When Mama Ain’t Happy

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Getting from Mother’s Day to Mental Health Month may seem like a stretch, but for some of us it’s a very short walk. Not all of us grew up with June Cleaver or Carol Brady for mothers. Not all of us had moms who were cheerful all the time—in fact, I bet few of us did. And some of had moms who were sad or angry an awful lot of the time.

You’ve probably heard the old Southern saying which was inevitably turned into a country song: “If Mama Ain’t Happy, Ain’t Nobody Happy.” That’s true because a family is a system, and the person with the most influence on the health of the system is the mother. If the mother is depressed or angry, it affects everyone else in the system. And eventually that condition becomes normal for the system; the kids learn to walk on eggshells; the dad becomes accustomed to distance. If the mother then starts to get better, the other family members often sabotage any improvement because they are used to mom the way she was, and used to playing a certain role in relation to her. As therapists put it, the family system wants to return to stasis. They have been shaped by coping with illness or enabling it, and they see their roles as perfectly healthy; there is no need for them to change, and mom is just that way, period.

As you heard in my poem—and no doubt on other occasions—my mother suffered from depression. If you look at portraits of her as a young adult, knowing the end of her story, you can see it in her eyes, the product of a demanding father who was a college professor and a mother with little education who often felt belittled and ashamed. Living as a missionary in Japan was not easy on her, because it was a life full of failures and relatively few converts. Between my older brother and me, she had four miscarriages over a period of five years or so, one of them occurring when she was all alone in a sleeper car in a train to Hiroshima, far from home.

When I was in the fourth grade we lived (on furlough) in Arkansas near my mother’s parents, while my dad spent most of his time at seminary in Texas working on his doctorate. If you look at photos from that period, you will notice that every member of the family blimped up. We started out skinny and wound up fat. I don’t think it can all be blamed on my grandmother’s cooking, although her homemade fudge might have played a role. When I look at the pictures now, it looks like the family was depressed and ate to comfort itself. My mother was one heck of a preacher and she became something of a rock star on the Southern Baptist women’s circuit. But that meant that she was constantly burning her candle at both ends and getting exhausted, without a husband at home to help. It was the beginning of serious illness for her.

We returned to Japan for my fifth-grade year, but we weren’t able to get through more than half the school year. Mom had to get under the care of a psychiatrist in the States, so we moved to Dallas where her brother was a cardiologist. She had terrible migraines that kept her inside a lot. I don’t know what she told the church people who wanted to make her a missionary hero. She felt like she had failed. There was an internal stigma attached to mental illness, as well as a social stigma.

You heard some of the rest of the story. Back in Japan for the seventh grade, I was discovering girls and thriving in school while at home my mother often stayed in a darkened room with the only air conditioner in the house—for days at a time. I never thought that she did not love me. She adored me. But she did not love herself, and she was sad. Sometimes she would lash out because she was hurting so much. No one ever mentioned that she had a mental illness.
Even when they took her back to the States to be placed in a mental hospital, no one told us she had a mental illness, or what kind of hospital she was going to. The three of us kids left at home in Japan assumed she must be going to die. Mental illness was such a secret, shameful thing—and maybe more so for a person of faith—that very literally no one talked about it in those days. That is one reason I have felt compelled to talk about it and to work with NAMI on this island to reduce the stigma and secrecy and shame.

Eventually my mom got a lot better, but it took a long time. She did not kill herself, although she tried, and she lived to a ripe old age after a second career as a school teacher and the author of five books. But I want on Mother’s Day to speak to those of you who find it hard to deal with all the idealizing of mothers that goes on, when your mother was so far from perfect, and may have injured you in a profound way. My oldest brother could never bring himself to send Mother’s Day cards because he just didn’t feel that way; he didn’t want to sign his name to those sweet sentiments or even say in writing that he loved her. I felt differently, but I don’t blame my brother. And I don’t blame you if all your memories of your mother are not fond ones and some of the celebration of mothers on this day leaves you uneasy at best.

I don’t know if Christians are more judgmental or moralizing than non-Christians; I see a lot of holier-than-thou attitudes from completely secular people. But many people approach mental illness with a moralizing attitude—just as they do poverty—which they never apply to their own physical illnesses. It might actually make sense to moralize about smoking or overeating or habits that cause physical illness, but we all know it isn’t helpful. But a surprising number of people think that people with mental illness are responsible for their condition. They could have chosen to be happy. They need to change their attitude. They need to count their blessings and get over it.

On Wednesday I went to the state conference of the National Alliance on Mental Illness and served on a panel about “Mental Illness and Faith Communities.” We asked the audience why they came and what they were looking for. The first three hands up all said that their pastors or the people in their churches told them they didn’t have enough faith, that trusting in God and praying more should have solved their problems. That was disheartening to me. There has been a lot of progress in both mainline Protestant and Evangelical circles in the last few years, trying to remove the stigma of mental illness and trying to get church people to see it as an illness—with nothing to do with spiritual failure or laziness. But we still have to say that over and over. Jim Wallis’ organization, Sojourners, solicited on their web site this month “your mental health story,” and all the stories I read talked about how people had been treated by Christian friends as if they had a spiritual problem.

Sojourners also posted (5-10-17) the story of Jason Chesnut, a young Lutheran pastor in Baltimore who struggles with depression. He never had much use for the idea of demons and demon possession in the Bible. After all, his experience was nothing like The Exorcist. His depression is not possession, but it is like an outside force operating in his mind. Here are his words:

But ever since I began walking with depression, that term [demon] has taken on new meaning. Depression lies to me. It is relentless. It tells me I will always feel this way, that I’m not deserving of help, that I am a burden, a waste — that my life is thoroughly hopeless. The demon of depression tells me that this is my fault. It tells me that I am utterly alone.

Mark’s gospel depicts numerous instances in which a demon is present. The possessed person is often blamed for this, but Jesus never uses that logic himself. He doesn’t condemn a
possessed person for their reality, and he doesn’t tell them to just get over it. Jesus does what Jesus does: He heals them...

People, even the most well-meaning among them, will often use the Bible to try to help. They don’t usually head to Mark’s gospel, though. They’ll throw Philippians my way, referencing things like “I can do all things through Christ who strengthens me” (4:13); or they share Paul’s letter to the Romans, encouraging me to “increase” my faith so that I will “get better” (4:20-21); they send me “inspirational” quotations from a Google image search.

The stigma around mental illness only makes the silence and shame worse. Unlike a broken leg, I don’t have a tried-and-true pathway to healing and wholeness. The medication for our brains is not fully understood, even by professionals. It’s a lot of guesswork. We simply don’t know. That unknowing is often paralyzing and downright scary.

One of the most insidious parts of mental illness is the feeling that no one else could possibly understand what you are going through. The isolation is immense and inescapable. Your brain feeds into this, and the demon wants nothing more than for you to suffer in silence.

Jason is more courageous than most. Most pastors with mental illness won’t dare to mention it to their congregations. But we know that at least 1 out of 5 Americans has a diagnosable mental illness in any given year. I’m sure that translates to 1 out of 5 church members, just during the past year. I’ve talked about the fact that I have long take medication to control an anxiety disorder, and you know that Becca has been treated for depression. We don’t need to keep it secret—about ourselves or our mothers or anyone else in our families. NAMI Block Island will soon be launching a support group for families who have someone in their family system dealing with mental illness, because it affects the whole family.

I’ve worked on making help available since the time I heard the cry of pain from Pat and Bethany Campbell at their inability to get help for Ross before his death from mental illness. To me, this is an expression of the two most basic biblical values, two characteristics of God: justice and mercy. We work for justice for persons with mental illness—that they might have the same access to services that persons with other illnesses have, and that they might not be discriminated against. And we call for mercy rather than judgment for persons with mental illness, relating to them with deep compassion and appreciation of their pain, never blaming them or stigmatizing them. We want to treat them as Jesus treated them.

In the Catholic church, tomorrow is the feast day for St. Dymphna. I bet you never heard of her. Dymphna was the daughter of a pagan tribal king in Ireland around 700 AD, but she became a Christian and pledge to live a life of chastity. But when her mother died, her father slid into mental illness. He could not function, and his advisors told him to find a wife. In his illness, the only person he wanted to marry was his daughter, age 14, because she looked like his deceased wife. Dymphna ran away to Belgium and hid it a town called Geel (pronounced “Hale”). But her mentally ill father eventually found her there, and when she refused to marry him he cut off her head with a sword.

Dymphna was buried there, and some time later people began to notice that people with mental illness who came to her grave had been healed. It became a pilgrimage site. In 1349 they built a large church in honor of St. Dymphna in Geel (“Hale”), and by 1480 it had become such a popular site for people to bring the mentally ill for prayer that the church had to build housing for them. But there was never enough room, so the people of Geel (“Hale”) began to take the patients into their own homes. They discovered that people who just made a brief visit to the shrine did not get well, but the people who stayed a good while with a family in the town did get well.
The people in town had become accustomed to seeing people with mental illnesses and were not freaked out by them. To this day, they call them “boarders” rather than patients and welcome and accept them into their homes. They are treated as family members and are given menial jobs so they become part of the community. This tradition has continued in Geel (“Hale”) for over 600 years now. Studies show that motor functions improve, and doses of medications are lowered, but most importantly, healing from a lifetime of rejection begins to occur. People who’ve lived in isolation for most of their lives are recognized as children of God and welcomed into the community.

To me, that sounds like a story of the kingdom of God at work. Wouldn’t it be wonderful if Block Island and Harbor Church became places of welcome and healing for the depressed, the anxious, the bipolar, the schizophrenic, for those with substance use problems, and for all who suffer? “Come unto me, you who suffer under heavy loads,” Jesus says, “and I will give you rest.” Let us say with him, “We are gentle and humble of heart; here you will find rest for your souls.”