
David Callahan’s full-length study of Australian expatriate Janette Turner Hospital’s prize-winning fiction, titled *Rainforest Narratives*, is the first of its kind. As such, it is long overdue and serves Australian literary heritage well. Turner Hospital is a prolific author with nine novels and three volumes of short stories to her credit and Callahan moves with dexterity through each publication in turn.

Those familiar with Turner Hospital and her work will be aware that her writing explores the human conflicts, contradictions and connections of social interaction across a wide range of geographical borders. Much like the author herself, Turner Hospital’s characters consistently exemplify cultural dislocation and the difficulty of defining the self within a single location under today’s globalised conditions. Whether they are set in India, Canada or Australia, the stories examine matters of alienation, estrangement and loss, each of which are of particular relevance to those who are aware of the imperfect nature of their ‘old’ country but still have no real sense of belonging in their ‘new’ one. Such matters are representative of the survival of memory—how the past imposes itself in the present in a way that speaks of the longing that comes from lost attachments and the power this has to make us suffer. As Callahan notes, this topic is repeatedly addressed in Turner Hospital’s writing. It is also possible, he suggests, to hear a catch in the authorial voice whenever that topic arises (119).

As Callahan has it, much of Turner Hospital’s fictional world concerns itself with inequality and injustice in the realm of human affairs and in particular with the role of woman as the property of man, a theme which attests to the feminist impulse in her writing. Readers from all walks of life who have an interest in such issues will find in Turner Hospital’s writing a rich source of insightful commentary and cross-cultural critique of contemporary power structures. Unlike her male characters, Turner Hospital’s women are often punished for rebelling against or stepping outside a male dominated system to challenge the rational behind the meaning of ‘male firstness’ for which there is no socio-historical agreement between the sexes. Educated and uneducated voices abound in the pages of her fiction with the latter being given as much authority and respect as the former. This implies an anti-intellectual streak which is borne out by Turner Hospital’s tendency to represent figures of authority, usually male, as untrustworthy. Her narrators are often female and not only play a part in the different tales but are also concerned with ‘telling the story aright’ (77). Turner Hospital takes a self-interrogating approach to the art of writing to demonstrate the ‘slipping nature of narrative authority’ (98). Her aim seems to be to show that, in image-saturated postmodern life, there is virtually no unmediated social experience and thus it impossible to know which stories should be believed or can be validated (160, 282).

Many of Turner Hospital’s female characters inhabit an underworld of a kind: prostitutes, homeless, drug addicts and the like who frequent the dark, seamy side of life. They are often oppressed, damaged, downtrodden or disenfranchised individuals who come from the wrong side of the tracks and pay the price for challenging the veracity of a script written for them by
the socially privileged. In Callahan’s view, working through her characters, Turner Hospital valorises the socially disadvantaged in a way that suggest an artistic sense of ‘responsibility to be responsive to the needs of others’ (95). Her work is full of ‘disappeared’ characters—those who have been punished or removed from society for taking a stance against official bodies or individuals who perpetuate and justify the use of violence. Her last three novels, Oyster (1996), Due Preparations for the Plague (2003) and Orpheus Lost (2007) are a continuation of her career-long fascination with the willingness of the strong to dominate the weak. This emphasis seems to suggest a belief in the responsibility of artists to question the social structures and conventions that maintain inequitable power relations and to make audible the voices of those who have been silenced (191, 196).

Callahan recognises that Turner Hospital’s country of birth is the most evocative social space in her body of work and that it’s no accident a number of her female characters feel most at home in the rainforests of Queensland. He also notes, however, that her early writing was given scant attention from academic critics within Australia. It may well be that Turner Hospital’s scathing comments regarding Australian society as well as its institutions of authority (including academia) both in her fiction and in interview—what Callahan refers to as her ‘feistiness’—can explain why this was so despite her willingness to address internationally contentious or discomforting issues. Callahan opines that Turner Hospital’s second novel, The Tiger in the Tiger Pit (1983), was unjustly neglected in critical work as it may well have ‘fallen foul of the of geographical politics of writing’ (44) which expect authors to write about life in their homeland rather than elsewhere. Callahan goes on to note that Tiger addresses what he considers as ‘one of the most productive conundra in Turner Hospital’s work; a metafictionalist’s commitment to the multiplicity of reality in constant tension with the moralist’s need to combat the lies and self delusions that obscure the realities of power and violence’ (50). That conundra is clear in Tiger’s dedication to the idea that several versions of any story are needed in order to arrive at a semblance of ‘truth’ (a subject to which Turner Hospital returns again and again, most recently in Due Preparations for the Plague). Tiger’s focus on the interplay of ethics and memory within a dysfunctional, estranged family also seems to suggest that the novel may be read as a metaphor for Australia’s historical tendency to either forget or to revise the dark nature of the beginnings of white settlement. Such a reading may also explain the lack of critical attention it received in Australia compared to say, Canada and the United States of America.

For Callahan, the destabilisation of narrative certainty and linearity is a trademark of Turner Hospital’s writing. Her texts persistently play with the unreliable nature of language as well as with other artistic forms of expression such as painting and photography to examine the way society is or appears to be. In Turner Hospital’s fictional world, representation and reproduction go hand in hand with matters of survival. Her third novel, Borderline (1987), which Callahan sees as a major catalyst in establishing Turner Hospital as a significant writer (69), demonstrates how literary and non-literary texts have the power to create a semblance of reality that can outlast the subjects/objects of their representation. Borderline may be cross-referenced in narrative and theme with Charades (1988) and The Last Magician (1992). All three are concerned to show that no more or less than the symbolic representations in paintings or photographs, words provide no guarantee of the faithful reproduction of events, or the feelings and actions of those who experience them. The issue of perception and meaning is of consistent interest to Turner Hospital and is particularly relevant to her existential concerns: that is, her interest in notions of being and belonging in a world where the human need for the patterns and explanations that once provided certainty have disappeared with nothing of equal value or significance to replace them.
Callahan offers readers a balanced if somewhat restrained view of Turner Hospital’s fiction, which ‘restlessly shows us where she came from again and again in her work’ (243). The overall project is admirable, gives the complexities of Turner Hospital’s writing due recognition and is highly supportive of its messages. Perhaps as a result of the common motifs that run unflinchingly through Turner Hospital’s entire body of work, in the final analysis Rainforest Narratives tends to be rather repetitive. It also lends itself more to explanatory, empathetic engagement with the work than to a critical analysis of the individual publications. As an admirer of Turner Hospital’s writing, I am most appreciative of Callahan’s enterprise but would have liked to have found more interpretative and intellectual challenges within its pages. Whilst it is difficult to be certain, I have come to the conclusion that Callahan’s target readers are the students rather than the established critics of Australian literature. Supporting this view is the fact that the text includes long and detailed end notes, a clearly structured bibliography of works by and about Turner Hospital as well as a list of her uncollected fiction, all of which are extremely useful to students in particular. If this is so, then we must look to student-readers who as a consequence of Callahan’s text will be inspired to (re)visit, examine and comment on their terms on the writing of Janette Turner Hospital as a memorable and well-regarded figure of Australian literature.

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