

## Theory into Practice: A Barthesian Analysis of *The War Zone* by Sana Munir

Samia Shakeel<sup>1</sup>, Dr Abdul Hamid Khan<sup>2</sup>

<sup>1</sup> PhD Scholar, Department of English (Linguistics & Literature) Qurtuba University of Science and Information Technology, Peshawar, Lecturer Department English National University of Modern Languages, Peshawar Email id: sshakeel@numl.edu.pk

<sup>2</sup> Associate Professor, Department of English (Linguistics & Literature), Qurtuba University of Science and Information Technology, Peshawar

### Abstract

*The present research article applies Roland Barthes narrative theory of five codes on The War Zone (2020) a short story written with a backdrop of COVID-19 pandemic by Sana Munir. Relying on Catherine Belsey's (1980) textual analysis method the study shows that the selected story contains a network of Barthesian Codes. There are multiple cultural references to health practices in Pakistani society particularly during the time of COVID-19 pandemic. Cultural code plays a central role in the structure of the story. The theme and structure of the story rests on the idea of religious biases. The study concludes that the Barthes' cultural code portrays society's discriminatory behavior towards Dr Jasmine. Her resilience to the discrimination at general level and psychological adaptation to adversity at personal level through inherent goodness, sincerity to her profession and persistent fight against the disease and prejudices of the society provide the basic structure and content to the story.*

**Keywords:** *Pandemic, Barthes codes, resilience, binary oppositions, discrimination*

### Introduction

The records of human history have revealed pandemics as metamorphic experience that completely evolves the communities, customs, and individual lives (Szafranski, 2022). During the times of such crises narratives have always emerged as an essential source of sense-making, guidelines to deal with difficulties, and to commemorate what the world has experienced in a specific phase of history. The COVID-19 pandemic has once again accentuated the intense effect of storytelling as a technique to understand and make sense of unparalleled challenges (Carnell, 2022). The relevance between the themes of the stories and our lives reflect the ways we respond to current or future anticipated problems (Buheji, 2019). Since a whole body of literature has emerged in the form of post-pandemic literature, it has become the subject of investigation as well. This study aims to explore the intricate interplay between text and meaning in the pandemic story *The War Zone* (2020) by Sana Munir that appeared in the anthology of stories *The Stained-Glass Window*. The text will be explored and analyzed with the theoretical framework given by Roland Barthes in the form of Five Codes Theory and Catherine Belsey's textual analysis method. This investigation is an attempt to provide an insight into the lived experiences of humans during the time of global crisis.

## Research Objectives

1. To examine how religious bias is represented in the narrative through Barthes' hermeneutic and preartistic codes.
2. To explore how religious stereotypes and biases are structured and deconstructed through the semantic and cultural codes of the narrative.

## Research Questions

1. How do the hermeneutic and preartistic codes in the story contribute to the construction of religious bias in the plot?
2. In what ways do the semantic and cultural codes reveal religious stereotypes within the context of the pandemic?

## Literature Review

The occurrence of pandemic can be traced back to ancient times (Paulus, 2023). However, at present the pandemic has occurred in much considerable way across the world (Davies, 2020). As a field of academic studies, it takes into consideration the present-day situation of global health and advancement in the field of medical sciences (Roulet & Bothelo, 2023). The genre of pandemic fiction continues to provide a vast amount of room for scholars all around the world. In contrast to a natural disaster, a pandemic is a major humanitarian catastrophe. As a result, it warrants investigation in the fields of humanities, biology, and epidemiology. The major body of literature available on pandemics or epidemics, present or past, comprises of research on the analysis of how pandemics are shown in fictional works like novels and short stories written by various authors living in different parts of the world. The focus is on the themes of panic, agitation, dejection perseverance and social reaction. Dr. Langah uses Kate Millet's concept of internal colonization and gender-based power dynamics on the selected stories from *The Stained Glass-Window* (2020) to analyze cultural taboos of patriarchy and marginalization of women in the context of Pakistani society. Her research article primarily deals with the resistance of Pakistani writers against sexual politics through their presentation of strong and dynamic fictional female characters (Salam, & Hassan, 2024). In his essay "What the Great Pandemic Novels Teach Us," Pamuk (2020) not only discusses the history of pandemics but also draws attention to the odd parallels between the current coronavirus pandemic and the historical outbreaks of plague and cholera. These commonalities range from similar nature of germs and viruses to the identical pattern of early symptoms" (Szafranski, 2022). Sen and Chawla (2023) with the critical lens of literary analysis argue that since the beginning of civilization, sickness, illness, and death have always accompanied humans, and that pandemics are a particular form of this deadly manifestation that has been seen century after century, effectively inflicting havoc on the gullible human race. Another prominent academic who observes that epidemics and pandemics have brought changes in the lives of people is Agarwal et al. (2020) who illustrates pandemic literature in three categories in her research article titled as *Pandemic Literature- Seeking Meaning in Disaster*. According to Agarwal first category is of those works that engage mythical epidemics as an allegory to reckon a philosophy, secondly those that penetrate into the encounters of a real catastrophe to scan the human condition and thirdly present time writings as a consequence of the COVID-19 experience.

## **Roland Barthes' and Narrative Theory of Five Codes**

Roland Barthes, a French philosopher and theorist, in his book *S/Z* (1970) presents a theory for narrative analysis. In his analysis of the short story *Sarrasine* he identifies five codes and according to him these five codes are present in all the texts. These codes help in understanding the structure and meaning of the text (Barry, 2002, p.151). They may not be obvious but they form the fundamental structure of the text. Close analysis leads to the categorization of the text in genre form. Moreover, the study through the five codes not just places text in a specific genre but also get knowledge about the defining features of the genre as well. The hermeneutic code refers to the enigmatic, puzzling and unanswered elements in the text. The mystery underlying the unexplained situations intensifies the curiosity of the reader. Such situations create questions in the reader's mind. According to Barthes these elements are termed as: "snare", "equivocation", "jamming" and "suspended answers" (Felluga, 2022). The Proairetic code is also called the code of actions. It refers to those elements that create suspense in the text and catches the interest of the reader. The hermeneutic and Proairetic codes provide chronological sequence to the events in the text and they are studied syntagmatically. As every action creates suspense and curiosity, a question arises in the mind of the reader (Ali, 2013). The semantic or connotative code gives plurality to the text with regard to its meaning and theme (Barry, 2002, p.151 & Selden, Widdowson & Brooker, 2005, p.152). The symbolic code also renders meaning to the text but in a much deeper way by foregrounding polarities, antithesis and binary oppositions. (Barry, 2002, p.151) The fifth code is the referential or cultural code. Those aspects of the text that are based on the common religious, ethnic, cultural or linguistic practices are explored through this code (Felluga, 2002).

Barthes' work in the field of narrative studies has had an overpowering influence on literary criticism. Several researchers have applied Barthes's Theory of Five Codes to get the meanings encoded in the text. Zaib and Mashori (2014) decode the hidden voices of female suffrage in Shahraz's story *A Pair of Jeans*. Certain thematic polarities are highlighted through several referential words and phrases. Jadoon, Naqi, and Imtiaz (2020) analyze *The Color of Our Sky* by Trasi (2017) to know what lies beyond the text. In *A Structural Approach to D. H. Lawrence's The Lovely Lady: Application of Roland Barthes' Five Codes*, Benadla (2020) analyze Roland Barthes' structural theory of five codes to D. H. Lawrence's *The Lovely Lady* (1933) in order to examine the meanings that are suggested by the codes. Cultural indigenusness is reviewed semiotically through Barthes' codes by Abbas, Nadeem and Kharal (2021). In order to show how Kashmiri endemism is communicated across signs and symbols when explicated as indigenous semiotics, the study investigates the Kashmiri narrative tradition and evaluates the short fiction *The Transistor*. The research shows that Kashmiri resistance, disputatious practices and local authority under Para-colonialism go parallel.

### **Research Methodology**

The present research work qualitatively examines the selected story in the light of Barthes' codes. Relying on Catherine Belsey's (1980) textual analysis method the text of the story is closely read. The codes are identified for the meaning that they give to the text and each code is interpreted and analyzed.

### **The Author and the Story**

Sana Munir is a Pakistani short story writer, editor and journalist. She has authored two books of fiction, conducted several workshops on creative writing, taught Feminist film Theory, research Methodology and International communication. As a journalist she has written various features for political magazines and book reviews.

**Synopsis of the Story:** As Dr. Jasmine Alexander arrives at a public hospital each day, she updates the duty register with her name in place of derogatory remarks which she finds written on daily basis. Her shift starts at 7 AM, and the OPD is packed. She's learned to speak in a way that the patients can understand as she moves along the busy hallway. Jasmine is welcomed by nurses Shakila and Kinza as soon as she walks into the office, and they let her know that tokens have already been given to fifty four patients. Due to their illness and her sister's dread of her ill-tampered husband, Shakila requests Jasmine to meet her sister and her young nephew first. While doing so, Jasmine decides to bring Shakila a moisturizer after observing her parched hands. Rabia, Shakila's sister, explains her symptoms and those of her kid. Concern arises when Jasmine learns that Rabia has been giving her kid powerful medications. Examining them, she believes they have pneumonia and tells Rabia to come back if the fever doesn't go away, offering a blood test if necessary. Dr. Jasmine Alexander treats a deluge of patients with respiratory problems at the Outdoor Patient's Department in a hazy January in Lahore. People with persistent allergies, asthma, bronchitis, and chest congestion are among those in the inflow; they need frequent medications for fever, cough, and phlegm. The nurse, Shakila, worries that she could become ill from the repeated exposure. Exhausted after working nonstop for hours, Dr. Jasmine looks forward to rest when Dr. Sajid comes in for his shift.

An aged lady in need of nebulization due to a history of TB is brought in by her grandson. Dr. Jasmine is still concerned about the hospital's low resources even as she counsels the youngster to obtain the required drugs. Jasmine eventually nods off as Dr. Sajid shows in. She is committed to her profession even though the hospital's infrastructure is decaying and there is constant pollution. There is a lot of chatter about a new virus from China in the hospital, and the staff's responses vary. Dr. Jasmine considers her experiences and the difficulties she has encountered because of her upbringing and the circumstances of the hospital. She provides care for well-known patients in the pediatric department, such as Saniya, who is waiting for surgery for a broken arm, and Kamal, who has Paget's disease. She thinks about the possible effects on these defenseless kids and the impending menace of the virus.

As February 2020 draws nearer, Covid-19 reality starts to sink in. The epidemic adds to the strain the hospital is currently under due to insufficient funding. Early in March, Dr. Jasmine wears a N95 mask—which she has used erratically during pollution season—and leaves her residence an hour earlier than normal. She is the first woman and the fourth person in her village to receive a medical degree, and she lives with her parents and younger siblings. She even encourages her parents to take safeguards against the virus. She feels concerned about getting the virus on her packed bus journey to work and looks online for protective gear, because her hospital does not have enough of it. The difference between public and private healthcare resources is brought to light by one of her friends who works at a private hospital and has enough of PPE. In few days a conference is convened at the hospital to talk about the impact of the virus and government orders, and there are promises of protective gear in the horizon. A coworker notices Dr. Jasmine's tattered mask and is reminded of his own struggles finding masks for his wife. Jasmine tells her coworkers about a dubious mask website.

Jasmine assists in the delivery of a baby at the tumultuous Gynae and Obstetrics unit, even though the hospital is converted into a quarantine center. She succeeds in getting the woman admitted and performs the delivery process on her own. Safia, the new mother, showers Jasmine with gratitude. Jasmine gets worried about vaccinating infants against the virus. She spends nights in the hospital, separating herself from her family in order to keep them safe. The devastating news breaks that Dr. Sajid, a colleague, has died from the infection. The PPE that is supplied makes Jasmine and her coworkers happy as they sleep on improvised mattresses that morning, weary. Jasmine remains persevered and keeps her attention on her responsibilities in spite of the emotional cost. A modest bit of satisfaction and hope for better future in the face of constant problems comes from a simple joy that comes to her after she finds her name written on the daily duty roster without any remark inscribed. To which she responds by writing “Thank you” Munir (2021) and moves on her way home contended she has one less war to fight.

## **Discussion**

*The War Zone* is first person narration told from Dr. Jasmine’s perspective, providing an intimate and personal view of her experiences and emotions. This allows readers to align deeply with the protagonist’s struggles and sacrifices and the social dynamics at play. Detailed and vivid descriptions are given by Munir to make her setting alluring, realistic and authentic. Her travel in “the crowded bus”, duty in “the chaotic hospital ward”, and the hatred that she faces, “Her right hand fumbled...and wrote her name Dr. Jasmine, in place of what she had been erasing for over a year-Choori.” Munir (2021) not only increases the reader's involvement with the narrative but also highlights the challenges faced by frontline healthcare workers. Reflective tone and the use of consciousness provide an insight into the mental and psychological state of the protagonist. “She recollected both happy and sad experiences, such as being told off for bringing a customary Christmas cake from home to share with her friends and having someone refuse to sit at her table or share a bottle of water” (Munir, 2021). Through the dialogues among the doctors in the story a lot can be inferred about the key issues prevailing in the health care system and disparity between public and private healthcare units. The technique of flashbacks plays significant role in development of the narrative. These flashbacks give information about Jasmine past, the sacrifices that her parents have made for her education. This backstory justifies the current determination and sturdiness of Jasmine.

At the functional level juxtaposing contrary elements underscore discrepancy and irony (Hatch, 1997).The deaths due to the virus and the births taking place at the same time in the hospital. The shortage of facilities in the government hospitals is in sharp contrast with the private hospitals having enough highlights systemic inequalities. The use of emotional tone for the narration differs throughout the story Munir vigilantly utilizes anxious and depressing tone in the start and the swiftly alters it too hopeful and jovial. Recurring motifs like the protective gear, the hospital setting, and the interactions with colleagues and patients provide cohesion to the narrative.

The Hermeneutic Code: The opening scene of the story creates enigma when Dr Jasmine writes her name in place of the derogatory remarks. Her comfortable manner of doing this task as a matter of routine arises certain questions in the mind of the readers that who writes these remarks for her? Why does she erase it? Does Dr Jasmine know about the culprit? Has anything conflicting happened between Dr Jasmine and her colleague who writes this for her or there is any other factor behind this act other than the ethnic discrimination. Other enigmatic elements get prominent when nurse Kinza asks about the novel virus. There is tension and curiosity about the virus's effects in the hospital and community. Due to large influx of patients of Jasmine does not get chance to

explain Kinza's inquiry about it and that further increases the mystery. And the enigma about the disease remains unresolved until there is an emergency declared in the hospital and many of the wards are turned into isolation wards for COVID-19 patients. To some extent the mystery regarding the virus gets resolved when the patients pour in with symptoms of fever, cough, sneezing and the precautionary items mentioned "face-shields", "surgical gloves and masks" "stash of PPEs" (Munir, 2021). The predominant mystery regarding the writer of derogatory remarks for Dr Jasmine remains unresolved for the readers till the very end of the text, leading to fabrication of more questions in the readers' mind. For instance, why does Dr Jasmine not complain about it to the admin? Does anyone else notice it? Why does not any other doctor highlight the issue as it is a matter of personal and professional integrity? Does ethnically biased attitude prevail among the educated segments of the society as well?

**The Proairetic Code:** The actions and motives undertaken by the protagonist of the story Dr Jasmine drive forward the major plot of the narrative. Ranging from small acts writing her name on duty roster, bringing moisturizer for the nurse Shakila to fighting in the frontline against all the odds that pandemic brings to the basic health care system in Pakistan. The daily operations and the developing crises at the hospital, the past memories, of her concern regarding family's health safety, wearing of protective mask even before the spread of corona virus to save herself from the pollution and the effects of the climate change, become the sequence of her present actions. The action code moves forward towards its climax with the death of Dr Sajid due to Corona virus infection. "Dr. Sajid passed away, therefore by the next noon, one ventilator was available for the remaining patients. They were all personally experiencing a pain" (Munir, 2021). The narrative gains the momentum as the rest of the hospital staff and professionals encounter the difficulties and battle with the virus with whatever resources are available to them. "Dr Jasmine, sat on the floor outside the swarming Outdoor Patient Department, covered from shoulders to knees in a yellow garbage bag in place of a PPE and shopping bags over her shoes like a lot of other doctors. She rested her head on her knees and prayed for help, like everyone else" (Munir, 2021).

**The Semantic Code:** Looking for the semantic or connotative codes provide us with several layers of meaning of one single act in the text. Jasmine's act of providing moisturizer to Shakila, attending her sister and nephew without the token convey meaning of sympathy and care. For example, Jasmine sending Shakila a moisturizer represents empathy and caring in the face of the severe, dry weather, both physically and figuratively. Her several acts of helping the patients at the time of emergency convey her sense of responsibility as a doctor and love and compassion for other fellow beings. Whatever she does physically and in whatever way she thinks sets an example of resilience both literally and figuratively (Barthes et al., 1974).

**The Symbolic Code:** The symbolic code looks for the elements that highlight antithetical situations or binary oppositions (Barthes et al., 1974). The comparison of public and private hospitals in the story is an obvious example of binary oppositions. The derogatory remarks for Jasmine symbolize hatred and marginalization. The sacrifices of Jasmine's parents for her future and her dedication to her field in contrast to all those threats and uncertainties regarding future magnify this conflict. This difference highlights what the protagonist in her limited capacity as human plans and what fate or destiny or even narrowing it down to system has stored for her and these dichotomies exist everywhere which are embedded in the symbols (Barthes et al., 1974). The N95 mask symbolizes both fear and protection the same way Jasmine as a doctor saves the lives of people but at the same time she stays away from her own home so that she may not infect her parents with the virus (Munir, 2021).

The Cultural Code: The present text is rich in cultural or referential code which informs us about the conduct, tenets, convictions and way of life of the characters (Barthes, 1974). The story refers to the COVID-19 pandemic that had spread globally and had challenged almost all the regions of the world. The problems faced by the health sector in Punjab and especially Lahore. The story does a larger social criticism on the socio-economic condition of Lahore at that time. The reference is to the problems faced by all in the medical field in general and specific case is of Dr. Jasmine who being belonging to the different faith, Christianity is treated as minority. She is detested and not rendered the equal status as the other doctors. She even encounters biased comment of her fellow doctor while they are all having conversation about the strange viral disease. "It is an affliction from above upon the *kaafirs* and we just get punished for nothing" (Munir, 2021). She is an easy target to such judgmental behaviors as she lives in a society where people like her are treated as other (Kaul & Zia, 2018).

## Conclusion

In the end, it can be concluded that the analysis of the story in the light of Barthes' codes provide a deep insight into understanding the structure and theme of the story. All the five codes play a significant role in construction of the structure and content of the story. The text is filled with enigmas that keep the reader's curiosity awake while reading the story. The reader remains doubtful about the identity of the person who hated Dr Jasmine in the story. Moreover, there are many examples of actions that generate suspense and herald the coming actions. Dr Jasmine's character and her actions are delineated in a way that they point toward multiple type of challenges that individuals and particularly females encounter on daily basis. The symbolic code holds the utmost significance in the story. The plot of the story is completely based on the cultural practices in the context of Pakistani society. There are instances of binary opposition, when Dr Jasmine is treated as other at her work place. She faces ethnic and racial biasness from the side of unidentified colleague who considers her inferior. The life of a health practitioner is presented in contrast with the common citizens during the COVID-19 pandemic. Difference of two segments of the society is present at the very basis of the text. And finally, there are many references that pertain to things, values, customs and perceptions in the Pakistani society regarding their own ethics and the morality of the other ethnic groups.

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