

Interview with Eduardo Berti

Between April and December 2015 you spent several weeks as the guest of the palliative care unit of Rouen Hospital. With pain and death in such close proximity and emotions so raw, did you think you'd be able to write the way you did?

This book is the result of a series of surprises. When the 'Culture and Health' department at Rouen Hospital invited me to spend a few days there, everyone expected me to organize some writing workshops for young patients in the paediatrics department and to write a short text, five or ten pages, about my time with the palliative care unit. Initially, it was no more than that. But I soon realized that a brief text would be insufficient if I was to offer a real impression of how rich, intense and complex the experience was. Before I knew it, I'd filled up a couple of notebooks with notes and thoughts... I had been moved. Some of my notes were about my conversations with the medical staff. Others were more personal feelings and reflections. I ended up writing a book that I hadn't planned on writing; it arose spontaneously. The second surprise was that all my notes were in French. I had discovered a world that has its own private lexicon. I wrote down everything I'd seen and heard at the hospital in French so as not to lose the original effect and so I wouldn't get distracted by translation when I wanted to stay alert at all times. In the middle of my residency (which I asked to be extended of course) I realized how the book would be structured: a series of monologues in which each of the people who make up the medical unit (including the administrative staff) is given a voice. The next surprise was that when I tried to translate those voices into Spanish, I got stuck... So I continued writing in French. And I ended up

with a book written in French, a language I've lived in for several years and even used for a few brief texts (prose and poetry) but never for a whole book before.

It must have been impossible not to feel empathy for the people you met or to get involved in their lives in some way. Was it difficult for you to find enough emotional distance?

The other day, I read an interview in which Lévi-Strauss says that the work of an anthropologist includes moments of distance and moments of intimacy. I think that that applies to every human activity that involves significant interaction. And it's a good description of my experience. From the beginning I knew that I wanted to observe and tell the story of everyday life in a palliative care unit from the perspective of the healthcare staff: not the patients or their families. I made that choice for two reasons, I think. For one thing, in my own life I had already spent a lot of time as the relative of a patient enduring a similar experience. For another, it seemed to me that it was a rare privilege to get access to that other point of view, something that was only possible thanks to the enormous generosity with which I was welcomed at the hospital. I gave myself a set of rules, which included my being forbidden from entering a patient's room unless they had specifically invited me or given their permission... which happened several times. One patient, an avid reader, learned that there was a writer 'in residence' and wanted to meet me: we had a wonderful conversation. At first, of course, I tried to keep my distance and preserve my 'observational' role: staying in places where I was sure to be out of the way, where I could go unnoticed. Gradually, I made my discoveries. And just as gradually, bonds formed between myself and the staff. Complicity, trust,

confessions... So the distance, of course, kept changing. And that was good for me. In every way.

The book mixes fiction with reality, how did you settle on the tone and voice?

I wanted to work with orality. Oralities, plural. I suppose that writing in French helped me to be less 'literary', to use fewer stylistic flourishes. And I didn't want these voices to be overly dramatic either. It wasn't a tone that I had encountered in the personal or group conversations I had with the staff. Overall, I found them to be very committed and focused on their profession. People who take pride in their work. Who know that it will involve very tough moments but don't translate that into a discourse full of painful lows. I didn't want to lose sight of the fact that death and pain are something they see every day. As regards the balance between fiction and reality, I took quite a simple decision: to base my inventions in the facts of their professional lives. I didn't change anything that was related to their work, or its practice. In fact, I asked three people in the unit to read the book once it was finished and to let me know if they found anything that was medically inaccurate. Working from that foundation, I created, imagined and employed poetic license. And just as during my time at the hospital the degree of my 'distance' or 'presence' varied (as I said before), I also tried out different 'distances' or 'presences' with the fiction in each of the texts: from a couple in which I barely invented anything (only going so far as to combine or condense different real events in the voice of a single character) to texts that involved a lot more imagination.

There's plenty of space given over in the book to love, passion, literature, and music...

I'm very pleased to hear you say that. In fact, I think of *An Ideal Presence* as a book about life. The personal and professional lives of a series of people whose job involves a close, ever-present relationship with death. It's not easy, but it has the strange (or not so strange) benefit of intensifying one's awareness of being alive. It happened to me in the months I spent in Rouen. The 'residency' changed my perspective and the relative importance I assigned to things. I also wanted to share the moments of humour, passion and emotion that I was witnessing every day in the microcosms of the medical unit. I mean, not everything was dark pathos. Of course, death is always looming in a place like that. But the book seeks to portray a far more vast and complex network of feelings and situations. And I hope that comes out in the monologues: some have more of a narrative format, some are more reflective, some are 'lighter'. Some are about personal experiences, others discuss a colleague, patient, relative or even what the palliative care staff do when they leave the hospital: how much they want, or are able, to talk about their work, which can be very harrowing, with their friends and family.

It seems a very relevant book give the attention currently being paid to doctors and hospitals. Recent events must have brought up a lot of memories.

Yes. Everything that's happened in recent months has brought back a lot of those experiences very vividly. I've also heard of people reading and re-reading the book in the light of what's happened. And I believe that one good thing to come out of the pandemic is that a lot of people are beginning to re-evaluate the importance of healthcare workers.

If you had to highlight one image or moment from your experience, what would it be?

There's a passage in the book that describes a life lesson given to me by one of the nurses in the unit. She asked me one afternoon how my residency at the hospital was going. I answered that it was going well but I was still trying to find the 'ideal distance' for my work. With a smile, she said that she understood me perfectly. Then she added: 'I spent years striving to achieve the ideal distance for this job until I eventually realized that what I needed to find was the ideal presence.'