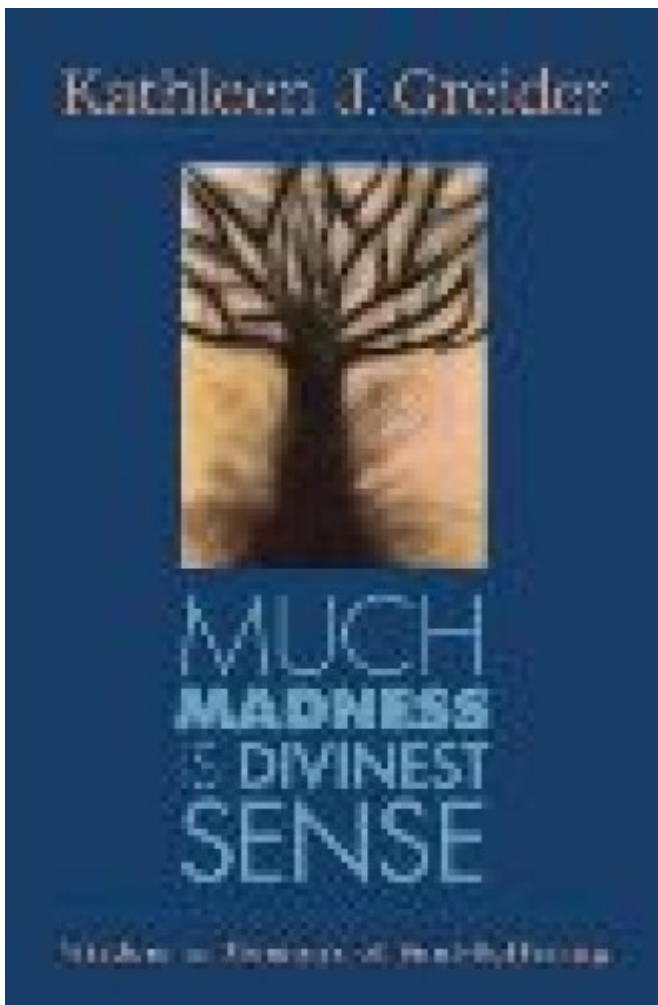


Much Madness Is Divinest Sense: Wisdom in Memoirs of Soul-Suffering

reviewed by [Marilyn McEntyre](#) in the [September 23, 2008](#) issue

In Review



Much Madness Is Divinest Sense: Wisdom in Memoirs of Soul-Suffering

Kathleen J. Greider
Pilgrim

Ignorance is the opposite of love,” writes the father of a young man with schizophrenia, reflecting on his efforts to understand his son’s delusional behavior. Most of us have heard similar, more obvious claims: hate is the opposite of love; fear is the opposite of love; indifference is the opposite of love. But to put ignorance in that category reframes in a startling way the relationship between love and knowledge—or at least between love and the willingness to know. “If one ignores something,” this father continues, “they cannot understand it ever.”

The temptation to ignore what is baffling, painful, shameful, frightening or threatening to our certainties is strong, and mental illness—or “soul-suffering,” the term Kathleen Greider prefers—is all of the above. For those who live with mental or emotional illness and for those who witness the cruel forms such suffering takes, the will to understand can be costly. Family members’ lives may be reorganized around the needs of someone whose behaviors are unpredictable and alienating. Their efforts may have to be maintained in the face of repeated rejection or withdrawal from the one who is ill. Soul-sufferers may lack the means, when mired in depression or confusion, even to acknowledge the care of their loved ones. And sufferers often invest enormous energy in denial because diagnosis seems to promise humiliation or loss.

Borrowing her book title from Emily Dickinson, whose own sufferings are recorded in poetry that offers a radically alternative view of ordinary life, Greider invites readers to imagine the lives of those whose illnesses have set them apart—often far apart—from the communities to which they belong and in which they should be able to seek solace and healing. She is careful not to romanticize “madness” (a term one memoirist claims to prefer), fully acknowledging the grueling, tedious anguish it often entails. But she insists that there is wisdom to be gained in hearing the stories of those who suffer in mind and soul—and much to be forfeited if we neglect to do so.

In her writing as in her professional life, Greider works as a pastoral caregiver: the book offers a safe space where the stories of nearly two dozen people who have lived with some form of mental illness are shared, considered, contextualized and even celebrated as contributions to knowledge and invitations to love more intelligently. Their stories offer the anecdotal evidence so often neglected in empirical studies of mental illness. “I embarked on this study not because these narratives are factual,” Greider writes, “but because they are wise.” Her hope is to

evoke the empathy and imagination that equip us for compassionate caregiving.

Greider admits that the stories she cites are not entirely representative; the fact that they are written by articulate people who are sufficiently healthy and motivated to write publishable prose sets them apart from the untold stories of those who suffer in enforced silence and inarticulate pain. Moreover, common prejudices ensure that some people's stories will get a readier hearing than others'. Still, the perspectives these writers offer from the margins to which they have been driven are precious teaching tales for a public that shares the stressful contexts in which their illnesses emerged.

We need the wisdom that can come to us only from those margins. Many of us, Greider reminds us, "are among the so-called 'worried well' and 'walking wounded.'" "One out of every four families is in the process of coping with a member who has a diagnosable psychiatric condition, and four out of five families have at least one member who has suffered at some time from a psychiatric illness." Greider believes strongly in the critical and theological value of the insights that sufferers can offer on "the sickness of human societies and the . . . evils rampant among us."

Some of the memoirists she cites are established writers whose narratives of suffering are embedded in a larger body of literary or professional writing: Kathleen Norris, Henri Nouwen and Parker Palmer are well known for other work in spirituality and theological reflection; David Hilfiker, Kay Redfield Jamison and Martha Manning are medical professionals who stood to lose much by public admission of their own illnesses, and their courage to do so has helped provide permission for other professionals to speak publicly and with more candor and vulnerability; others, less widely known, recount spiritual journeys equally worthy of public attention. All of the memoirists summon us to more meaningful participation in the cultural and spiritual work of maintaining and protecting health of mind and spirit in ourselves and in our communities.

Much Madness deals not only with brokenness in the lives of individuals, but also with the brokenness of our institutions of caregiving—both the mental health system and the churches where help and harm coexist like wheat and tares. It widens the idea of healing to include whole communities, not just the designated sufferers within them. "Why didn't my church get involved?" one memoirist poignantly asks, echoing others who found that churches could be, if anything, even more exclusionary than other sites where normality in one form or another is tacitly but

fiercely protected. Though they may offer generous help in crises, churches, like insurance companies and clinics, may be less helpful to those whose suffering is chronic: “Societies typically revoke grace from people whose agony doesn’t go away,” Greider writes, challenging readers to imagine caregiving as a way of life rather than as a temporary assignment.

Greider provides readers with both a useful list of resources and an incentive to hasten and read in full the many stories she tantalizingly cites. She also offers practical guidance about what it means to come alongside those who suffer from psychospiritual afflictions.

Several of the memoirists emphasize the relief found in quiet ministries of presence—from caregivers who are willing to sit in silence, to listen without judgment in a spirit of mutual vulnerability, and to refrain from reciting blithe platitudes or offering false encouragement. They also mention the helpfulness of factual information, medications responsibly prescribed, support groups and even hospitalization, which can offer, as William Styron attests, “an orderly and benign detention where one’s only duty is to try to get well.” Surprisingly many avail themselves of biblical language and images, especially from the Psalms, some “dramatic enough to communicate the profundity and value of life in the extremity of mental and spiritual anguish.”

Greider identifies four religious or spiritual practices common to her writers: “reflective writing; participating in religious community; prayer or meditation; and worship.” At any given time, one or more of these practices may be impossible for an individual in the midst of mental or spiritual anguish. But to bless the Lord at all times, to pray without ceasing, to give thanks in everything are not impossible tasks if sufferers are supported by the larger body that surrounds them.

Called to participate in each other’s lives as we learn how to be the body of Christ, we are all involved in the business of suffering and healing, learning and teaching. In bringing forward stories of suffering we all need to hear, Greider challenges readers to be willing to know more intimately what we might rather ignore, and to love with more imagination and intelligence those whose suffering summons us to service.