‘a grate contribyushun for sience’: Promise, threat, and the trauma of failure in Daniel Keyes’s
Flowers for Algernon

Using aspects of Arthur Frank’s *The wounded storyteller: Body, illness, and ethics* as its basis, this article explores promise, threat and the trauma of failure in Daniel Keyes’s *Flowers for Algernon*, and in so doing, offers two alternative metaphors for the curative journey. The first is the plateau or medical model which begins in health, declines into illness and subsequently seeks to restore health to the ill individual. The second, parabolic metaphor begins in illness, rises out of that state but, eventually, regresses into ill-health again. This metaphor is akin to the inverted U-curve. As the novel’s protagonist, Charlie Gordon is the first human to undergo experimental surgery to ameliorate his mental retardation by raising his intelligence to a level approximating normality at least. The experiment has been carried out successfully on laboratory mice, including one named Algernon. Charlie’s progress through the experiment and its consequences is charted through a series of progress reports he writes. The language of the reports themselves epitomises his progress whilst providing an account of what transpires in Algernon’s case. Promise, threat and the trauma of failure, characterised by the ascent, apogee and descent of the parabolic metaphor, provide a tripartite structure for the article.

Formerly, when religion was strong and science weak, men mistook magic for medicine; now, when science is strong and religion weak, men mistake medicine for magic. Szasz (1974:128)

**Introduction**

This article draws on sociologist Arthur Frank’s (1997) notion of the *The wounded storyteller: Body, illness, and ethics* as a basis for exploring promise, threat and the trauma of failure in Daniel Keyes’s *Flowers for Algernon*. In addition, two metaphorical models for the curative journey are presented. The first, the curative journey’s normal shape, may be termed the plateau model: It begins in a stable state of health (a plateau) which is then disrupted by illness, leading the individual to an unstable descent into the valley of sickness and debilitation (possibly even into the valley of the shadow of death) before medical interventions produce a series of progressive ascents out of the valley to ever-higher plateaux of recuperation, until arrival at the plateau of full recovery restores him or her to a stable state of health.

Through medical interventions, the patient’s existing illness and prognosis are bettered. At each stage, the individual is lifted to a point of optimal or, at least, improved functioning before levelling out at a point where the improvement can be maintained until the subsequent ascent to the next plateau of improvement occurs. Progress is steady, if slow, even arduous at times. This journey presumes that any side effects of the interventions or treatments are unlikely to result in any major regression. It is a journey of promise fulfilled, a journey beset with only minor threats and, consequently, devoid of the trauma of serious failure. It offers redemption from a situation of illness, and might even appear to manifest aspects of the miraculous or the magical.

This model characterises the so-called medical model:

a general label for any approach to psychiatry and clinical psychology [6] based on the assumption that abnormalities and disorders are produced by specific causes and that cure is only possible by removing the root cause. The analogy with the medical approach to somatic diseases is obvious. (Reber & Reber 2001:421)

The second model for the curative journey is the more dramatic parabola: ‘scientists call this the inverted U-curve “where” too little is harmful, so is too much; in the middle is just right’ (Ghaemi 2012:55). The relevance of this model is particularly apt in Charlie’s case, where too little intelligence is as harmful, at least societally, as too much. However, as we shall see, ‘the middle’, the peak of the curve, may well constitute what is ‘just right’. It is, however, an impermanent place. It is the alternative plateau model that offers an ascent followed by some sense of permanence and stability.

The parabolic journey is a tripartite one, beginning with illness (rather than the plateau’s starting point of health) which is followed by a meteoric ascent from the depths of illness. Such rapid improvement may create a delusional promise of permanence, thus removing the sense of threat inherent in arrival at the acme of ‘cure’. But the momentum of the initial medical interventions may allow little more than a temporary pause at the top. In that parabola, the steepness of the ascent is matched by an equally steep and hazardous descent which returns the patient to the original condition or possibly even lower. The euphoria of early success is counterpoised with the dysphoria of ensuing failure. It is in this third stage that the patient (and the medical staff) is confronted with the trauma of failure and its consequences.

The wounded storyteller

‘In the beginning is an interruption’ (Frank 1997:56). The interruption engenders disarray in individuals’ lives: in their daily routines, their careers, even their life expectancy. Whilst the Gospel according to St John (1:1) states that ‘In the beginning was the Word’, in this instance, the words come shortly after the initial intrusion. They convey the multilayered message of the medical model, which encompasses diagnosis, avenues of possible treatment and the promise of restoring the body or, at least, of making it functional in another way. Simultaneously with the promise comes the caution, the warning that treatment also contains dangers of various kinds with no guarantees. Inherent in such qualifications and reservations is the threat of failure, leaving the patient to confront the possibility of the accompanying trauma. This trauma compounds the initial failure of the body, together with the shock of perhaps having to rethink the remainder of the life journey in a transformed version of the same body, a journey for which the planning, the map and the route that seemed so assured before the intrusion, now or in extremis [in extremity], may now no longer seem even plausible.

Measured against prevailing societal norms, normality implies psychosomatic completeness or integration as a human being, whilst abnormality often suggests a mental and/or physical shortcoming, a deficiency, incompleteness, a less-than-acceptable state of being human in society. As Frank (1997:172) notes: ‘Illness has always threatened the intactness of mind and body.’

The absence of psychosomatic integration, as in Charlie Gordon’s retardation, renders the individual a social outsider. Yet, even with psychosomatic integrity, as Fischer (2008) suggests:

- Human imperfection is not a mistake, it is normal. Character is fate. The disasters that befell us are the disasters we need in order to advance the plot of the story we are living. (p. 85)

A little later, he continues:

- No matter where we are in life, disaster is always possible. This ought to make us humble, and at bottom, quiet and ready for the next turn of the narrative, whatever it may be. One of disaster’s most disastrous features is that it always surprises us. (p. 86)

In Fischer’s argument, one’s life narrative does not lie entirely within one’s control; some of the bodily failures awaiting us constitute the very interruptions Frank mentions earlier.

Because abnormal behaviour – any behaviour deviating from established or accepted norms – is deemed undesirable within society, primarily because it taints society’s fantasy of its own wholeness (absence of illness) and goodness (presence of wellness), society seeks either to remove such individuals through institutional incarceration, or to rectify their condition through medical procedures of some sort, whether surgically or, more recently, psycho-pharmacologically. Indeed, as Frank observes: ‘At the core of these expectations [of medicine] is the assumption of restitution: returning the sick person to the status quo ante’ so that ‘medicine’s hope of restitution crowds out other stories’ because, ultimately, ‘the restitution story … is the culturally preferred narrative’ (Frank 1997:83), not least because it fulfills the societal fantasy. The restitution narrative is the embodiment of the plateau model.

The wounded storyteller evokes the whole gamut of trauma, not only in its original sense of physical impairment but also in terms of the social stigmatisation of abnormality. It also evokes the individual’s personal psychological and/or physiological distress and damage engendered by the illness.
itself and its consequences, to say nothing of the trauma inflicted by the failure or incomplete success of the medical intervention itself. The trauma of the intervention’s failure compounds the initial trauma of illness. Thus, the parabolic model’s tripartite process embraces promise, threat and the trauma of failure.

**The ascent – The promise**

One of our most difficult duties as human beings is to listen to the voices of those who suffer. The voices of the ill are easy to ignore, because these voices are often faltering in tone and mixed in message. (Frank 1997:250)

It may also be true that the stories are difficult to hear because of what they tell us about ourselves and about our interactions with the ill.

Charlie Gordon, the protagonist in Daniel Keyes’s novel, *Flowers for Algernon*, is selected to undergo the first experimental surgical procedure on a human being that embodies the promise of curing his mild mental retardation by raising his intellectual level at least to normality, and perhaps even above it. At the same time, the operation offers him the potential of redeeming his drab, servile existence working in Donner’s bakery and the real possibility of entering the world of societal normality.

The surgery has already proved successful on laboratory mice, particularly on Algernon. Indeed, it is the success the team has had with Algernon that encourages them to seek out their first human subject. As Charlie’s precursor, Algernon’s progress delineates the itinerary for Charlie’s own journey. As Charlie’s intellectual abilities burgeon, he comes to understand more and more about Algernon’s behaviour and consequently, is able to foretell his own future.

Keyes’s novel takes the form of seventeen first-person progress reports written by Charlie Gordon, beginning on 03 March and ending on 07 November of the same year. The very language of these reports charts Charlie’s mental development. Beginning with the inimitable but notoriously non-standard English of the initial reports – much of it approximating phonetic sounds – the language becomes increasingly competent and sophisticated, its subject matter concomitantly complex, as his intellectual growth reaches and then supersedes levels of normality. His initial below-average intelligence quotient (IQ) of 70 rises to an abnormally high level of 185: too little becomes too much. Both IQ levels present social and family problems for Charlie.

The experiment is not without its dangers, as Charlie recounts, in ‘progris riport 5’:

> [Prof Nemur] said Charlie we werked on this for a long time but only on animils like Algernon. We are sure thers no fisical danger for you but there are others things we cant tell until we try it. I want you to understand this mite false and even then nothing would happen. Or it mite even succeed temporary and leave you worse of than you are now. … then Dr Strauss said Charlie even if this fales your making a grate contribyushun to sience. This experiment has been successful on lots of animils but its never bin tride on a human being. You will be the first. (Keyes 1989:8)

Here, Professor Nemur explains that the mice’s medico-experimental journey (exemplified by Algernon’s progress) has followed the plateau model thus far, but he warns Charlie that his journey might be parabolic, leaving him worse off than prior to the experiment. From the outset then, the two models of healing are posited as mutually exclusive and therefore inherently conflictual. At the same time, we catch Doctor Strauss remarking that positive scientific outcomes will eventuate from the experiment, even if it fails in Charlie’s particular case. It is significant to note Nemur’s approach – what one might call ‘scientific objectivity’ – when he tells Charlie that, should the surgery fail, ‘even then nothing would happen.’ Of course, Nemur’s concerns are predominantly selfish, for the preservation of his own position and integrity as a scientist and for securing ongoing research funding. As Frank (1997) reminds us:

> The ideological work of medicine is to get the patient to accept this diagnostic identity as appropriate and moral. When the patient accepts this identity, he aligns himself as subordinate in a power relation. (p. 66)

In Charlie’s case, the power relationship is easily managed initially, primarily because of his intellectual inferiority combined with his eagerness to please the scientists: ‘After the operashun Im gonna try to be smart. Im gonna try awful hard’ (p. 8).

But the uncertainty of the outcomes is not the only danger inherent in the experiment:

> People are also threatened by institutions ostensibly designed to help them. Becoming a victim of medicine is a recurring theme in illness stories. The incompetence of the individual physician is sometimes an issue, but more often physicians are understood as fronting a bureaucratic administrative system that colonises the body by making it into its ‘case’. People feel victimised when decisions about them are made by strangers. The sick role is no longer understood as a release from normal obligations; instead it becomes a vulnerability to extended institutional colonization. (Frank 1997)

The colonisation process is one way in which the post-operative procedures continue to interrupt the individual’s attempts to recuperate and rebuild an orderly, if distinctly other, life.

Although failure may benefit science as much as success – Strauss and Nemur have placed themselves in a win-win situation strategically as researchers, regardless of the experiment’s outcome – it may do no more for Charlie than accelerate his regression. Herein lies the ambivalence of both promise and threat inherent in surgery and its consequences. As Frank (1997:171–172) explains: ‘Postmodern ill people ... live simultaneously with both the threat of disintegration...”

2. All subsequent references to the novel will contain page numbers only.
and the promise of reintegration.’ Thus, they also have to face a future beset with the uncertainties of both the promise and the threat inherent in such a paradoxical situation.

Because the medical procedures in the novel are experimental, their immediate and eventual outcomes are unpredictable and tentative at best. These outcomes constitute the threat of not achieving and sustaining the idealistic aspirations of the patient and the doctor-scientists; of having to acknowledge the possibility of not arriving at the plateau, with its stability and security; and of not achieving any level of prognostic certainty. The plateau model embodies no fall, no regression, only beneficent progress. Conversely, the very nature and shape of the parabolic journey encompasses the idea of failure and fall, not least because of the prototypical nature of the procedures and their unforeseeable outcomes in Charlie’s case.

As Charlie’s experimental precursor, Algernon maps Charlie’s own journey, serving as the harbinger of what will befall Charlie, hence Charlie’s intense interest in Algernon’s progress. At first, Algernon is Charlie’s more competent rival in negotiating the challenge of the mazes. At the same time, as Charlie’s intelligence develops exponentially, he comes to perceive himself as just another experimental laboratory animal, thus identifying with Algernon. From rivals, they become allies of victimisation. To enter into the realm of medicine or, more specifically, of experimental surgery as a patient is to put oneself in a subordinate position: ‘Becoming a victim of medicine is a recurring theme in illness stories’ (Frank 1997:172). Part of the process of victimisation resides in the disruptive nature of diagnosis and what follows: ‘Disease interrupts a life, and illness then means living with perpetual interruption’ (Frank 1997:57). The same may be said of medical interventions, such as surgery, and the subsequent persistent monitoring of the patient’s progress. These interruptions have a profound impact on the individual’s sense of time; it ceases to be ‘a smooth continuum’ that is ‘a neat, even, neutral, constant container for our experiences’ (Fischer 2008:94).

Once Charlie’s life has been interrupted by the possibility and the execution of the operation, it loses its mundane regularity. He is fired from his job at Donner’s (p. 72) because of this intellectual growth and the threat it now represents to the other bakery workers. However, the Wellberg Foundation undertakes to pay Charlie a salary so he needs no other work and can become the laboratory’s main experimental specimen, subjected to numerous ongoing tests of his flowering intellectual abilities, much like Algernon before him. In becoming their financial dependent, Charlie is colonised by the Foundation, too.

The apogee – The threat

In trying to help Charlie understand the rapid changes that are happening to him, Alice Kinnian explains:

Don’t forget you’re accomplishing in weeks what takes others a lifetime. You’re a giant sponge soaking in knowledge. Soon you’ll be able to connect things up, and you’ll see how all the different worlds of learning are related. All levels, Charlie, are like steps on a giant ladder. And you’ll climb higher and higher to see more and more of the world around you. (pp. 55–56)

What Alice cannot foresee at this time is that, as Charlie climbs ‘higher and higher’ and becomes more acquainted with the world, he is destined to become increasingly disillusioned with what he learns, not least about the scientists conducting the experiment.

When Alice expresses the hope that Charlie won’t get hurt in this experiment, he replies rather smugly:

Why should I get hurt? I couldn’t be any worse off than I was before. Even Algernon is still smart, isn’t he? As long as he’s up there I’m in good shape. […] And besides … I overheard something – Professor Nemur and Dr. Strauss were arguing, and Nemur said he’s positive nothing can go wrong. (p. 56)

Charlie is persuaded here not only by Nemur’s hubris but also by the scientist’s conviction that the experiment will follow the plateau model. But the presumption – that the plateau model is appropriate for understanding Charlie’s case – constitutes one of Nemur’s major errors of judgement, primarily because, at the outset of the experiment, Charlie is not on a plateau of normal health, as Nemur himself acknowledges, but at the nadir of mental retardation; hence the pertinence of the parabola model and the irrelevance of the plateau model. However, because Charlie does not know enough about the regression integral to the parabolic model as yet, he can believe with certainty that he cannot be worse off than he was before. Of course, his observation about Algernon – ‘As long as he’s up there I’m in good shape’ (p. 56) – not only links the two of them inextricably, but is also somberly ironic in the light of what happens subsequently. Charlie’s observation is also embedded in the parabolic model: the ascent in getting ‘up there’ and the temporariness of its precarious zenith in the words ‘as long as’.

If there is smugness in Charlie’s assertion, Nemur’s confidence when he addresses the June convention in Chicago is tantamount to delusion. Indeed, his conviction that the experiment can already be declared a success puts his hubris on professional academic display. After being announced ‘as the author of a brilliant experiment’ (p. 113), he summarises the project for the audience:

We who have worked on this project at Beekman University have the satisfaction of knowing we have taken one of nature’s mistakes and by our new techniques created a superior human being. When Charlie came to us he was outside of society, alone in a great city without friends or relatives to care about him, without the mental equipment to live a normal life. No past, no contact with the present, no hope for the future. It might be said that Charlie Gordon did not really exist before this experiment … (p. 113)

The grandiosity and crassness of Nemur’s assertion (made in front of Charlie himself) that, at the outset of the experiment,
Charlie was ‘one of nature’s mistakes’, a perception shared by Rose, his mother.

When Charlie goes to visit his sister, Norma, and his mother for the last time before he moves to Warren, he discovers Rose has become senile. Norma says: ‘Dr. Portman wants me to put her into a nursing home, but I can’t do it. I can’t stand to think of her in one of the institutions’ (p. 189). Ironically, it is precisely to one of those institutions that Charlie will be heading as he regresses to his status quo ante – or worse.

After reminiscing for a while, Charlie wishes to leave, but Norma tries to prevent him. Rose misreads Charlie’s action of holding Norma off:

What are you doing to her? Get away from her! I told you what I’d do to you if I ever caught you touching your sister again!

Dirty mind! You don’t belong with normal people! (p. 193)

Unaware of Charlie’s extraordinary journey, Rose cannot know the multiple ironies of her last six words. Charlie’s intellectual growth has taken him from the naivety and simplicity of his life with an IQ of 70 (where normal people do not belong) to the super intelligence of a 185 IQ (where normal people do not belong either). It is this outburst that allows Norma to understand for the first time why Charlie had been sent away from the family all those years ago (p. 193).

Rose’s lewd but ill-informed mind also presumes that her son’s retardation made him a sexual threat to his younger sister, thus justifying the brutal treatment she doled out. She has no idea about the damage she causes her son when she screams. ‘Dirty mind! You don’t belong with normal people!’ (p. 193)

His mother straining forward to lash at him. […] ‘Look at him!’ Rose screams. ‘He can’t learn to read and write, but he knows enough to look at a girl that way. I’ll beat the filth out of his mind. (p. 79)

The ghost of Frankenstein and his monster falls long, not only over Rose’s perception of Charlie’s abnormality but also over Nemur and Charlie at the convention, especially when Nemur claims that ‘Charlie Gordon did not really exist before this experiment’ (p. 113). At a pivotal point, Charlie notes that:

everyone was talking about me as if I were some kind of newly created thing they were presenting to the scientific world. No one in this room considered me an individual – a human being. The constant juxtaposition of ‘Algernon and Charlie’, and ‘Charlie and Algernon’, made it clear that they thought of both of us as a couple of experimental animals who had no existence outside the laboratory. (p. 113)

Nemur remains unabashed about his monstrous claims emanating from his own quasi-god-like role in having created ‘a superior human being’. The obvious resonances of Nietzsche’s übermenschlichkeit [a kind of super humanity manifesting extraordinary powers or abilities] cannot be missed in Nemur’s language as he revels in his role as the omnipotent creator of the miraculous. But Charlie does not share Nemur’s assessment of the experiment: ‘How can I make him [Nemur] understand that he did not make me?’ (p. 102).

However, contra Aristotle, it is not only the great and mighty that are susceptible to the perils of hamartia and the fall that follows. As Norman Fischer (2008) observes (albeit in another context):

The pleasures of the god realm hide the fact that a fall is inevitable, that sooner or later a god tumble out of heaven only to land in a place that, by contrast, seems more terrible than it actually is, a place where he or she will have very little coping skill. (p. 89)

Astutely, Charlie observes that, for Nemur, his landing field will be where he will no longer have credibility as a scientist or access to the funding to continue his life’s work:

It’s paradoxical that an ordinary man like Nemur presumes to devote himself to making other people geniuses. He would like to be thought of as the discoverer of new laws of learning – the Einstein of psychology. And he has the teacher’s fear of being surpassed by the student, the master’s dread of having the disciple discredit his work. […] I guess Nemur’s fear of being revealed as a man walking on stilts among giants is understandable. Failure at this point would destroy him. He is too old to start all over again. (p. 108)

Unfortunately, the cathedral of his childhood does not offer him refuge, compassion, or salvation. Instead, Charlie suffers the pain of ‘frightening memories’ (p. 118) of a childhood brutalised by a mother devastated by his mental retardation.

Writing of himself in the third person, he recalls:

Now he had a clear picture of Charlie’s mother, screaming at him, holding a leather belt in her hand, and his father trying to hold her back. ‘Enough, Rose! You’ll kill him! Leave him alone!’

The image of ‘a man walking on stilts among giants’ offers a caricature of the well-known aphorism about the dwarf standing on the shoulders of a giant being able to see further than the giant himself. Nemur’s stature ‘among giants’ is spurious; he is a mere man trying to find a place amongst the giants dishonestly by wearing stilts to provide him with a stature that is not legitimately his. That still walkers are usually found at fairs or in the circus offers a scathing comment on both Nemur’s aspirations and ambitions and
the academic or medical enterprise. A second critique of this enterprise is that Nemur’s accomplishment, as perceived by his peers, may be the result of their all being still walkers, none wishing to acknowledge their mere mortality and thus demean the mystique of medicine.

At the Chicago convention, Nemur’s self-congratulatory tone reaches its climax in his proclamation of the promise fulfilled:

In one sense, he [Charlie] was the result of modern psychological experimentation. In place of a free-thinking, a burden on society that must bear his irresponsible behaviour, we have a man of dignity and sensitivity, ready to take his place as a contributing member of society. (p. 114)

Nemur’s presumption that Charlie can ‘take his place as a contributing member of society’ is based on outcomes inherent in the plateau metaphor, that Charlie has reached a stable plateau of improved mental functioning. As we have already seen, Nemur takes no cognisance of the possibility that he has chosen the wrong metaphor. However, for him to consider the parabola as an alternative metaphor would be to admit the possibility of regression and failure, factors that would countermand his own inflated ego’s needs.

In pursuit of his own independent research to understand what is happening to himself and Algernon, Charlie comes to realise that research is nothing more than ‘money, time, and energy squandered on the detailed analysis of the trivial’ (pp. 109–110). Noting his own aversion to Nemur’s perceptions of the experiment and himself as its subject, Charlie writes:

I wanted to get up and show everyone what a fool he was, to shout at him: I’m a human being, a person — with parents and memories and a history — and I was before you ever wheeled me into that operating room! (p. 113; italics original)

This is not the first time Charlie has rejected his role as a laboratory specimen. On May 10, he has the following exchange with Professor Nemur:

‘But I’m not an inanimate object’ I argued. ‘I’m a person.’

He [Nemur] looked confused for a moment and then laughed.

‘Of course, Charlie. But I wasn’t referring to now. I meant before the operation.’

Smug, pompous — I felt like hitting him too. ‘I was a person before the operation. In case you forgot —’

‘Yes, of course, Charlie. Don’t misunderstand me. But it was different …’ (p.63)

Charlie’s anger and frustration has been building up for some time, ever since his own intellectual superiority engenders his perception of Nemur and Strauss as mere mortals:

But still it’s frightening to realize that my fate is in the hands of men who are not the giants I once thought them to be, men who still don’t know all the answers. (p. 108)

By 06 June — four months into the experiment — Charlie, with or despite his newly-acquired, extraordinarily high IQ of 185 (p. 89), articulates his vision for his future: ‘I wanted to be in love with [Alice]. I wanted to overcome my emotional and sexual fears, to marry, have children, settle down’ (p. 89). It is a vision of singular normality, of an ordinariness at odds with his new IQ, a vision to be lived out on a stable plateau rather than at the precarious peak of a parabola.

The decline – The trauma of failure

In his eagerness for recognition, Nemur has evaded the possibility of the experiment’s ultimate failure:

Nemur’s conclusion had been premature. For both Algernon and myself, it would take more time to see if this change would stick. The professors had made a mistake, and no one else had caught it. I wanted to jump up and tell but I couldn’t move. Like Algernon, I found myself behind the mesh of a cage they had built around me. (p. 114)

Charlie has no way of knowing whether he has sufficient time to establish if ‘this change would stick.’

That uncertainty is reinforced in his 11 July progress report, in which Charlie records something he has learnt about Algernon from Burt:

As Algernon’s intelligence increased, his problem-solving speed increased — that much was obvious. But then Burt revealed one thing I had not known.

At the peak of his intelligence, Algernon’s performance had become variable. There were times, according to Burt’s report, when Algernon refused to work at all — even when apparently hungry — and other times he would solve the problem but, instead of taking his food reward, would hurl himself against the walls of his cage. (p. 111)

Charlie notes: ‘I realized immediately that this information had been withheld from me. I suspected the reason …’ (p. 112).

By 27 July, Charlie has discovered the reason. Algernon’s regression has worsened considerably: ‘Algernon lies in his dirt, unmoving, and the odors are stronger than ever before. And what about me?’ (p. 168). Reformulated, the question recurs: ‘Now what becomes of me?’ (p. 178). Charlie’s fate — what will transpire when time runs out — is inextricably linked with his growing concerns about the amount of time he has left and how he will be best be able to use it. The course of these eventualities is anticipated by what happens to Algernon.

In terms of the parabolic metaphor, the zenith is about to yield to the rapid descent. Charlie’s task is to chart Algernon’s behaviour so that he can challenge the experiment’s usefulness to humans. As we have seen, his determination to contribute something useful from the experiment is fuelled by his frustration and anger at discovering the scientists’ mere mortality and their inflated egos.

When Nemur’s hubris manifests itself, Charlie observes: ‘He [Nemur] had come to believe in the myth of his own authority’ (p. 180), despite the fact that his colleague, Doctor Strauss, had warned that it would be unwise to release the experimental results prematurely. Charlie himself had noted

this dissension between colleagues earlier: ‘And how foolish I was to have thought that professors were intellectual giants. They’re people – and afraid the rest of the world will find out’ (p. 69). He goes so far as to assert they are: ‘frauds – both of them [Nemur and Strauss]. They had pretended to be geniuses. But they were just ordinary men working blindly, pretending to be able to bring light into the darkness. Why is it that everyone lies?’ (p. 106).

Charlie discovers his own answer to that question with this cynical realisation: ‘The depressing thing is that so many of the ideas on which our psychologists base their beliefs about human intelligence, memory, and learning are all wishful thinking’ (p. 155).

Charlie’s disillusionment may be traced not only to his recently acquired intellectual stature and a concomitant criticism of science in general and psychology in particular, but also to his increasing awareness of what is happening to Algernon and, consequently, what is almost certain to happen to him. He suffers the devastation of unforeseen failure and inescapable regression as well as the trauma of knowing that his enormous intellectual abilities can do nothing to delay or prevent this happening. The uncertainty of its precise course aggravates the awareness of his fate.

The reality of the parabolic model’s regression and fall does not embody the fantasy of ‘cure’ (other than a temporary respite at the top), or the possibility of arriving at a stable non-regressive condition offered by the plateau metaphor. The trauma of failure becomes inevitable, as Charlie confronts the threat of returning to his former, and now irredeemable, retarded mental state.

Yet being wounded does not necessarily imply or result in an entirely negative or meaningless experiential outcome for the storyteller. For example, in Charlie’s case, his suffering brings about insights and awareness that are useful to others, as he fulfils the concomitant role of witness: ‘Becoming a witness assumes a responsibility for telling what happened. The witness offers testimony to a truth that is generally unacknowledged or suppressed’ (Frank 1997:137). As the patient-victim in the medico-scientific system, Charlie realises he must put his intellectual ability to its fullest use before it diminishes: ‘I don’t want anyone to suffer because of what happened to me’ (p. 180). With the imminence of his fall, his intellectual arrogance – ‘you’ve developed from a likeable, retarded young man into an arrogant, self-centered, antisocial bastard’ – Nemur tells him – has mellowed into a kind of altruism. In passing, we note that, in his biting criticism of Charlie, Nemur accepts no responsibility for the part he has played in Charlie’s development.

On 26 August, Charlie sends Nemur a copy of his research findings entitled The Algernon-Gordon effect: A study of the structure and functioning of increased intelligence. In the covering letter, Charlie explains: ‘The results are clear. The more sensational aspects of my rapid climb cannot obscure the facts. The surgery-and-injection techniques developed by you and Dr. Strauss must be viewed as having little or no practical applicability, at the present time, to the increase of human intelligence. (p. 179; italics original)

He goes on to state his hypothesis ‘most simply in the following terms: ARTIFICIALLY-INDUCED INTELLIGENCE DETERIORATES AT A RATE OF TIME DIRECTLY PROPORTIONAL TO THE QUANTITY OF THE INCREASE’ (p. 179; italics and small capital letters original). In a certain sense, Charlie’s report is a devastating indictment of the experiment’s failure as well as a powerful rebuttal of Nemur’s perceptions of Charlie as a sort of Frankensteinian creation or laboratory animal rather than a human being. After Nemur has reprimanded Charlie for his arrogance, he contends: ‘You know we’ve treated you well – done everything we could for you’ (p. 174) Charlie replies: ‘Everything but treat me as a human being. […] What you did for me – wonderful as it was – doesn’t give you the right to treat me like an experimental animal. I’m an individual now, and so was Charlie before he ever walked into that lab. (p. 174)

The need for recognition as more than an experimental animal, regardless of one’s mental level, is one of Charlie’s central predicaments. It reaches a climax when he goes to a diner one evening:

There was a new dishwasher, a boy about sixteen, and there was something familiar about him, his movements, the look in his eyes. And then, clearing away the table behind me, he dropped some dishes. (pp. 138-139)

The noise and clatter of the breaking crockery provokes ‘whistles and catcalls’ from the customers, which confuse him. Nonetheless, the owner of the diner does not mete out punishment but rather curt instructions to tidy up the mess: ‘A broom … a broom! You idiot! It’s in the kitchen. Sweep up all the pieces’ (p. 139). Charlie experiences a moment of déjà vu that calls to mind his days in Donner’s bakery:

I felt sick inside as I looked at his dull, vacuous smile – the wide, bright eyes of a child, uncertain but eager to please, and I realized what I had recognized in him. They were laughing at him because he was retarded. (p. 139)

Charlie is incensed by the crowd’s lack of empathy:

I jumped up and shouted: ‘Shut up! Leave him alone! He can’t understand. He can’t help what he is … but for God’s sake, have some respect! He’s a human being!’. (pp. 139-140; italics original)

This outburst expresses Charlie’s own need as much as it attacks the diner’s clientele.

In the same covering letter to Nemur, Charlie states: ‘I have checked and rechecked my data a dozen times in the hope of finding an error, but I am sorry to say the results must stand’ (p. 179; italics original). Checking and rechecking the data constitutes Charlie’s desperate yet futile effort to escape the fall, to prolong his precarious position at the parabolic zenith, thus sidestepping any acknowledgement of the experiment’s failure. But Charlie can find no error; the fall remains ineluctable, and he is obliged to acknowledge that ‘by all indications, my own mental deterioration will be quite rapid
Our dehumanising anonymity of those killed. It is an image that concentration camps and the idea of genocide as well as the eradication of any evidence of experimental failure. The incinerator symbolises Charlie unleashes a cynical riposte at Nemur: ‘At least it’s not the incinerator.’ (p. 154). The incinerator is something more than a laboratory specimen. Until Charlie’s surgery, Nemur had been experimenting with mice. To avoid a direct answer, he hedges his response in clichéd euphemisms about ‘the highest hopes of permanence’ and of there being ‘very little chance of doing you any serious harm’, of ‘a great chance of doing you some good’ (p. 153). Much of this vacuous talk reflects the scientist’s verbal sleights-of-hand, of using the plateau metaphor to fantasise about Charlie climbing out of the valley of his retardation and arriving at the plateau of long-term mental stability, when the real focus should be on the parabolic model, with its precarious and temporary pinnacle followed by the inevitable regressive plunge.

Concerned about his future, Charlie confronts Nemur about it:

‘I just got a look at your incinerator for disposing of experimental animals. What plans have been made for me?’

‘My question stunned him. ‘What do you mean?’

‘I’m sure that from the beginning you planned for all exigencies. So what happens to me?’ (p. 153)

Part of Nemur’s shock at Charlie’s question can be traced to the scientist’s failure to see Charlie as an individual, as something more than a laboratory specimen. Until Charlie’s surgery, Nemur had been experimenting with mice.

To avoid a direct answer, he hedges his response in clichéd euphemisms about ‘the highest hopes of permanence’ and of there being ‘very little chance of doing you any serious harm’, of ‘a great chance of doing you some good’ (p. 153). Much of this vacuous talk reflects the scientist’s verbal sleights-of-hand, of using the plateau metaphor to fantasise about Charlie climbing out of the valley of his retardation and arriving at the plateau of long-term mental stability, when the real focus should be on the parabolic model, with its precarious and temporary pinnacle followed by the inevitable regressive plunge.

Eventually, Nemur is obliged to acknowledge that, if the experiment fails, Charlie cannot be sent back to Donner’s bakery or that room where he came from because his post-operative experiences have had an impact on him: ‘possible emotional disturbances to complicate the retardation’ (p. 154). Further, the scientist explains, ‘there’s no way of knowing if you would go back to the same mental level. There might be regression to an even more primitive level functioning’ (p. 154). Charlie persists in trying to get a direct answer: ‘What plans have you made for me?’ Unable to dodge the question any longer, Nemur tells him: ‘The Foundation has arranged to send you to the Warren State Home and Training School.’ After expressing his anger at the possibility, Charlie unleashes a cynical riposte at Nemur: ‘At least it’s not the incinerator’ (p. 154). The incinerator symbolises the eradication of any evidence of experimental failure. At the same time, it resonates with the horrors of the Nazi concentration camps and the idea of genocide as well as the dehumanising anonymity of those killed. It is an image that tallies with Nemur’s hubris and his delusion of himself as creator and, by implication, destroyer.

Two days after this conversation with Nemur, Charlie visits the Warren State Home and Training School (p. 156): ‘Our patients usually come here to stay for the rest of their lives’, the head psychologist informs Charlie, who inevitably, begins to envisage his own future in the institution:

I tried to imagine what it would be like walking through these corridors as a patient. I visualised myself in the middle of a line of men and boys waiting to enter a classroom. Perhaps I’d be one of those pushing another boy in a wheelchair, or guiding someone else by the hand, or cuddling a smaller boy in my arms.

The image of his cuddling a smaller boy in his arms evokes his own deep-seated need for love and acceptance that generally went unacknowledged and unmet during his own childhood. Indeed, throughout the novel, the mature, intellectually developed Charlie is haunted by his own memories of childhood. Leaving his mother’s house after his final turbulent visit, he looks back and sees ‘the face of a boy, staring at me, his cheek pressed against the window pane’ (p. 195).

At Warren, Charlie also meets the ‘short, plump, motherly lady’ (p. 160) who is the school’s principal. She explains that ‘the sixty and seventy I.Q.’s’ are catered for in ‘the city schools in special classes, or else there are community facilities for caring for them’ (p. 161). For Charlie, with his original IQ of 70, this information is of particular interest. She continues:

Now, we classify our children (I call them all children, no matter what their ages are, they’re all children here). We classify them as tidy or untidy. It makes the administration of their cottages a lot easier if they can be kept at their own levels. Some of the untidies are severely brain-damaged cases, kept in cribs, and they will be cared for that way for the rest of their lives … (p. 161)

Charlie interrupts, suggesting a possible alternative: ‘Or until science finds a way to help them.’ The principal ‘smiled, explaining to me carefully, “I’m afraid these are beyond help.”’ Quick to respond, Charlie refutes her suggestion, saying ‘No one is beyond help.’ The principal peers at Charlie with uncertainty now. “Yes, yes, of course. You’re right. We must have hope.”’ Charlie’s science conflicts with her resignation. Charlie wonders if he goes to Warren: ‘Would I be tidy or not?’ (p. 161).

This passage has a twofold significance. Firstly, we note the principal’s language of infantilisation as she refers to the individuals in her care as ‘children, no matter what their ages are.’ Whilst this relationship suits her motherliness and its concomitant needs, it demeans those human beings in the institution’s care. Secondly, the passage finds Charlie, usually so critical of science and scientists, to say nothing of his concerns about the experiment’s impending failure, defending science’s possibilities for improving and maintaining retarded intelligence. Of course, the plateau is his implicit metaphor here, despite the actuality of Charlie’s having to confront the parabolic metaphor in his own life.
As Charlie drives away from the Warren State Home, he admits:

I didn’t know what to think. The feeling of cold grayness was everywhere around me – a sense of resignation. There had been no talk of rehabilitation, of cure, of someday sending these people out into the world again. No one had spoken of hope. The feeling was of living death – or worse, of never having been fully alive and knowing. Souls withered from the beginning, and doomed to stare into the time and space of every day.

I may soon be coming to Warren, to spend the rest of my life with the others … waiting. (p. 162)

In passing, one notes that, whilst the word, ‘warren’, means a place of shelter (for rabbits at least), it also implies the idea of subterranean burrowing, a sense of burying the living, of a ‘living death’, of keeping inhabitants safe but invisible from the world of normality.

Despite the inevitability of his descent, Charlie hopes desperately that he will not fall all the way down to his retarded state, and so avoid going to Warren. By 02 September, he acknowledges that ‘the only question now is: How much can I hang on to?’ (p. 180). A little over a month later, on 07 October, he pleads: ‘I’ve got to try to hold onto some of the things I’ve learned. Please, God, don’t take it all away’ (p. 204). When 16 November arrives, his reformulated wish has become rudimentary: ‘Please … please … don’t let me forget how to reed and rite’ (p. 215). The despondency in the deteriorating language of Charlie’s reports captures the devastating trauma of failure as the velocity of the near-vertical plummet from the parabolic zenith increases.

Yet even in his decline, Charlie is no less concerned about Algernon’s fate. Earlier in the novel, Burt and Charlie are ‘going through the lab section by section’, as Charlie tries to familiarize himself with ‘the total picture’ to support his research:

When we were all through I noticed one door we had not looked into.

‘What’s in there?’

‘The freezer and the incinerator.’ He [Burt] pushed open the heavy door and turned on the light. ‘We freeze our specimens before we dispose of them in the incinerator, it helps cut down the odors if we control decomposition.’ He turned to leave, but I stood for a moment.

‘Not Algernon,’ I said. ‘Look … if and … when … I mean I don’t want him dumped in there. Give him to me. I’ll take care of him myself.’ He didn’t laugh. He just nodded. Nemur told him that from now on I could have anything I wanted. (pp. 152–152)

The inevitability of what will happen to Algernon and Charlie is captured deftly in the subtle shift in Charlie’s diction from ‘if’ to ‘when’.

By 17 September, in his penultimate report, Charlie writes: ‘Algernon died two days ago’ (p. 181). At the end of the descent, death waits; it’s simply a matter of time. There is no recovery of the body or the mind; this is no restitution story.

Establishing the cause of the mouse’s death is crucial to an understanding of Charlie’s future:

Dissection shows that my predictions were right. Compared to the normal brain, Algernon’s had decreased in weight and there was a general smoothing out of the cerebral convolutions as well as a deepening and broadening of brain fissures. (p. 181)

(The deepening and broadening of brain fissures also characterises advanced Alzheimer’s disease; the brain shrinks noticeably, impacting on almost all its functions.) Charlie says:

it’s frightening to think that the same thing might be happening to me right now. Seeing it happen to Algernon makes it real. For the first time, I’m afraid of the future. (p. 181)

Charlie still phrases the thought of his own deterioration as a possibility rather than an inevitability, revealing a persistent desire for success, a rejection of failure, and a longing for an impossible permanence at the top of the parabola.

Once Charlie has come to appreciate the finality of Algernon’s death, and the impossibility of his own escape from it, he conducts a small and touching ritual for the mouse who has become his alter ego:

I put Algernon’s body into a small metal container and took him home with me. I wasn’t going to let them dump him into the incinerator. It’s foolish and sentimental, but late last night I buried him in the back yard. I wept as I put a bunch of wild flowers on the grave. (p. 181)

We note that the flowers are wild and natural rather than cultivated, a small reminder of the freedom that neither Algernon nor Charlie has enjoyed (except briefly when they escape from the Chicago convention), of a return to the earth that awaits all living things, of the persistence of the natural cycle, of an ultimate escape from the artificiality of the laboratory environment.

By 05 November, he reports that:

its getting chilly out but I still put flowers on Algernon’s grave. Mrs Mooney thinks Im silly to put flowers on a mouses grave but I told her that Algernon was a special mouse. (p. 213)

However, as Frank (1997:185) concludes: ‘Postmodern times may be pandemonium, but they are not a void. Illness stories provide glimpses of the perfection.’

Shortly before he visited Warren, Charlie wrote:

Although we know the end of the maze holds death (and it is something I have not always known – not long ago the adolescent in me thought death could happen only to other people), I see now that the path I choose through the maze makes me what I am. (p. 155)

Whilst Algernon was alive, his performances in the maze, especially arriving at the end, were rewarded with food, not death. However, the laboratory maze is only a microcosmic part of a macrocosmic life maze.

When Charlie contends he has made choices in entering and pursuing the maze’s path, he fails to acknowledge the part played by the scientists and their role in drawing
him into the experimental process in the first place. Just as Algernon was placed into an experimental maze by Nemur and Strauss, so too, was Charlie. Consequently, one has to ask if the irreversible and incomprehensible consequences of the surgery can be seen as matters of Charlie’s volition. His earlier plea of not forgetting how to ‘reed and rite’ is rejected: ‘know’ is diminished to ‘no’.

I dont no why Im dumb agen or what I did rong. Mabye its because I dint try hard enuf or just some body put the evel eye on me. But if I try and practise very hard maybe Ill get a little smarter and no what all the words are. (p. 218)

The idea that Charlie himself is ‘rong’, and may be culpable in some way for the experiment’s failure is a response engendered by the manner in which his mother treated him as a child.

Nevertheless, Charlie’s regression – manifest in his inimitable manner of writing – into Warren is complete yet not entirely futile and devoid of purpose or consolation:

Anyway I bet Im the frist persen in the world who found out some thing importent for sience. I did something but I dont remembir what. So I gess its like I did it for all the dumb pepul like me in Warren and all over the world. (p. 218)

Charlie may have helped the scientists benefit from the experiment, if only to the extent of understanding that they chose the wrong curative model on which to base their expectations, whilst Charlie himself has regressed to his mildly retarded status quo ante. The trauma of failure contains glimpses of the perfection that might have been but for the hubris of men.

And yet, whilst acknowledging his descent to his original mental level, Charlie continues to remember his travelling companion: ‘P.S. please if you get a chanse put some flowers on Algernons grave in the bak yard’ (p. 218). Algernon’s journey is complete; Charlie’s remains a matter of time. From now on, living in Warren, he will have to mourn and celebrate Algernon by proxy, relying on others to put flowers on the mouse’s grave whilst he tries to recollect exactly what that ‘some thing importent’ was that he and Algernon did for ‘sience’, but which, more importantly, benefited neither of them. Their reward was the trauma of failure and ultimately, the death that waits at the end of the maze where all the promises and possibilities began.

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References