[105]

So Dawood dreads anybody operating on him, yet cutting up other people is for him an addiction he can't do without. Clearly persistent contact with disease, pain and blood alters the doctor's psyche. The experience hardens him to human feelings and suffering.

For the doctor to treat a patient affectively, he must see the patient as the 'other' indeed a case to be solved. Implicitly this is the point Dawood makes when he maintains that 'surgeons make the best 'hypochondriacs' [42], they dread injections. Yet they mete injections with impunity to their patients. He goes on to say that, ' doctors make the worst patients [40]. This is because the role has been reversed. The 'other' has now become the 'I' and so the implications are vastly different. The same is revealed in the story of professor Kahara. The professor was described as a typical research worker. Specializing

in breast cancer he (professor) would examine the specimen, collect data and explain the nature of the disease. Dawood confesses:

‘ when he (professor) expounded his findings, I got totally absorbed in his relentless search for knowledge [126]

His peers clearly recognized him as the leading authority in the field of breast cancer. The professor would confidently say, ‘ we will tame the monster one day”... human endeavor is bound to overcome cancer [127]

Coincidentally the professor’s wife was diagnosed with a ‘ sinister looking lump’ on her left breast. The wife then insisted that the professor should examine the lump, to determine if it was cancerous or not.

The ensuing Drama is graphically captured; Dawood the operating surgeon removed the lump from the breast and handed it to the professor for examination. The professor reappears twenty minutes later saying, he simply could not make up his mind if the lump was cancerous or not. Dawood reflects “in my twenty years of working with him he had never been equivocal” [128]. But this time the professor said he could not see straight. Dawood was forced to call in another doctor to pass the judgment. On being summoned Doctor Stewart’s response was:

“ you must be raving mad ” Dr Stewart replied, “ the whole world goes to Prof. Kahara for a second opinion and here you are telling me he wants my advise on a breast?”

Finally Doctor Stewart peered into the microscope, moved the slide up and down, left and right, did it again, and declared there was no trace of malignancy.

Doctor Stewart's last words were directed to Professor Kahara, " a most straight forward slide I have seen for years. What was the problem? [130]

The problem was that the shoe was now on the other foot. The patient was not some abstract 'other' but the professor's wife. The professor who had talked of not being surprised by the increase in cancer cases, could not bring himself to see it in his dear wife.

Professor Kahara, Dawood, just like Checkhov's Doctor Ragin and Solzhenitsyns Doctor Dontsova all prove that the instinct for self-preservation runs deep. In them one cannot fail to discern the all, too human traits of fear of the unknown and being egocentric. Clearly the doctor must perceive the patient as the 'other', a lesser human being to be to carry on with his duties.

This shields him from the pain, suffering and death surrounding him. For some doctors the gory details of their work proves too much to bear. Such doctors have to galvanize themselves from the harsh realities of their work. This explains why Dawood reviews cases of medics who result to addictive drugs to be able to carry on.

There is Doctor Petrowski in Behind The Mask, whose drug problem finally leads him to suicide. The proximity of addictive drugs proves irresistible to some doctors. Hence the case of Doctor Griffiths, initially hooked on chloroform he then went on to pethidine. Griffiths was struck off the register of surgeons, then reinstated after three years. Ironically Dawood meeting him twenty years later accepts a cigar from him [Griffiths]. The cigar turns out to have been stuffed with a narcotic drug. So despite the punishment meted on him and the passage of time Doctor Griffith is unable to drop his drug problem.

THE DOCTOR AND HIS PEERS

In this section the study gives attention to the doctor among his colleagues, how they view and relate to each other in the course of their day-to-day work and eventually the impact the interaction has on the life and personality of Dawood.

The hospital becomes a microcosm of society, with all the traits that characterize a human society. The members depict certain intra-group defining characteristics, which give them a given identity. Members within a group are also marked by a tendency to compete. This is evident at all levels. In justifying why he specialized in surgery, Dawood has interesting revelations to make of the other specialties.

The lay mans awe of the physician holding a stethoscope to his chest is neutralized, since Dawood says that half the distant heart sounds could not be heard, while the other half could not be interpreted. He also notes the rivalry between the physician and the surgeon saying that, the physician, " has developed a pathological hatred for the surgeon, who according to him had usurped all the limelight and glamour of medicine [OMC 2]. So the two specialties rather than complement appear to be competing.

Despite the closeness of the surgeon and the anaesthetist in the course of their day-to-day work, their relationship according to Dawood is not all that cordial, hence a certain surgeon classified anaesthetists into two categories, " there are those who suffer from verbal diarrhoea and distract your concentration from the operative field. There are others who having induced anaesthesia get down to a crossword puzzle or coffee...[3]

All of these comments portray professional rivalry at a very general level.

With the hospital drawing its membership from members of different backgrounds, and interests there is bound to be a clash of interests. Hence the rivalry penetrates down to the level of the doctors at a personal level.

This is why the case of Mr. Sheth is very informative of the emotional undercurrents that mark the doctor's relationships. Names in Dawood's autobiographical works are important for they give, a persons position within the three tiered set-up. The whites as the top brass, the browns in the middle and blacks at the bottom.

Mr. Sheth had been admitted into the Aga Khan Hospital under surgeon Mr. O'neil, an Irish. He was investigated and found to have gall stones. Due to some irregularity of his heart beats, a cardiologist Dr. Arya was called in.

It was Dr. Arya who summoned Dawood to the case. Mr Sheth had started complaining of a sudden severe pain in the right lower chest and became breathless. Dr. Arya felt that the problem was not from the patient's heart or lungs. Mr. O'neil in turn felt that the problem was not surgical Mr. O'neil further clarified that even if the problem was surgical, Mr Sheth could not withstand surgery in his present condition. So a clash of opinions between the Indian physician and the white surgeon.

Then Dr. Arya summoned Dawood, with the words:

" I think it is a surgical problem and even though his chances of standing on operation are slim, I feel that he must be given the benefit of surgery [27]

Dr Arya, reaches out to Dawood in a bid to circumvent Mr. O'neil's rejection to confer an operation on Mr. Sheth. Dawood cautiously asks whether Mr. O'neil would approve of his coming on the case. Since they were on phone. Dawood was immediately connected to his colleagues: Mr O'neil's answer to whether Dawood could take on the case, further portrays the attitudes the doctors hold towards each other;

" do you wish me to come ? " I (Dawood) enquired. " yes indeed, if you want to join the mortality conference," he replied without hiding his irritation [28]

Irritation because of the coming of another surgeon on the case. So to O'neil the other surgeon is not a helper but a competitor. He (O'neil) is more concerned with the validity of his opinion than with the life of the patient, a second opinion injures his (O'neil's) pride. Mr. O'neil's response to Dawood continues,

" there are already two physicians one of whom claims to be a cardiologist, two X-ray specialists, two pathologists and I reckon it won't do any harm to have two surgeons..." [28]

Mr. Sheth's case, has collected doctors from different specialties together. In these doctors are revealed characteristics of the peer group that give insights to the undercurrents prevailing within the profession.

Imminent of the traits, is veiled competition. So Mr. O'neil says there are two physicians, one of who claims to be a cardiologist: the use of the term 'claims' implies that Mr. O'neil doubts if the physician is really a cardiologist.

The group becomes an important forum, where one proves his worth. An important testing ground for what has been learnt elsewhere. Mr. Sheth's case becomes a test to decide whether it calls for a medical or surgical approach. Dr. Arya cancels the validity of a medical approach. Leaving the onus on the surgeons, Mr. O'neil has ruled out his operating on the patient. Therefore the final decision lay with Dawood. Operate on the patient and risk losing him on the table and take the blame or let the patient succumb to an undiagnosed emergency. As Dawood ponders over the dilemma he aptly captures his situation:

There was a large audience both medical and nursing and their eyes were aging, asking provokingly, well bright boy, what have you got to say?

As Dawood reaches the decision to risk the operation, Mr. O'neil asks " Do you think the man can stand major surgery?" carrying out the operation becomes a way to deal with his rival and consequently his feelings of inadequacy and powerlessness. Anything going wrong will not only near the death of his patient, but also deliver a blow to his reputation as a surgeon. As the consent to operate is sought from the family, Dawood comments:

for the moment I wished that the son would refuse to give consent for the operation and release me from this dilemma...[31]

This portrays the immensity of the decision Dawood has taken. It also reveals to the lay person the burdens the physician at times has to bear. That the physician's word or action, determines the life or death of a fellow human

being, with all the moral ramifications that go with it. Unfortunately, the consent is given and Dawood now sums his position:

with so many faces watching, so many lights and so many pips bleeping, if the patient had no pus in his belly, so many fingers would point at my misadventure, I thought. I wish I had joined the majority and left the poor man alone...[32]

What drives him to be reckless is the plight of the patient but above this is the silent presence of his colleagues. Were he alone, he might have opted for the easy way out. But with his peers surrounding him, he had no option but to carry on. He says:

The sister handed me the scalpel; the moment of reckoning had come. I had brought myself to the precipice and I had to jump ...[32]

This shows that at this point, the decision has been taken off his hands; unseen forces were urging him on. Fortunately for Dawood, his great risk pays for between the liver and the diaphragm there was a rapid gush of foul smelling pus. He observes:

No oil explorer could have been more excited to see black gold gushing out of the bowels of the earth as I was to see this pus spurting out of the depth of his liver, I even enjoyed sniffing the pus...[33]

Experiencing the pus takes on a new meaning for him. He feels different. He is free. He is happy. He feels powerful. He is in control and truly a hero to

himself. It becomes a type of initiation. The success brings feelings of increased self-importance and self esteem.

It is with this that he can now confidently face an earlier episode. Telling the son of a Gujerati lady that the mother suffered from cancer of the breast and would need an operation. Since Dawood and the son were talking in English, the son had translated this in Gujerati to the father, a language Dawood understood. Thinking that Dawood spoke only English, the father had promptly told his son in Gujerati

“ let us take a ‘ white’ opinion before we revert to him”[35]

This remark had hurt Dawood to the core. Dubbed an inferior surgeon on the basis of colour by people of his own ethnic grouping. With the success of Sheth’s operation, he is now a doctor reborn, as he confidently puts it:

the precarious operation on Mr. Sheth had changed it all for me.

If a case was considered hopeless by Mr. O’neil [a white] and had been resurrected by me, surely I had arrived [34] (emphasis added)

To the unnamed Gujerati family, the white surgeon was the authority, the center of surgical excellence, but Dawood has already broken that myth. The operation which was engineered by Doctor Arya also of Asian origin portrays a shift from the hitherto held authority. Remarkably in Dawood’s autobiographical works, the doctors who do not excel in their work invariably turn out to be white. There is Doctor Griffith and Doctor Petrowski both drug addicts, Professor Kruger whom Dawood describes as a perfect bore. A most symbolical one is the moment Dawood remembers his best and worst interns

and registrars in his life as consultant. The worst registrar, happens to be one, the surgeon had seen precisely six times during the registrars stay of six months. To cap it all it turns out that he was called John Smith!

The post colonial theory is built around the concept of resistance, of resistance as subversion. Going through Dawood's autobiography one can discern this aspect of subversion. The myth that whites make the best doctors, here is challenged and portrayed as wrong. This may explain why, the degenerate surgeons, Dawood encounters in Pakistan are not named. The consultants who cause his ouster from the Aga Khan are vaguely referred to as:

Surprisingly, problems for me were created by a clique formed by four consultants in the hospital...it was more grievous because they belonged to the same ethnic origins as myself...[109]

From then onwards he simply refers to them as the gang of four. At no time does he reveal their names. Since names gives a characters nationality and ethnic background naming such personalities would weaken the argument apparent in Dawood's work that non whites are equally adept at their work.

Chapter three is hinged on the contention that medicine is a glamorous and noble career. For indeed the alleviation of suffering and saving of human life, has all the potential for nobility and glamour. Just like the daring fire fighters, or commandoes on rescue missions. However an incisive look at the doctor as revealed in the autobiographical work has shown the fallacious nature of this contention. Like everybody else, the doctor has to contend with the mundane issues of everyday life. He has to join the human rat race for money

and other necessities. Social economic circumstances at times forces the doctor to very unethical and inhuman means of acquiring financial stability. Means that irreparably tarnish the nobility and glamour of the profession.

From the analysis, the deity - like awe the layman accords the doctor is eroded. Dawood has exhibited the high degree of uncertainty prevalent in the doctor's diagnosis. Mr. Sheth's case displays an overwhelming degree of speculation. From Dawood we have fathomed that the stethoscope, which symbolizes the doctor in truth, diagnoses little of significance. We have also seen that the doctor not only fears diseases but also dreads even more, the process of treatment. The stressful lives doctors lead and the close proximity to drugs at times leads some doctors to substance abuse.

The doctor at work has to contend with issues like, diagnostic error leading to the death of a patient, professional rivalry and jealousy, which in Dawood's case leads to his being ousted from the Aga Khan hospital. The doctor also encounters segregation on racial and cultural grounds, both from his colleagues and patients. It is the contention of this study that much as nobility and glamour are attributes of the medical profession, there is a notable degree of exaggeration and misrepresentation of facts pertaining to the profession. This may be traced to the media and literary works of art.

On the premises of man's potential for good Dawood reshapes the reality in his works of fiction, to bring about the glamour and nobility in medicine. Chapter four looks at how Dawood fictionalizes reality, through which we get his yearnings and aspirations for a society and a profession he believes in.

CHAPTER FOUR

NO STRINGS ATTACHED

DAWOODS ASPIRATIONS AND YEARNINGS

The chapter proceeds from the assumption that the doctor by no means lives a glamorous life. That the nobility of medicine has been compromised by social economic difficulties and what Dawood terms as 'temporal propensities like envy, rivalry, backstab . . . (105) .yet the study concedes that for a profession that deals with human life nobility of mind and deed becomes ideals to be aspired for. Dawood in concurring with the moral of the essence of nobility in medicine alludes to the Hippocratic oath a great deal.

"I will use my power to help the sick to the best of my ability and judgement. I will abstain from harming or wronging any man by it...(qtd from the hippocratic oath)

As shown in the previous chapter, Dawood is intensely aware of the hindrances social, economic and psychological that hamper the physician attaining the selflessness advocated for by Hippocrates. Nonetheless observing and abiding by the tenets of the Hippocratic oath remains central to the practice of medicine. So Dawood carves a niche, for doctors in his fiction,

within which the ideals are attainable. Yet he escapes a Utopian existence by letting the events unfold under circumstances so real that it reads like real life.

In view of what Ngugi wa Thiongo (1981) observes that "... the writer is not only influenced by society he also influences it." ...7. It is the contention of this study that Dawood deliberately comes up with doctors who under ostensibly normal circumstances are able to uphold the glamour and nobility, of medicine. By so doing he comes up with role models to be emulated. He creates in the mind of the readers, the notion of a typical doctor who is not only glamorous but also noble in character. His writing becomes an advocacy for a change in how people perceive others, success, their work and life in general.

Robert Niklaus in his book A Literary History of France explains that the scholars of the enlightenment period reiterated the need to establish a better world on earth; creative writers would achieve this through a positive portrayal as opposed to outright criticism of the society.

Christopher Cloudwell (Margolies 1969) notes that literature is not only a product of society but also a force in the society. He asserts that art is useful in affecting and even inculcating attitudes since art works on emotions. Being a member of the society and operating within that particular social framework, the artist does not write as an indifferent observer. He actively seeks to affect his audience so that it views reality from his vantage point.

As a creative author Dawood retains a strong faith in mans potential to do good. He therefore seeks to portray positive images as opposed to negative ones. Through non-idealized doctor characters, Dawood shows the possibility of humaneness and dedication within the profession in a crass and callous society. Through creating positive and glamorous characters, Dawood sets a trend to be followed by others in the real world. This has resulted in a notable degree of fictionalization of reality. The fictionalization is evident at two distinct levels. There is the direct alteration he confesses to:

Soon after, I started writing true stories based on my surgical experiences. They were stories of great courage.... If I changed the names and grossly switched the locations, I would not be breaking any code of confidentiality ...110

In his autobiographical works, changing the names of the people and locations, where the events unfolded is the first level of fictionalization. Though aimed at retaining professional – doctor patient confidentiality. In a literary sense this goes further. The Wikipedia Encyclopedia elaborates that, names indicate nationality and status’...8. Hence even with the alteration, when Dawood says that his worst registrar was called John Smith the implication goes beyond the name and a particular person to encompass a category of people.

The fictionalization also takes place at a higher level. There is evident intratextuality between the fiction and non-fiction texts. The intratextuality occurs, with a revealing alteration of facts, names of characters, events and

locations. Implying a deliberate and calculated manipulation of factual reality of his life to achieve polemical heights or levels and comment on social issues. The works are polemical. Certain professional and social issues are not merely presented but argued. Fictionalization becomes an effective tool in advancing the dialectics inherent in the works.

In the autobiography, Dawood comes to work in the Aga Khan hospital. A hospital built with money contributed by the Ismaili community towards their spiritual leader's platinum jubilee. Ahmed in the fiction comes to join a hospital symbolically named as the United Kenya Hospital. This hospital has been built with money contributed by progressive minded people of the three races that dominate the East African Society. Whilst the Aga Khan Hospital is patronized by people mainly of Indian descent. Deliberate efforts are put towards portraying the United Kenya hospital as having a multiracial clientele. Therefore, among the difficult cases Ahmed has to deal with is that of Mrs. Kenrick a white, Mr. Kashavjee an Indian, and Mr Shiroko an African teacher. The three cases arise at around the same time, implying a trend. This careful portrayal of a budding social integration and harmony is a reaction to the societal circumstances.

As Dorsey notes of Dawoods Novels:

Within limits appropriate to fiction, they (novels) are social commentary prescriptive, censorious adulatory. As such, the novels are political statements whose didactic implications warrant careful attention ...2

The works are social commentaries so Dawood goes to great lengths to present a vivid picture of the prevailing society. Of note is that Ahmed has been placed within a deeply racist society. The phenomenon unfolds in front of his eyes with candid clarity.

As they passed through the city center along Delamare Avenue, he felt he could be in a city anywhere other than in Africa. White and brown faces thronged the avenue, either walking out of their offices into their cars or going from their cars to the large shops. The beasts of burden were the sons of the soil. The African with his traditional look of patience and contentment was walking barefoot on the service road4

Racism has permeated all forms of life. Such that even the incidence of particular diseases is along racial lines. There were certain diseases borne of malnutrition like anemia and Kwashiorkor, which afflicted the indigenous population. Then there were diseases of affluence like obesity, coronary heart disease to which the immigrant population succumbed to.

Within the society, considerations like who to appoint for a job, which hospital, club or hotel to patronize are made solely on the basis of race.

Dawood is acutely aware of this societal fragmentation, along racial lines. He sets out to combat this social malady. As afore noted it is possible to tell a writer's vision from the way he treats his characters.

Ahmed therefore becomes a symbol of the global citizen or a universal man. Throughout his encounters and actions, Ahmed comes across as a man who has transcended the boundaries of race. He sees the inner qualities of people and judges them on the basis of their personal accomplishment. It is notable that any character in the novel who contradicts Ahmed's stand of a strictly non racist stance either ends up being made to look ridiculous, myopic or outright idiotic. Mr. Sheen, the senior white surgeon is portrayed as a racist. The matron confides to Ahmed that until the previous year Mr. Sheen had had one posh waiting room for Europeans and another one with rickety chairs for the non-Europeans. Though a senior surgeon Mr. Sheen is cast as a petty man with a keen ear for gossip.

"I hear our friend opened up the ministers wife and did what he thought was a heroic feat?" ...102. This is Mr. Sheen trying to pester, Doctor Kelly for information on Ahmed's operation on a patient. In an authorial intrusion we are told, ' ethically a surgeon should not really pry into the patients of another surgeon ... 102 through innuendoes, we get to see Sheen's incompetence as surgeon; on seeing him Ahmed had noted the thick lenses he wore, and had wondered how he (Sheen) could see anything on the operation table.

It was again said that Sheen had sat on so many committees that his committee's sense' was sharper than his ' surgical sense.'

Mr. Sheen is a poor surgeon who Ahmed judged as looking stern but ' behind the mask there lurked a certain amount of frustration which showed though his pastry white skin ... 2 Mr. Sheen emerges as a petty, incompetent and frustrated person; understandably he is also a racist. There is also the white couple determined to have their son die on transit to a white surgeon rather than have the needed emergency operation performed by an Asian. Their folly is summed up by Ahmed;

" sister, get some bloody sense into those thick heads. I will be very upset if we lose the child just because he was born to stupid parents30

The couple is not necessary stupid. The stupidity is used as a euphemism to show how racism, sickens the mind. The racist propaganda fed on the Everards, has so warped their perceptions, that they cannot recognize ability in a non-white. In the work of fiction Ahmed is provided with the opportunity and ability to prove them wrong, when he successfully operates on the boy.

Certain episodes and characters recur in the fiction from the world of reality in the autobiographies. However, this happens with telling alterations. Professor Kruger in Behind The Mask is said to have been like many expatriates at the time who thought they were God's gift to Kenya. That his patronizing attitude left no doubts on his neo-colonial mentality. However his brilliance and

keenness helps Dawood diagnose the mysterious illness of Mrs. Lubia. Yet for all this Dawood loathed him. Professor Kruger recurs in No Strings Attached as doctor Vohra an Indian. Though Vohra also suffers from what Dawood refers to as 'verbal diarrhoea,' they become firm friends with Ahmed. Finally it is Doctor Vohra's persistence and dedication that aids Ahmed in fathoming and treating the all-too important case of Mrs. Mulli.

Mrs. Kent in real life refuses to have her breast removed. Thereby she gains the love of Henry Grant. She ends up spending the happiest years of her lifetime. In the fiction she reappears as Mrs. Kenrick. The brutally insensitive white woman, who tells Ahmed;

"Africans, perhaps Asians, will come to this hospital and get cut anyhow. We Europeans like to have a second sometimes a third opinion before we subject ourselves to an operation...55.

Mrs Kenrick ends up rejecting the mastectomy on the grounds that she had recently landed the man of her dreams. Ostensibly due to her anti-Ahmed stance and by extension what he symbolizes, she not only succumbs to the disease but also loses her cherished lover before she dies. The plot is manipulated in a way that she suffers, possibly for her racist inclination.

Dawood creates a noble personality, in the character of Ahmed. The surgeon character is free from any shackles of racism. This is not only evident in his professional life but even in his social life. Ahmed is able to get into intimate relationships with women of all ethnical backgrounds. In spite of what Dorsey refers to as Ahmed's multi racial lust ..21 his affairs are heavily symbolic.

They portray Ahmed's absolute lack of bias. He is at home with people of all nationalities and social classes, such that towards the end of the novel we are left with the impression that he marries Wambui, the African sister in charge.

We get an insight into Dawood's professional aspirations through Ahmed. The doctor character is endowed with a remarkable surgical prowess. Ahmed's first operation is dramatically described;

Ahmed was neat, bloodless, Methodical and his every movement was purposeful. The long fingers were not wasting a maneuver, and every gesture was calculated and meticulous...18.

The character is cast as one highly competent in his work. He is able to carry out intricate, operations and save the lives of his patients.

The doctors in the United Kenya hospital fall into two distinct groups. There are those who exhibit negative traits. Hence they portray, racist sentiments, are poor in their medical work and are persistent gossips.

As a mark of Dawood's adulation or positive portrayal, only two characters fall in this category, Doctors Sheen, and Naidu. Therefore, in the fiction we only have two degenerate doctors. All the others are presented as humane

physicians who uphold the ideals of medicine and singularly dedicated to their work.

There is doctor Vohra, though described as getting 'verbal diarrhea when he sees a human being,' Vohra is portrayed as a dedicated pathologist and researcher. Notably his talk is always solely centred around his work. He is heard to tell Ahmed.

The surgical material here is fantastic... where else in the World would you find the opportunity to see the slides of a Kikuyu Keloid, a German chancre, an Ismaili breast, a Luo Oesophagus and an English mans upturned lip..

A life time is not enough to fathom the pathological mysteries in this place...110

Vohra is presented as a researcher who has dedicated his life to unraveling the pathological mysteries in Africa. He has little interest in anything else outside his work. In Vohra one sees a close reflection of the physician Dawood had aspired to become in his youth;

I was determined to become a medical missionary

And work in the God-forsaken parts of Africa or Asia. .. YTT 3

This aspiration is also apparent in the other work

a burning ambition to discover a cure for cancer and collect the
Nobel prize ...OMC 41

Indeed it is acknowledged that Vohra's academic interest was widely known in
the hospital.

There is also Major, the senior anesthetist. When Major was denied
attachment to the European hospital, his comment was, "You know they
would not take me on because I was not of European origin ... 47 Yet despite
the humiliation, it was said that Major's war memoirs centred around the
subject of German women, whom he said were marvelous in bed. So Major's
experience did not make him hate the white people. Indeed he emerges a
better person, who has transcended the racial boundaries. Like Vohra, Major
is also an excellent doctor. In this group, Dawood also places the youthful,
doctors Delgado and Labado, and the recently recruited doctor Linton.

In his narration Dawood persistently puts the two opposing groups on a
collision course. The group espousing his ideals of the profession, led by
Ahmed and their antithesis led by the white Mr. Sheen. There is the instance
when the doctors have to select a consultant, between two equally qualified
doctors, An African, doctor Majisu and the white doctor Linton. Ahmed's
group opts for the African, while Sheen's group goes for the European.

Ahmed's group loses and doctor Linton is picked. Linton however turns out to be anti-racism, and also upholds the professional ideals symbolized by Ahmed. Tables are turned against Sheens group and expectedly Ahmed's group ends up victorious.

Through the two groups, Dawood reenacts his real life experience of the precarious, all-important operation he carries on Mr. Sheth. The character Mrs Mulli the wife of a cabinet minister is admitted under Ahmed. He operates on her, but rather than recover, the patient gets worse. Being the wife of an important man, her case generates a lot of interest in the hospital. Her death means irreparable damage to Ahmed's reputation as a surgeon. Much like Mr. Sheth's in the real life episode.

Dawood uses the case to depict the almost insurmountable medical feats genuine concern for the patient and mutual co-operation among the physicians can overcome. In real life, Dawood had borne the burden of Mr. Sheth's operation single-handed. But Ahmed is presented as having reached his wits end. He can't fathom what's ailing Mrs. Mulli.

Both doctor Naidu and Sheen let out that Ahmed has botched the operation. Vohra takes a strong interest in the case. With a touch of hyperbole Vohra converts his laboratory to a bedroom, meaning he works ceaselessly on the case. The other doctors also dedicate themselves to the case. That Ahmed finally manages to save Mrs. Mulli is the result of the teamwork among the

doctors involved, Vohra diagnoses the cause after several days of research.

Doctor Linton then identifies the necessary drugs.

Through the successful treatment of Mrs. Mulli, Dawood's aspirations are clear.

In No Strings Attached Dawood has assembled a team of character physicians who espouse his ideals: non racist attitudes, selfless, dedication to patients a thorough mastery of medicine and, genuine teamwork as opposed to rivalry, a dedication of one's life to medical research. In these doctors, the nobility of medicine comes across as an attainable ideal; pitted against them the degenerate physicians are presented as an outdated, out numbered lot, who draw the reader's sympathy and condemnation.

His fictional physician is developed as one who has overcome the Manichean view of the world. Hence Dawood agitates for an integrated society and, medical practice that is devoid of racial prejudice.

Dawood's concern is reflective of the Kenyan society then. Goran Hermeran notes in Influence in Art and Literature.

Works of art are not produced in a vacuum. Every work of art is surrounded by that might be called its artistic field and this includes buyers, sellers, artistic traditions literary movements, current philosophical ideas, political and social structures and many other things. All these factors may influence the creation of works of art.

In the same light we see Dawood's pre-occupation with racism and racial integration. The work covers the period immediately before and after independence. The society then was severely divided along racial lines. With independence the leaders' clarion call was unity, and the burying of differences. The idea then was of the larger society becoming a melting pot, into which peoples racial and cultural differences would be 'melted' and they be molded into one. This is apparent in Dawood's portrayal of his main character Ahmed. For in reality cross-racial marriages between Indians and Africans are literary unheard of. Dawood's creation is influenced by the politics of the period.

Glamour in the profession is brought across through Ahmed. Dawood creates a romantic doctor whom he casts almost like Ian Fleming's James Bond. Notably Ahmed is a bachelor. Within twenty-four hours of his arrival in Kenya, he has seduced Melisa the Cypriot dietician in the hospital. The lady literally offers herself to him. Their evening is graphically elaborated. Soon he entices Wambui the African sister. We then see him drive to an exclusive city club with sister Smythe the Irish Nurse in charge of out patients. They then leave for Mombasa in the overnight train. Their fun filled time is again alluringly described. Of his escapades his encounter with Mrs. Keshavjee is most outstanding, the wife of an impotent patient of Ahmed. The stunningly beautiful woman shadows Ahmed's movements from the moment he goes to Mombasa, when he again leaves Nairobi this time for the Hotel Outspan in

Nyeri, she follows him there. They spend the night together, and Ahmed impregnates her. Dawood presents Ahmed's life like that of a movie star. Hence we see him carry out surgeries that amaze everyone. He manages to snatch Mrs. Mulli from sure death. He is seen in posh restaurants with beautiful women. So Dawood manages to separate Ahmed his hero from the tedious routine of a doctor's life. While Dawood in real life is concerned with financial security for both his family and himself, Ahmed has none of those cares. He is a bachelor; Dawood has to charge fee directly from his patients. Again Ahmed is absolved from this. The doctor character has therefore few distractions from his work, which possibly explains why he becomes such an outstandingly good doctor.

The chapter has looked at Dawood's creation of the doctor characters. He has endeavored to portray his doctor characters as mainly very humane and dedicated personalities. In accordance with the realism characteristics of his writing, Dawood has also come up with some negative characters. However, the negative characters are in the minority. Symbolically they are also old, implying that they will soon be on their way out of the profession. The youthful doctors all portend a bright future for the profession.

In portraying Ahmed as a glamorous character, we discern Dawood's yearning for how the profession should be viewed by the society. He nurtures within his readers an interest and a longing for a surgeon's job, through the positive

portrayal; his fictionalization of reality creates and promotes a positive image of the medical profession.

CONCLUSION

This study has taken a close look at the image of the doctor as portrayed in Yusuf Dawood Works. It has endeavoured to scrutinize the doctor as he is in reality and as Dawood aspires he should be. This has been enabled by two essential attributes of Dawood: Dawood is a prolific writer of both fiction and non-fiction works and that he is an insider of the medical profession.

The study has concluded that as a practicing doctor Dawood is an insider writing about the medical profession, thus he is able to dissect and analyze what he knows intimately, looked at in chapter three. It has been shown that the insider position contributes greatly to the authenticity of the works for it makes possible the moving and persuasive quality of the accounts. Dawood addresses the fear that doctors have for diseases and the treatment process. By so doing Dawood humanizes the profession and the doctors themselves in a way an outsider may not be able to.

As a creative author Dawood retains his faith, in mans potential to do good. Through non-idealized doctor characters, Dawood shows the possibility of humaneness and dedication within a crass and callous society. In creating positive and glamorous characters, Dawood sets perimeters and examples to be followed by the rest of society, hence the creation of a better world. This has justified a certain degree of fictionalization of reality.

Dawood's fictionalization of reality is evident at two distinct levels. There is the direct alteration he confesses to:

That of grossly altering the names of his patients and the location where the events unfolded. It has been shown that, the changing of names in his

autobiographical works of the people and altering the locations where the events unfolded is a fictionalization of reality aimed at maintaining professional confidentiality. In a literary sense this goes further, the Wikipedia encyclopedia elaborates that, names indicate nationality and status (2 & 8) the second and more explicit level is where reality is recreated in the works of fiction with thematic concerns in mind. It has also been shown that the works are social commentaries. This lends credibility to the tenets of the sociological theory. The analysis is further enriched and embedded within the African context through the application of postcolonial literary theory.

The work is a projection towards the future emergence of a clique of doctors, who really uphold the tenets of human medicine and research, doctors who work with the welfare of mankind at heart.

Dawood's demystification of the elitist medical profession is indeed a challenge to other professions. Such that if a judge in the high court tried to explain the challenges within the profession it would be a great service to the common man.

The portrayal of the doctor by Dawood, and the medical world can be studied further. The doctor image can be analyzed under the psychoanalytic literary approach. In the context of this study, we have been able to meet our objectives and prove our hypothesis using the sociological and postcolonial literary criticism.

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