

On the Beach, On the Balcony

by [Theodore Dalrymple](#) (April 2020)



Monk on the Beach, Caspar David Friedrich, 1808-10

Last night, in a dream, I heard my mother say to me, somewhat reproachfully, 'You have not called me for a long time.' This, I explained, was because she had been dead for fifteen years. This was not a good excuse, she replied.

I do not, at least consciously, believe in life after death,

but no doubt some psychologists would descry in my dream a belief in it at some deeper level of my mind. On the question of whether dreams mean anything in the way a soothsayer such as Freud would accept, I am undecided. Clearly on occasion they do mean something, as when I wake from a dream in which I go to a public lavatory and find that I do indeed need to relieve myself, but this rather banal meaning is not such as would satisfy those who believe that dreams are like chicken entrails, that is to say auguries, or are, as Freud put it, the royal road to the unconscious. Eating cheese shortly before going to sleep seems in my case productive of strange and usually disturbing dreams, but that too would hardly satisfy believers in the deep meaning of our nocturnal mentation. Besides, they would ask, why, knowing the likely effects, did I eat cheese before going to bed?

If I do not believe in life after death, I do at least believe in death, if not yet in my own (despite my advanced age). And death is more than normally present in people's minds as I write this, in the midst of the coronavirus epidemic. If nothing else, the epidemic has forced people to concentrate a little more on what is important in life, although, confined to their homes for much of the time, it may also have made them more picky and inclined to explode with rage over small things. Domestic violence is said to have increased already and it will be of considerable interest to see in retrospect whether the murder rate went up during the epidemic, at least in those jurisdictions in which most murders are familial rather than of strangers. For many couples, it may well be the first time that they have had to endure each other's company more than intermittently. Familiarity breeds not only contempt but exasperation: I have known murders committed over the victim's irritating little gestures that the murderer could abide not a moment longer. Great effects may have little causes.

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I doubt that statistics have ever been as closely watched as during this epidemic. Of course, this must in large part be because of their availability: never before in history have such statistics been available to so many so quickly and so effortlessly. Whether this is a good thing is not a straightforward question: figures that are true may nevertheless be misleading. Perspective is extremely important, but what is the correct perspective is itself not a straightforward matter.

Because death is so important a matter to us, the worst of calamities however much we are told that it is a necessary condition for life to have any meaning, the account of a single death may have a profound effect on us. For example, as I write this—in France—much publicity has been given to the death from the coronavirus of a girl aged 16 who had no previous illness and no factors that put her at special risk. She developed a slight cough and within a very short time was fighting for her life, a fight that she lost. For her mother, this was a loss of almost infinite magnitude, all the more terrible because so unexpected.

We can all well imagine this death and the mother's grief. And this death is not only tragic, but highly alarming, for we have been told that the illness caused by the virus is

dangerous for the old, especially for those who have multiple pre-existing pathologies. Here is evidence to the contrary, that it is dangerous to everyone.

I have already had conversations with people whose anxieties I have tried to calm and who bring forth this case as a reason not to be calm, but on the contrary to be terrified. One case, out of a population of millions of similar people! But during this epidemic, everyone has become familiar with graphs of the exponential growth of cases. For them, one swallow does indeed make a summer.

Even in a person as immune to panic as I, there is a still small voice that mocks my reassuring words. What if, indeed, this one case is the first of an exponential increase in such cases? After all, there must somewhere have been a first case, a case that I would have dismissed at the time as being of no larger significance to the population as a whole, however distressing to him- or herself.

Again, what consolation is it—or ought it to be—that other epidemics have been worse, especially as we cannot know (as I write this) where the present one will end? The Black Death killed perhaps a third or a half of the population of Europe, but that was nearly seven hundred years ago and in any case a disaster can be a lot smaller than that and still be a disaster. We are not trying to break a world record or get into the *Guinness Book of Records*. We simply want as many to survive as possible.

A single case is more vivid to us than ninety-nine non-cases.

To adapt very slightly the Gospel of Luke, fear shall be on earth over one dead of the illness, more than reassurance over nine and ninety who survive.

Exponential growth cannot but alarm us when we see those histograms showing the daily toll of death from the infection (or at least *with* the infection) in ever steeper ascent, that—again as I write this—strongly resemble the tallest building in the world, the Burj Khalifa in Dubai. We forget that exponential growth cannot continue for ever and must reach a peak. Such growth is not going to continue until the whole of humanity is extinct (a consummation devoutly to be wished according to some of the more extreme of the pagan ecologists, who believe in the intrinsic value of the earth whether or not there are any self-conscious beings existent to enjoy it). But so long as a peak has not been reached, we are free to imagine the worst, and in fact *do* imagine the worst. Dare I say it, but the worst even thrills us.

During the Middle Ages, when the cause of epidemics was unknown, other than the justified wrath of God, there were long processions of self-flagellating penitents through the streets, who no doubt thought that the blood that they drew from themselves and the pain that they suffered would abate the epidemic by causing God to relent. We have a pale version of this even today, with calls to prayer by clerics. I believe a mullah somewhere has claimed that the only way to put an end to the epidemic is *jihad*, as a result of which the world will convert to Islam and causing God to withdraw the virus from circulation.

No doubt most of us are more realistic and better-informed than were our ancestors, but still we—I mean many of us—feel

the necessity to make gestures that are not purely rational. Every evening at eight o'clock, people come to their windows and start to applaud. They are applauding doctors, nurses and other health workers who continue to work during the epidemic. As the evenings have passed, so the applause grows longer, louder and accompanied with ululations of one kind or another.

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I dislike such gestures which seem to me empty and shallow. They are supposed to be gestures of gratitude and encouragement, but all that I have seen (which of course may not be representative of anything except of all that I have seen) suggests that doctors and nurses are more irritated than pleased by them. Often they have to work in poor conditions, with essential equipment lacking despite the vast expenditure on the health service in France. It costs nothing, financially or in any other way, to make this gesture. It is, as I have said, empty and shallow.

In fact, I find something distinctly unpleasant about it. When lots of people make a gesture collectively, there is often the implication that if you refrain from making it—and even worse if you actively *refuse* to make it—you are in some sense an enemy, in this case, of the people. Whatever your inner conviction, it is safest to join in. By doing so you avoid drawing attention to yourself and you are assumed to think and feel like everyone else, which is always safest.

It is not that I underestimate, much less deprecate, the efforts of the doctors, nurses and other health care workers in the present situation, who evidently are at much higher risk than average of contracting a severe form of the infection. Yesterday, for example, I saw the news that a family doctor in Kent, England, had died of it. He was 63, a Moslem, who from his photograph looked a very kindly man, just the type you would want for your doctor, by all accounts much loved and respected locally. He continued to work despite the risk to himself: all honour to him.

But the gesture of applause at 8 o'clock displeases me all the same. It reminds me a little, in its tendency to get longer and louder and almost more hysterical, of the applause after a speech by Nicolae Ceausescu or other communist despot, in which everyone in the audience had to show himself as enthusiastic and the most enthusiastic applauder, and to continue applauding as long as someone else was applauding, for to be the first to stop might be taken as a sign of disloyalty and dissent from the official line.

It is reassuring that many thousands of professional people are doing their duty at some risk to themselves. This is in pleasing contrast to the scenes in which people squabble in supermarkets over who had the right to the last lavatory paper on the supermarket shelf. In Britain, tens of thousands of people have volunteered to work in hospitals or do the shopping for their elderly neighbours. How long the goodwill lasts before it curdles into anger and bitterness remains to be seen: perhaps it won't until the time it is no longer needed. I know of only one case of utter selfishness, that of the person living above the flat of my mother-in-law (who is 94) and below the flat of another lady living on her own who is aged 90. She has not lifted a finger to help either, or

even offered to do so. I suspect that the idea hasn't even entered her head, though she is clearly informed about the virus to judge from the precautions she employs in her own case to protect herself. But it takes all types to make a world and perhaps an absolute uniformity of response, even if it were a generous one, would be dispiriting in its way, for if everyone were good, then no one would be good. We need a few bad people at least. My mother-in-law's neighbour teaches us not to take kindness for granted: it is not universal. They also serve who only behave less decently than average, though how many of such persons we need is a matter of judgment.

My objection to the 8 o'clock applause is also aesthetic: I find it to be emotionally *kitsch*. It is to gestures what Jeff Koons is to art. There will, of course, be a further episode of it this evening in which I shall not join. On the other hand, my wife will participate and in the process wave to the woman across the road with whom we are not otherwise acquainted. Thus, we shall have the best of both worlds: I shall have retained my emotional purity while we shall have gained the reputation of being good appreciative citizens. And we may also have made a new friend.

«[Previous Article](#) [Table of Contents](#) [Next Article](#)»

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