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Abstract
Aging and its effects on both body and mind figure in many of Alice Munro’s stories, but in a way her characters age with her, and loss of memory and problems of identity disintegration become more crucial in the late period. This essay explores the representation of old age in Alice Munro’s fiction, focusing on “The Bear Came Over the Mountain” and “In Sight of the Lake”, two compelling stories that portray painful forms of dementia and Alzheimer’s disease. The analysis addresses both thematic and stylistic issues, discussing the connections between selfhood and memory and highlighting the technical and structural devices masterly employed by the writer to communicate the feeling of disorientation and identity fragmentation.

Writing old age
In this essay I intend to explore the relationship of aging, memory and identity in Alice Munro’s late fiction, focusing on “The Bear Came Over the Mountain”, and “In Sight of the Lake”¹, which can be considered most compelling stories of

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¹ “The Bear Came over the Mountain” was first published in the New Yorker (Dec. 27, 1999-Jan. 3, 2000), and later included in Hateship, Friendship, Loveship, Marriage in 2001.

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old age and its often painful changes, in a stylistic tour de force. Aging and its effects on both body and mind figure in many of Munro’s stories, where she draws attention to age consciousness and constructs different representations of middle age and old age, not necessarily as traumatic moments of change. However, when dealing with senescence, new issues and questions of identity are addressed: how much does chronological age alter individual identity, is there a recognizable continuity of self in spite of loss of memory and severe forms of debilitation like dementia and Alzheimer’s disease?

Scholars have pointed out how Munro’s characters age with her, from the Bildungsroman of the early period – that could be called a “portrait of the artist as a young woman” – to mature and middle aged women, to aging protagonists. Older women, however, appear also in early short stories, but usually seen by a younger woman. When old age, disease, and death figure, they act as a mirror, a vision of the future, a *memento mori*. Among earlier texts that introduce this theme and anticipate its in-depth treatment in “The Bear Came Over the Mountain” and “In Sight of the Lake”, are “Spelling”, “Mrs. Cross and Mrs. Kidd”, and “Lichen”.

In “Spelling” Rose returns to her hometown to assist her stepmother Flo, who is afflicted by dementia and needs assisted care. Before placing her in the County Home for the Aged, Rose visits the facility, which is organized on different floors according to different levels of autonomy and consciousness. On the last floor she meets with the totally disabled: «Bodies were fed and wiped, taken up and tied in chairs, untied and put to bed. Taking in oxygen, giving out carbon dioxide, they continued to participate in the life of the world» (187). This painful description of humans reduced to breathing bodies leads to the encounter with an old blind woman making loud shaky noises, whose only persisting ability resides in spelling words, and Rose wonders if they carried «their usual meaning or any meaning at all» (188). This horrifying scene introduces the dimension of language in the assessment of mental failing, and the complicated mechanism that allows humans to establish the connection between objects and language. However, words, even just spelled words, might be able to establish a contact with people, and thus acquire a redeeming value. The text foregrounds the disquieting alterity that aging can involve (Collier 52), but as DeFalco argues, this scene can also be read as significant for its insistence on the «incom-

“In Sight of the Lake” first appeared in the British magazine *Granta*, 118 (2012) and was then included in the collection *Dear Life* (2012).

prehensible, yet undeniable, personhood» of this old woman (Uncanny Subjects: 84). This tour of the Home causes Rose to have a dream where people are locked in cages, with Flo in one of them «handsomely seated on a thronelike chair, spelling out words in a clear authoritative voice […] and looking pleased with herself, for showing powers she had kept secret till now» (188). This dream fragment reveals the perception of old people homes as prison, but also the possibility for the individual to maintain and express her personality. One peculiar feature of stories about old age is the attention given to nursing homes, institutional spaces that foreground the segregating and depersonalizing aspects of residential care, but also engage with the persistence of humanity and questions of identity. As always in Munro, ambiguity and complexity are at the core of her fiction: even when loss of memory and dementia seem to annihilate personal identity, this comes back in a modified version, showing a certain continuity of subjectivity. As critics have pointed out, Flo’s obstinate and demanding behavior when suffering from dementia can be recognized as an exaggerated version of the stubborn younger woman she used to be (De Falco. Uncanny Subjects, and Jamieson. “Surprising Developments”).

“Mrs. Cross and Mrs. Kidd” takes place in a nursing home, which is described in its institutional organization and architecture. The protagonists are two women who have known each other for eighty years, since kindergarten, have some physical ailments but are mentally capable. They have memories, maintain their personalities, can develop new friendships and take care of each other. Intersection of questions of age, class and gender are particularly significant in this story. Even in a story like “What is Remembered”, which is about the love affair of a young married woman, although recounted through the distorted memories of the aged protagonist, a central episode takes place in a home for the elderly, with the visit to an old aunt who seems to have lost any inhibitions and recounts her past sexual adventures, which become a sort of premise to the sexual encounter that’s going to follow.

In “Lichen” chronological age is emphasized by the presence of a male character who refuses to age, dyes his hair and couples with younger women. His ex wife, instead, accepts the aging of her body and seems to find satisfaction in her

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3 Sara Jamieson explores the representation of old age homes in Munro’s fiction and locates it in a gerontological debate concerning the nature and meaning of residential care for older people, questioning the assumptions underlying the pervasive perception of the old age home as total institution of social control. (“Reading the Spaces of Age”). See also Amelia DeFalco’s “Uncanny Witnessing” and Patricia Life’s “Shaking off Shackles”.

4 See Francescato’s essay in this volume.

5 Published in the New Yorker in February 2001 and included in Hateship, Courtship, Loveship, Marriage the same year.
midlife. The inevitable passing of time is marked by the visit to her father in a nursing home and metaphorically by the fading of the photo of a young naked woman the ex husband carries in his wallet and likes to show off because he is having an affair with her. The Polaroid snapshot appears as a version of “L’origine du monde” by Courbet, but the woman’s realistic black public hair is perceived as lichen by his ex wife and later turns gray in the sun. Everything decays and humans cannot avoid aging and death, but this story shows the inner resources of middle-aged women and their capability to adapt to change.

Undoubtedly, however, it is in Munro’s later collections that old age becomes central, and memory plays an important role when a story is focused on an older person who tries to reconstruct an episode from the past, or a whole life. Tricks of memory may happen to a perfectly conscious person, with lapses and subconscious negations, but in some of the late stories age becomes senility, afflicted by illness, deterioration of body and mind, loss of memory, forms of dementia, Alzheimer’s disease. This brings new perspectives to the narration, and demands new techniques and structural devices. Munro’s short stories are always complex structures that may cover a long period of time and be marked by significant temporal gaps with memory playing a crucial role. Her late stories become longer, they occupy a larger span of time, with gaps and various anachronies, making the text more episodic and fragmentary. As Ailsa Cox maintains, in Munro’s late style there is «a sharpened awareness that time is irreversible and a growing sense of discontinuity between youth and old age» (277).

Memory loss and identity: “The Bear Came Over the Mountain”

Critics have recognized the importance of memory in Munro’s work, not just as a recurring theme, but as a structural element that shapes her fiction. Memory becomes part of a complex construction of narrative identity that flows through all of her work, in a sort of literary and biographical trajectory, so that memory could be discussed within a single short story as well as part of her entire narrative corpus. “The Bear Came Over the Mountain” is probably the most relevant for a discussion on memory, identity and aging, and has received a great deal of critical attention. This tale shows the effects of what is recognizable as Alzheimer’s disease on a seventy year old woman. Loss of memory is the primary change associated

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6 Munro herself points out these changes in the Introduction to the Vintage Edition of her Selected Stories (1997): «In later years my short stories haven’t been so short. They’ve grown longer, and in a way more disjointed and demanding and peculiar» (“Introduction”: xiv).

7 See, among others, Francesconi’s essay “Memory and Desire”.
with the illness, one of the symptoms that is generally considered to lead to loss of identity. Cancelling short term memories and sometimes bringing back forgotten ones from the past, the final effect is of disorientation and identity fragmentation. The symptoms are described realistically in the first part of the story, when memory deficits start to manifest themselves in everyday life so that the protagonist Fiona places little yellow notes all over the house, to mark various objects. There is a progressive loss of semantic memory and retrograde memory, space and time disorientation as well as difficulty in recognizing people. The disease leads to her being put in a nursing home and to a crisis in a fifty year marriage. The woman at times seems not to recognize her husband, and becomes emotionally involved with another patient.

The short story is narrated in the third person and is not focalized on the woman suffering from Alzheimer’s, but on her husband Grant, who recalls crucial moments in their marriage, revealing his frequent betrayals in the Sixties and Seventies with students and younger women, without ever wanting to separate from his wife. This re-memoring on his part is an attempt, common among caretakers and family members, to retrieve personal history and to make sense of the past when faced with erosion in the mind of the individual with the disease. In the perfect structure of “The Bear Came Over the Mountain”, the husband’s memories work as a sort of counterpoint to his wife’s loss of memory, bringing to the surface a relationship full of ambiguity, lies, silences and the inability, on his part, to penetrate her mysterious identity. Her personality has always been elusive to him and this constituted part of her charm, so that Alzheimer’s in a way seems only to have increased her attraction. Or maybe his inability to penetrate his wife’s complex personality depends on his lack of sensibility, his concentration on his job and sexual adventures. On the other hand, the woman’s new love story at the time of Alzheimer’s is a sort of counterpoint – or maybe retaliation – to his past betrayals, and in fact he is jealous of this rather absurd, adolescent-like relationship between patients. But other questions arise. In particular: what kind of love is possible for a person whose identity seems to have been affected by the disease? One possible answer is offered by Francesconi: «Fiona experiences desire precisely for the loss of memory. Oblivion creates the conditions for the development of new modes and forms of configuring meaning, memory and desire» (“Memory and Desire”: 349).

More relevantly: what identity remains when memories are erased? This question is related to the significance of memory in western culture and to ideas concerning the formation and persistence of subjectivity. Concepts of self have come under scrutiny by science, psychology and philosophy, with different approaches and ideas on what constitutes identity, from Jerome Bruner’s theory of the narrative construction of identity to Galen Strawson’s debunking of narra-
tivism, that is the idea of constituting one’s identity through narration. Some researchers challenge the notion that loss of memory and language necessarily signals loss of human selfhood. Linda Simon, for example, discusses the common perception of loss of memory as a threat to the survival of the self in Alzheimer’s sufferers, and points out, on the contrary, the persistence and sometimes intensification of personality traits and eccentricities that existed before.

Since the story is told from the point of view of the husband and he cannot know what is going on in his wife’s mind, the reader doesn’t know either. It is difficult to understand how the brain of a patient affected by Alzheimer’s works, even from the neurological point of view, let alone how she/he feels. Symptoms are recognizable, but variations in memory disturbances are frequent, episodes of amnesia are followed by apparent recovery of past fragments, so that it may be difficult to completely accept a diagnosis of progressive degenerative disease. At times the husband in this story recognizes his wife’s personality, her irony and sense of humor and suspects her of joking, like she used to before the disease. Grant oscillates between different perceptions of dementia as a serious pathology that destroys memory and language skills, and a continuity in personality that transpires in spite of loss of memory. When he looks at the patients in the institution, he still perceives their humanity:

even the ones who did not participate in any activities but sat around watching the doors or looking out the windows – were living a busy life in their heads (not to mention the life of their bodies, the portentous shifts in their bowels, the stabs and twinge everywhere along the line), and that was a life that in most cases could not very well be described or alluded to in front of visitors (298).

The questioning attitude in the narrative voice and in the focalizer contributes to the unstable perception of the disease, so that Ventura can speak of a “playful, distanced, and ironic approach to the ravages of aging” (2), and Francesconi of “progressive loss of memory as a non dramatic condition” (“Memory and Desire”: 344). In the same line of interpretation, Patricia Life considers selective forgetting and remembering as an opportunity to live to a greater advantage, facilitated by being in a new environment.

Fragments of dreams and memories: “In Sight of the Lake”

With this text Alice Munro seemed to have reached the utmost limit in her anatomy of memory and loss of memory. But she took the next almost impossible step of telling the story not from the point of view of a witness, but from the point of view of a woman suffering from a form of dementia, possibly Alzheimer’s. She
took up the challenge in the short story “In Sight of the Lake”, with an extraordinary display of creative narrative strategies and psychological insights. The difficulty resides in the nature of the illness itself: «The subjective experience of dementia, particularly in its late stages, remains largely unknown since the condition destroys precisely those tools necessary to produce a coherent life story» (DeFalco, “Uncanny Witnessing”: 223). There have been few other successful attempts, such as Barney’s Version, the celebrated novel by Mordecai Richler, where the protagonist starts writing his autobiography at the beginning of the disease and progressively finds it difficult to continue, so that at the end it is his son who corrects and completes it – a very clever solution to the narrative problem.

In Munro’s story the narrator is extradiegetic, but the focalizer this time is the protagonist, an elderly woman who seems to be suffering from the onset of dementia, is looking for a doctor whose name she cannot remember, and in the process gets lost in the small town where his office is supposed to be. The whole experience is one of disorientation, told in a fragmented way through a series of disconnected scenes and images. The reader’s impression, as well, is one of disorientation while witnessing what happens in the mind of an old woman experiencing a painful loss of memory. She becomes progressively more confused, her mental problems increase, she is lost in space and time. At the beginning of the narrative Nancy (the protagonist) wonders «if her mind is slipping a bit» (217), but she refuses this idea and thinks «It isn’t mind. It’s just memory» (218). However, pathological loss of memory and madness become intertwined, the ‘mind doctor’ becomes the ‘crazy doctor’. A man she encounters suggests that the doctor might be at a Rest Home nearby, and when she gets there the door opens and she finds herself trapped in a hexagonal space with four doors that don’t open, she cannot get out and panics, tries to scream, cannot breathe. She wakes up in bed, and the reader discovers that she is in a nursing home, with a nurse telling her «You must have had a dream. What did you dream about?» (232). She answers she had been dreaming of when her husband was alive and she was still driving a car. Her answer seems that of a person who is in control of her memories and language, not that of a patient affected by dementia. She recognizes the nurse and can read her name on the brooch she wears. She might be in an nursing home for other kinds of ailments, not necessarily because suffering from dementia, or she might be in the early stage of the disease. The final exchange between her and the nurse confirms the ambiguity. The nurse asks her: «You have

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8 DeFalco mentions this novel as well as Jonathan Franzen’s The Corrections and Jeffrey Moore’s The Memory Artist, together with nonfictional memoirs. See also the texts examined by Wendy Roy in “The Word is Colander: Language Loss and Narrative Voice in Fictional Canadian Alzheimer’s Narratives”.

a nice car?». And she answers: «Volvo». «See? You are sharp as a tack» (232). Everything depends on a verbal tense, the present tense used by the nurse. The answer might imply that the patient thinks she still owns the Volvo, but the question might also be a grammar mistake («You have» instead of «did you have?») on the part of the nurse, and then Nancy’s answer would be correct. The end of the story is open, the reader is left wondering if the dream was a representation of her painful process of mental decline or rather of her fear of losing memory and getting dementia. If we look at the earlier version of the story, published in the British magazine *Granta*, everything becomes clear. The protagonist tries to explain herself and is cut short by the nurse:

You see, I have an appointment to see a doctor whose name I can’t seem to get straight but I was supposed to find him here and I have followed some directions as well as I could but no luck. I felt I had got into some ridiculous sort of trap and I must have a tendency to be claustrophobic, it was alarming – “Oh, Jean, hurry up”, said Sandy. “I’m behind already and I have to get you into your nightie and all. That’s the same thing you tell me every time”.

While the final book version maintains uncertainty, this ending, instead, eliminates every ambiguity: Nancy is actually suffering from a form of dementia, her recurring dream is part of her delusion and mind crumbling. Opinions on the two endings differ: Neil Stewart, for example, considers the *Granta* version unquestionably superior while Wendy Rohr values the revised version as the better one and an example of Munro’s mastery of compression.

As is often the case with old people, in the dream she doesn’t remember words and recent facts, but she has distinct memories of the past, she claims that everything was better in former times, when she was young, we assume both in the world outside and inside her mind. The distinction between reality and dream is blurred to the point of misleading the reader. The story reads as the experience of a person who suffers from pathological loss of memory – verbal, temporal, and spatial10. The success of the story is based on the writer’s ability to construct a dream that looks like the meandering of a deteriorating mind. Dreams have the fragmented quality of the first part of the narrative, they often move from one scene to the next without apparent connection, chronological and causal coordinates are weak, the emotional dimension dominates over the

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9 Quoted in Stewart. The character has undergone a name change from Jean in the magazine version to Nancy in the book.

10 In her recent book on Munro, Francesconi interprets the story as a real life experience and the final awakening in the nursing home as happening after a long temporal ellipsis, marked by a blank in the text (*Alice Munro, Il piacere di raccontare*: 91).
rational. Dreams incorporate experiences and fears, they bring to the surface memories that the conscious self may have buried, and Nancy’s dream may be a reenactment of past events, through condensation, displacement and symbolization. If dreams allow for accessibility to parts of the mind that are inaccessible through conscious thought, one question posed by this story is if the dreams of a person affected by dementia work the same way, how much they reflect inner life in spite of memory failures. In her essay on “Memory and Desire”, Francesconi argues that «dreams do not allow the resurrection of memories but perform illuminating contingent rewriting versions of original material. Dreams are valued in Munro’s work for their vibrant narrative potential» (353). It is possibly in this short story that the narrative potential of dreams is explored at its best, together with a visionary attempt to represent the disorientation and painful loss of memory of a person affected by a disabling illness, or of her fear to lose her memories and identity.

In Illness as Metaphor as well as in AIDS and Its Metaphors, Susan Sontag wrote about the ways a culture generates myths about certain diseases that give them meaning beyond that of a physical or mental disorder and reveal culturally shared fears and desires. Apart from being directly connected with population aging in western societies and in Canada in particular, Linda Simon discusses the current popular and fictional focus on Alzheimer’s disease within this critical framework and interprets it as a product of the postmodern world, a representation of the «sense of disorientation in a world that seems increasingly alien, a world of the young in which older people feel, inevitably, pushed to the side» (14). Sontag argued that illness as a metaphor needs to be demystified, and disease discussed literally as well as metaphorically. In these stories Munro explicitly explores the very nature of Alzheimer’s, «with its painful loss of memory, its tenuous grasp of reality and the intimation of a dissolving self» (Simal 62). Her fiction succeeds in offering a realistic and compassionate portrayal of elderly people and forms of dementia as part of the «absurdity of the human condition» (Cox 277), while resonating with contemporary concerns with fear of loss, isolation, disorientation, fragmentation. Lateness of theme and style in her work keeps reminding us of the inevitability of loss and death.

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