The Modern Age, which sounds as if it would last forever, is fast becoming a thing of the past. (Charles Jencks 1986)

The architect and writer Charles Jencks (1984) claimed that the postmodern age began ‘on July 15 1972 at 3.32 pm (or thereabouts)’ with the dynamiting of a particularly notorious example of modern architecture. Other writers have been less precise, although the idea that the postmodern begins with the ending of the modern is fairly widespread. Certainly, the term ‘postmodern’ suggests that it comes after (post) what is modern, that it is the moment ‘when the avant-garde (the modern) can go no further’ (Eco 1984). But what, then, of the modern? The term has its origins in the Latin word modo, meaning ‘just now’. To be modern is to be in fashion, what the French refer to as à la mode, and therefore implies constant change: what is fashionable today is old-fashioned tomorrow, although fashions tend to come and go in cycles. The concept of the modern therefore relates to what is novel rather than to what is new.

Despite a growing literature on postmodernism in nursing and other healthcare disciplines, it continues to be dogged by mistrust, misunderstanding and outright hostility. Presenting the philosophy of postmodernism is a particularly difficult task, and most attempts fall into one of two traps: either the writer is a well-read and committed postmodernist in which case the writing tends to make too many assumptions about the background knowledge of the reader; or else the writer has only a passing knowledge of ‘popular’ postmodernism, in which case the writing often falls back on over-simplistic concepts which do not do justice to the issues and which are often completely misconceived.

The problem is further compounded by the difficulty of writing about one discourse (I am using the word in its postmodern sense—all such ‘jargon’ is explained in the paper) from within a different and potentially hostile one. For the postmodernists, rational debate with their modernist colleagues is all but impossible, since (as we shall see) the logic and language of the dominant discourse of modernism rules out and refuses to acknowledge that of postmodernism (and vice versa). Postmodern texts therefore rely less on rational argument than on persuasive narrative and a deliberate subversion of many of the usual practices of writing. This introduction to postmodernism for healthcare workers attempts to straddle the two discourses in both its form and its content, and offers a mixture of argument, example and speculation.

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The beginning

The Modern Age, which sounds as if it would last forever, is fast becoming a thing of the past. (Charles Jencks 1986)

The architect and writer Charles Jencks (1984) claimed that the postmodern age began ‘on July 15 1972 at 3.32 pm (or thereabouts)’ with the dynamiting of a particularly notorious example of modern architecture. Other writers have been less precise, although the idea that the postmodern begins with the ending of the modern is fairly widespread. Certainly, the term ‘postmodern’ suggests that it comes after (post) what is modern, that it is the moment ‘when the avant-garde (the modern) can go no further’ (Eco 1984). But what, then, of the modern? The term has its origins in the Latin word modo, meaning ‘just now’. To be modern is to be in fashion, what the French refer to as à la mode, and therefore implies constant change: what is fashionable today is old-fashioned tomorrow, although fashions tend to come and go in cycles. The concept of the modern therefore relates to what is novel rather than to what is new. We can see this in the field of healthcare with the current fashion for alternative therapies such as massage, reflexology and herbalism. These therapies are modern in the above sense of being fashionable; they are novel but they are certainly not new.

However, there are two difficulties with Eco’s definition of the postmodern as arising in the moment when the modern can go no further. Firstly, if we take modern to mean up-to-date or fashionable, then every age would regard itself as modern (in fact, the term has a recorded use as far back as the 5th century). But if the modern has
always been with us, then confusingly, so has the postmodern. As Eco continued, ‘we could say that every period has its own postmodern’, although that particular understanding of the term ‘postmodern’ is counter to its more usual meaning, and certainly does not fit with Jencks’ rather precise dating.

The second problem with regarding the postmodern as literally post modern, is that it suggests that ideas, movements, schools of art, and so on, become modern for a time before becoming post modern. However, in this sense, the term ‘postmodern’ is synonymous with old fashioned or with no longer being modern, and clashes with the more usually understood meaning of the term as being, rather confusingly, premodern or avant garde. Thus, as the French philosopher Jean François Lyotard pointed out, ‘A work can become modern only if it is first postmodern. Postmodernism thus understood is not modernism at its end but in the nascent state.’ (Lyotard 1992)

The notion of the postmodern as somehow following the modern is clearly nonsense, since what comes after the current fashion is the next fashion, or as Readings (1991) put it, ‘to say that the postmodern simply comes after the modern … is to say that it is the most recent modernism’. Because most of us are familiar with the term ‘modern’, it is not surprising that the postmodern is often (wrongly) considered to be related to it in this way. Most academics, however, prefer to see the postmodern in relation to the sociological constructs of modernism and modernity rather than the modern.

Modernism and modernity

When will modernism cease and what comes thereafter? (Ihab Hassan 1975)

The terms ‘modernism’ and ‘modernity’ are often used interchangeably, but refer to very different concepts, neither of which has anything to do with being modern. Modernity refers primarily to a particular epoch or period in time, which Jencks (1986) has dated from 1450 until 1960. However, it is often associated more specifically with the so-called Enlightenment project of the 18th century, which emphasized a belief in human progress towards some ideal state through rationality and the methods of science. In contrast, modernism is a particular stage of modernity, and is usually dated from around the end of the 19th century to the mid 20th century. Barry (1995), for example, used the term to describe the first half of the 20th century, and more specifically, as ‘that earthquake in the arts which brought down much of the structure of pre-20th century practice in music, painting, literature and architecture’.

Rather confusingly, the term ‘modernist’ is used by philosophers to describe the advocates of modernity and the Enlightenment project, and by artists to describe supporters of 20th century modernism. For the purposes of this paper, we are more interested in the former, and I shall therefore use the term ‘modernist’ to refer to someone who holds the philosophical beliefs of modernity in general, and of the Enlightenment project in particular.

In healthcare, we can see this modernist stance very clearly in the evidence based medicine (EBM) movement and the trend towards randomized controlled trials (RCTs) as the highest form of evidence. We can also clearly see the contrast between modern and modernism, with modernist researchers looking upon some modern therapies with scepticism. For example, complementary therapies such as herbalism might well currently form part of modern healthcare, but they are not modernist, since they are not products of rational science.

One of the main areas of contention between modernists and postmodernists is whether the age of modernity is at an end. We have seen that modernity entails the belief in inexorable progress, that the world is gradually improving, and that the rational application of science will ultimately resolve all human problems. Most modernists believe that we have yet to reach this ideal state, with Habermas (1981) referring to the ‘uncompleted project of modernity’. However, there is a growing feeling that we are almost there, at least in terms of social and political progress, a state which Fukuyama (1992) famously referred to as ‘the end of history’. Similarly, Horgan (1996) has argued that science is also reaching its natural limits, and that all the big scientific discoveries are now in the past.

The postmodernists are less concerned with whether we have actually reached this ‘ideal’ state than with whether it is, in fact, ideal. Lyotard, for example, has pointed out the
negative aspects of modernism, claiming that its logical consequences are state control, third-world poverty, and ultimately, nuclear annihilation, asserting that ‘Auschwitz’ can be taken as a paradigmatic name for the ‘tragic “incompletion” of modernity’ (Lyotard 1992). In contrast, Habermas (1981) has argued that ‘instead of giving up modernity and its project as a lost cause, we should learn from the mistakes of those extravagant programs which have tried to negate modernity’. The postmodern, or what is usually referred to as postmodernism, is therefore more often contrasted with modernity rather than with the modern.

Postmodernism

Postmodernity is modernity coming of age … looking at itself at a distance rather than from inside. (Zygmunt Bauman 1991)

There has been a great deal of confusion and misunderstanding over exactly what is meant by postmodernism, not least because different writers have used the term in very different ways. Indeed, some of its critics sense a conspiracy, such that ‘there seems to be an unwritten agreement among postmodernists that postmodernism should forever elude a consensus as to its definition’ (Simons & Billig 1994). We have already seen some of the problems associated with different interpretations of the ‘modernism’ aspect of postmodernism. Unfortunately, further confusion arises from the use of the prefix ‘post’. Thus, one interpretation of postmodernism is as an historical period that comes after (post) the age of modernism. Lyotard expressed this view as:

The ‘post-’ of ‘postmodern’ has a sense of a simple succession, a diachronic sequence of periods in which each one is clearly identifiable. The ‘post-’ indicates something like a conversion: a new direction from the previous one. (Lyotard 1992, p 90)

The difficulty with this simple definition is that, as many modernists have argued, the age of modernity is not yet complete; we have yet to reach the perfect state which the Enlightenment project promises, and so the postmodern age is still in the future. Furthermore, it is difficult to imagine what could possibly follow Fukuyama’s ‘end of history’, apart from a return to an earlier and less-perfect state.

However, Lyotard elsewhere refuted this meaning of postmodernism, and suggested instead that ‘Postmodern is not to be taken in a periodizing [that is, as initiating a new period of history] sense’ (Lyotard & Thébaud 1979), but rather as a philosophical critique of the modernist project. Thus:

Postmodernity is not a new age, it is the rewriting of some features modernity had tried or pretended to gain, particularly in founding its legitimation upon the purpose of the general emancipation of mankind [that is, on the Enlightenment project]. (Lyotard 1987, pp. 8–9)

Rather confusingly, postmodernism, on this reading, has a critical relationship to modernity rather than a temporal one; it is ‘in every respect parasitic on modernity; it lives and feeds on its achievements and on its dilemmas’ (Heller & Feher 1988). The ‘post’ (that which comes after) of ‘postmodernism’ is therefore misleading, and modernism and postmodernism can exist side-by-side at the same time, although their relationship is somewhat fraught. In fact, in his early work, Lyotard (1984) offered what is probably the most straightforward definition of postmodernism as a critique of modernism: ‘simplifying to the extreme, I define postmodern as incredulity toward metanarratives’.

Metanarratives

Postmodernism signals the death of such ‘metanarratives’ whose secretly terroristic function was to ground and legitimate the illusion of a ‘universal’ human history. (Terry Eagleton 1987)

A narrative, in the postmodern sense, is a story which explains the world from a particular perspective or point of view: thus, the Bible and modern physics both offer contrasting narratives about the creation of the world. A metanarrative not only describes and justifies a story about the world, but also about itself; as Lyotard (1992) put it, ‘by metanarratives … I mean precisely narratives with a legitimizing function’. Metanarratives do not require legitimation from outside of themselves: they are true precisely because they claim to be true. Christianity is
therefore a metanarrative because its basic tenets have to be accepted as an act of faith. There can be no proof that Christ is the son of God; it is the ‘bottom line’ which has to be accepted de facto, and on which the entire narrative of Christianity is based. Similarly, science is a metanarrative since it is based on certain presuppositions or metatheories about the world, the way it works, and the way that we can gain access to its workings, that are outside of the realm of proof. In fact, every discipline, whether art, science or religion, has a bottom line or set of foundational propositions which simply have to be accepted.

For modernists, certain metanarratives are more legitimate than others. The metanarrative of science carries more authority than the metanarrative of religion because it appears to offer a more coherent and pragmatic explanation of how the world works. However, we have seen that, for Lyotard and the postmodernists, all metanarratives, including the modernist metanarrative of science, should be regarded with incredulity. In the words of Jacques Derrida (1974), we live in a ‘decentred universe’ without recourse to a final and absolute authority. From the postmodern perspective, the only difference between modernism and all the other ‘isms’ such as Marxism, humanism, Catholicism, Buddhism, and so on, is that the latter are based on an unfounded or arational belief in history, human nature, God and Buddha, whereas modernism draws its authority, ironically, from an arational belief in rationality itself.

Authority

We should admit rather that power produces knowledge; that power and knowledge directly imply one another. (Michel Foucault 1977)

If, as the postmodernists claim, we live in a decentred universe with no firm foundations or higher authority, then how is it that some metanarratives appear to dominate over others? How is it, for example, that the randomized controlled trial (RCT) is taken as the ‘gold standard’ for healthcare research rather than, say, the phenomenological interview, the ethnographic participant observation, or even the introspective reflection of the healthcare practitioner? The modernists would claim that the RCT provides better or more accurate information on which to base healthcare decisions, whereas the postmodernists would point out that, in a decentred universe, there are no absolute standards against which to measure those claims. Judged according to its own scientific criteria, the RCT will always appear superior to the participant observation, but the postmodernists point out that there are no good reasons why we should judge research methods against the modernist scientific criteria of the RCT.

An alternative explanation for the authority of the RCT over other research methods lies in the relationship between knowledge and power, which, for the postmodernists, are two sides of the same coin. We can see this in the dual meanings of the concept of authority, which is associated both with being knowledgeable (to be in authority) and also with being powerful (to be in authority). Thus, those senior people who are in positions of power in the discipline of healthcare (or in postmodernist terms, those in control of the dominant discourse) also have the power to decide what is to count as knowledge (and hence, truth) for that discipline, and more importantly, what will not count as knowledge. As Foucault pointed out:

Each society has its own regime of truth, its ‘general politics’ of truth: that is, the types of discourse which it accepts and makes function as true; the mechanisms and instances which enable one to distinguish true and false statements, the means by which each is sanctified; the techniques and procedures accorded value in the acquisition of truth; the status of those who are charged with saying what counts as true. (Foucault 1980, p. 131)

Thus, being in authority carries with it the power to decide who is an authority.

Discourse

It is recognised that the conditions of truth, in other words the rules of the game of science, are immanent in that game. (Jean François Lyotard 1984)

Jenkins (1991) described a discourse as a set of rules or assumptions for organizing and
interpreting the subject matter of an academic discipline or field of study. A discourse, in this sense, is therefore similar to what Kuhn (1962) had earlier termed a paradigm, and what Wittgenstein (1953) referred to as a language game. Foucault (1974) went further by arguing that discourses do not merely describe reality, but ‘systematically form the objects of which they speak’. If this is the case, and our perception of the world is created by the discourse(s) through which we view it, then we must accept that what we consider to be true is, to some extent, socially constructed. It is important to understand that this does not necessarily entail a stance of out-and-out relativism. The postmodernist is not denying the existence of an objective reality, but merely pointing out that our attempts to discover and understand that reality are shaped by the discourse from within which we operate. As the American philosopher Richard Rorty observed (1989), there might well be a realm of absolute truth, but we have no objective way of knowing whether we have gained access to it. However:

To say that we should drop the idea of truth as out there waiting to be discovered is not to say that we have discovered that, out there, there is no truth. (Rorty 1989, p. 8)

The methods for deciding what is to count as truth are implicit in the discourse which we subscribe to, be it Catholicism or biomedical science. Thus, those who have the power to shape that discourse (those in authority, such as the Pope or the Secretary of State for Health) also have the power to decide not only the methods for arriving at the truth (the Bible as the direct word of God, or the RCT as the gold standard for research), but also to decide which groups of people within the discourse will be the designated holders, generators and disseminators of that knowledge (those who are an authority, such as Vatican officials and biomedical scientists). By placing RCTs at the top of the hierarchy of what counts as knowledge and experiential clinical judgements at the bottom, then power (in the form of academic credibility, access to research funding, influence over practice, and so on) is given to the scientific researcher and denied to the healthcare practitioner.

Deconstruction

The fall into the abyss of deconstruction inspires us with as much pleasure as fear. We are intoxicated with the prospect of never hitting the bottom. (Gayatri Spivak 1974)

From the postmodern perspective, then, power is denied to certain discourses by defining their knowledge as invalid. If the experiential knowledge held by practitioners is placed at the bottom of the hierarchy of healthcare evidence, then practitioners will have very little influence in shaping their own professional discourse. Furthermore, no amount of argument and debate will change the situation, since for postmodernists, each discourse is internally consistent but is incommensurate with all others, so that meaningful communication between advocates of different discourses is extremely difficult. Thus, Lyotard (1988) described a dispute within a particular discourse as a ‘litigation’ which can be settled according to the rules of that discourse. However, where disputes occur across the boundaries of two discourses such as between a biomedical scientist and a reflective practitioner, then a differend occurs, which is ‘a case of conflict between two parties that cannot be equitably resolved for lack of a rule applicable to both arguments’. The usual resolution of a differend is that the more powerful discourse asserts itself over the less powerful: in the above case, all experiential knowledge-claims by practitioners will be judged according to the criteria of the RCT and will inevitably be found lacking. There is little point in a practitioner attempting to offer evidence for clinical decisions from experience, since that experience will not be considered as legitimate knowledge in the eyes of those in authority. As Foucault (1977) claimed above, ‘power produces knowledge’.

Lyotard’s solution was simply to expose the dangerous and unhealthy relationship between power and knowledge, and to demonstrate how those who are in authority have the power to define who is seen as an authority. Derrida (1974) referred to this task as deconstruction, which aims to uncover the hidden meanings and intentions in a text, often by teasing out contradictions in seemingly innocuous marginalia, since it is in the digressions and
asides rather than in the well rehearsed key passages of the text that an author often gives away conflicting beliefs.

Deconstructive techniques are being employed more and more in the field of healthcare. Harper (1999), for example, has explored the use of deconstruction in mental health texts as a means of ‘challenging important oppositions implied within clinical categories: individual/social; reason/unreason; pathology/normality; form/content; pure categories/messiness; and professional/service user’. Used in this way, deconstruction can uncover and challenge the vested interests of the powerful by exposing the shaky, contradictory and ‘decentred’ foundations on which their knowledge-base is constructed, and thus break the bond between power and knowledge.

Textuality

The Enlightenment is dead, Marxism is dead, the working class movement is dead ... and the author does not feel very well either. (Neil Smith 1984)

Although deconstruction is a practice that is applied to texts, it is not restricted to the written word, since for Derrida (1974), ‘the concept of writing exceeds and comprehends that of language’. Derrida therefore took writing to refer not only to the inscription of words or symbols on a page, but also to cinematography, choreography, painting, music, sculpture, sport, politics, cybernetics, and life itself. Thus, a text (what is written) also takes on an extended form as a shorthand for all attempts at representation. Indeed, Derrida went so far as to proclaim that ‘there is nothing outside the text’ (Derrida 1974). To deconstruct a text, then, is to tease out the multiple and often contradictory meanings which are inherent in all representations of the world and, in particular, to highlight the power relationships that distort the generation and dissemination of knowledge.

Fox (1993) has demonstrated this extended use of deconstruction in his study of the hospital ward round. His study employed ethnographic material to explore the ways in which ward rounds are used by the consultant to exert power over junior staff and patients rather than to gather and disseminate knowledge. The ‘text’ which Fox is deconstructing is not written down, but is a complex series of actions circumscribed by unwritten rules, or what Foucault (1974) referred to as a ‘discursive practice’.

In their attempts to ‘read’ the world as if it was a text, the postmodernists were strongly influenced by the post-structuralist movement in literature. Indeed, writers such as Derrida and Foucault are often labelled as post-structuralists rather than as (or in addition to) postmodernists. One of the most influential post-structuralists was the literary critic Roland Barthes, who famously proclaimed the death of the author and the end of ‘the voice of a single person, the author “confiding” in us’ (Barthes 1977). For Barthes, the author holds no privileged position as the keeper of the ‘true’ meaning of a text, which is open to multiple interpretations by the readers. Thus:

Once the author is removed, the claim to decipher a text becomes quite futile. To give a text an Author is to impose a limit on that text, to furnish it with a final signified, to close the writing. (Barthes 1977, p. 147)

From the postmodern perspective, we can see close parallels between the author of a literary text and the author (that is, the voice of authority) of a discourse such as evidence based medicine. Once we realise that the notion of the author(ity) of a text is illusory, then we must accept that there are as many valid readings of that text as there are readers. Once we have killed the author(ity) of evidence based medicine as resting with the biomedical scientist and the RCT, then we are free to write our own version of it, to create our own discourse. As Jenkins pointed out:

…to be in control of your own discourse means that you have power over what you want [your discipline] to be rather than accepting what others say it is; this consequently empowers you, not them. (Jenkins 1991, p. 71)

We are each free to choose and if necessary, to create, our own discourse, although the postmodernist chooses ‘ironically’ in the full realization that her discourse is no more centred or grounded in reality than any other. The problem is that if rational debate between discourses is impossible, then how can the reflective practitioner convince the biomedical scientist (and vice versa) that she has something
important to say, without resorting to crude displays of power? For the postmodernist, the answer lies in writing, since it is through writing that they attempt to persuade others to adopt their discourse.

**Writing**

This page writes itself without help, it is the proof of the existence of gods. (Hélène Cixous 1998)

For the postmodernist, there are two forms of academic writing. Firstly, we write for others within the same discourse to settle what Lyotard referred to above as ‘litigations’. This form of writing conforms to the logic of the given discourse, as, for example, when the scientist debates some finer point of methodology or the reflective practitioner argues for one definition of reflection over another. Secondly, we sometimes write for readers from outside of our chosen discourse to attempt to settle what Lyotard called a differend. It will be recalled from earlier that differends occur when there are disputes across discourses which cannot be settled logically for lack of a commonly agreed set of principles. So, for example, a dispute between a biomedical scientist and a reflective practitioner about the value of introspection has no logical resolution that is acceptable to both parties; introspection is either judged unfavourably according to the logic of science, which will be unacceptable to the reflective practitioner, or else it is judged favourably according to the logic of reflective practice, which will be unacceptable to the scientist.

Clearly, the reflective practitioner cannot convince the scientist through the language and logic of reflective practice, since such language and logic will not be recognized by the latter. Rorty suggested that what is required:

…is to *redescribe* lots and lots of things in new ways, until you have created a pattern of linguistic behaviour which will tempt the rising generation to adopt it, thereby causing them to look for appropriate new forms of nonlinguistic behaviour … It says things like ‘try thinking of it this way’ — or more specifically, ‘try to ignore the apparently futile traditional questions by substituting the following new and possibly interesting questions. (Rorty 1989, p. 9; my emphasis)

Differends are not resolved through rational argument, but through persuasive rhetoric. The reflective practitioner will never convince the scientist of the value of introspection through reasoning; the only chance is to offer descriptions and examples, to show the scientist the world through a different lens.

This attempt by postmodern writers to present a different perspective on the world accounts for the rather unusual (some might say eccentric) form of much postmodern literature. Barthes’ book *The pleasure of the text* (Barthes 1975) is presented as a series of short passages in alphabetical rather than in a narrative sequence. Derrida’s work *The postcard* (Derrida 1987) presents a complex philosophical argument in the form of a series of postcards to an unnamed reader(s), and also takes as its subject matter a particular picture postcard depicting Plato and Socrates in the act of writing. This merging of form and content (a discussion of a postcard in the form of a series of postcards) is found in much postmodern writing, along with reflexivity (writing about writing) and deliberate ambiguity. Whereas some modernists might view ambiguous writing as willfully obscure or affected, postmodernists point out that, for them, the aim of writing is not necessarily to deliver the (dead) author’s message in as clear a way as possible (what Derrida disparagingly referred to as ‘logocentrism’), but to offer a platform from which multiple readings can be made. Barthes similarly distinguished between ‘readerly’ texts, which aim for clarity and contain a single meaning, and ‘writerly’ texts, which aim for obscurity and are open to deconstruction and multiple readings. Thus: ‘a readerly text is one I cannot rewrite; a writerly text is one I read with difficulty, unless I completely transform my reading regime’ (Barthes 1995, my emphasis). The aim of writerly texts is not to be willfully obscure, but to persuade the reader to transform her reading regime, that is, to view the world from a new perspective within the logic of a different discourse.

**Difference**

I prefer ‘both-and’ to ‘either-or’, ‘black and white and sometimes gray’ to ‘black or white’. (Robert Venturi 1966)
For the modernist, the primary aim of writing is to convey the single meaning of the text as the author intended it, whereas for the postmodernist, the aim is to stimulate multiple readings. This suggests that the main distinction between modernism and postmodernism is their attitudes towards difference. The modernist notion of progress is based on the belief that there is some preferred end towards which we should be striving in preference to all others, and difference is therefore something to be overcome. The modernist typically uses one of four strategies for dealing with difference. The first is to construct a hierarchy with the preferred option at the top: health is good, illness is bad; medicine is effective, herbalism is ineffective; the RCT is the gold standard of research, introspection is subjective and therefore inferior. The second strategy is to deny the very existence of difference: herbalism is not a viable alternative to medicine, and in any case, no one really takes it seriously. The third strategy is to attempt to reconcile difference: herbalism is actually very similar to modern medicine, and some of our most successful drugs are based on plant extracts. The final strategy, to which modernism ultimately aspires, is to destroy difference: herbal remedies are untested and so we must ban them from sale in the shops; introspection is not a valid research method and should not be funded; health is preferable to illness and so illness must be eradicated in the name of progress. The overriding aim of modernist medicine is therefore to wipe out all disease, and ultimately to overcome death itself.

In contrast, the postmodernist accepts difference as inevitable and ever-present, and one of the aims of deconstruction is to expose the contradictions in apparently unified texts. But difference is not just inevitable; it is also a creative force that results not in competition between seeming opposites, but in a multiplicity of complementary perspectives. As Barthes (1975) observed: ‘Difference is not what makes or sweetens conflict: it is achieved over and above conflict, it is beyond and alongside conflict’ (his emphasis). We have seen that one of the strategies employed by modernists to eliminate difference is to arrange discourses in a hierarchical relationship or in direct conflict with one another. Medicine is opposed to herbalism, the RCT is opposed to introspective reflection, health is opposed to illness. For the postmodernist, however, this modernist language of difference (what Wittgenstein would call a language game) actually determines our reality, and the only reason that we tend to see health and illness in opposition to one another is because of the way in which our language is structured. Philosophers refer to this as the principle of the excluded middle: thus, anyone who does not fit into the category of ‘healthy’ is, by definition, unhealthy; any research that does not fit into the category of ‘scientific’ is, by definition, unscientific.

But as Barthes pointed out above, difference does not necessarily entail conflict, and the aim of the postmodernist is to celebrate difference without forcing a choice between seemingly opposing discourses. The evidence-base for healthcare practice does not necessarily need to be portrayed as a hierarchy with different sources of evidence competing to be the gold standard. RCTs and introspective reflection do not necessarily produce conflicting forms of evidence. These are merely illusions arising from the dominant discourse of modernist healthcare which will disappear if we are able or willing to view the world through a different (but no less ‘real’ or valid) lens. However, once we accept the concept of difference, we must also accept the idea of multiple ends.

The end

Narrative has a beginning, middle, and an end, but not necessarily in that order. (Jean-Luc Godard, cited in Karl & Hamalian 1971)

Usher and Edwards (1994) have pointed out the ‘double signification’ of the word ‘end’ as meaning, at the same time, the aim (as in ‘ends and means’), and also the termination (ending). For the modernists, a single aim suggests a single ending: the achievement of the aim of physics as the understanding of all there is to know about physical matter will also signal the termination of the need for physics as a discipline; the aim of biomedicine as the achievement of perfect health and (perhaps) immortality will signal the end of the need for medicine. As we have seen, however, the valuing of a single end is at the expense of all other possible ends. If the preservation and extension of life is seen as good,
then the taking or shortening of life is seen (according to the principle of the excluded middle) as bad. The concept of 'a good death' is therefore logically inconceivable, and this might explain why some doctors attempt to prolong life at all costs, and why issues such as euthanasia cannot meaningfully be discussed within certain discourses.

Difference, the toleration and acceptance of multiple discourses, suggests the acceptance of multiple ends. From the postmodern perspective, no particular discourse has a privileged position, and consequently, no particular end (aim) is to be pursued at the expense of all others. But if there is no single end to which we are all striving, then there is no ending when that end is achieved. This rejection of the concept of an end(ing) might explain why some postmodern texts end so abruptly.

References

This interweaving, this textile, is the text produced only in the transformation of another text. (Jacques Derrida 1981)

And why others continue into areas forbidden by modernist discourses of writing. The 'References' section of a paper is supposed to contain a list of cited works, intended to add authority to the writer's argument. Clearly, this is very much a modernist concept. Postmodernist writers rarely cite other postmodernists; some do not reference at all. As Sim (1998) said of Derrida's book Glas, '[it] undoes the linearity of writing, transgresses the borders of text and puts into question the very form of the book'. If the author is dead and the book is transgressed, then who or what is there to be referenced?

Inconclusion

A text's unity lies not in its origin but in its destination. (Roland Barthes 1977)

Which brings us back to endings. The classical rhetorical form of thesis–antithesis–synthesis suggests a neat(ish) closure, some (perhaps tentative) answers to questions raised earlier, and a paragraph which might start with the words 'In conclusion ...'. Postmodernists, of course, would prefer a paragraph which starts with the word 'Inconclusion ...', and which contains questions rather than answers. Here, then, are some questions; no doubt you will have some of your own to add to my list:

• Who do postmodernists think they are? This, of course, is an unfair question, since it would take an entire book to give a full answer.
• Consider these two critiques of postmodernism: 'Texts may be everything, but [postmodernists'] texts, it seems, occupy a privileged position' (Gill 1995); the postmodernist project of deconstructing discourses of power is itself 'a power-game, a mirror-image of orthodox academic competition' (Eagleton 1983). Is the postmodern discourse itself merely another metanarrative?
• If postmodernists favour difference, why are they so intolerant of modernism?
• If the author is dead, why does there now follow a list of over 40 references?

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