

# UNHOLY GHOST

*writers on depression*



**NELL CASEY**

*with an introduction by Kay Redfield Jamison*

WRITING THE WRONGS  
OF IDENTITY



Meri Nana-Ama Danquah

FOR A PERIOD OF TIME after clinical depression became the literary topic du jour, it seemed as if most of the work I read about the illness was written by white Jewish women from Boston who had, at some point in their lives, been treated at McLean. I must admit, I always thought it rather odd that one city could contain so much sadness, that one hospital could contain so many talented and successful people among its roster of former patients. Nevertheless, I would search for these books. I would purchase each and every one as soon as they were published, take them home, and sit barefoot and cross-legged on my couch, with a box of Kleenex at my side, while I

read about the lives of these people in this city that systematically manufactured great writers and even greater misery.

As a reader, what I cherish most about literature is the permission it grants me to escape the confines of my own life. No matter who or what I am, have been, or want to be, I am able, for the length of a book, to inhabit a new reality, one that the author constructs. My relationship to the literature of depression, however, is somewhat different. It is based not on a desire to lose myself in the pages of a book, but on a relentless need to find, and define, a very specific part of myself through the book. That part which melancholy stalks like a jealous lover. For many years, the only place in this huge world of words where it appeared as if I was welcome to carry out that search was inside the narratives of these women. These white Jewish women from Boston.

Of course, not all of the work on depression was written by them. During the period of time to which I am referring, a number of authors were writing of madness, of disorders and moods. There were a few books and essays by men and other women, some of whom were not Jewish and did not come from or live anywhere near New England. Regardless of their gender or place of origin, these writers did have one thing in common: they were white. All of them. Which placed me in the peculiar position of having very little choice but to look to these white people for some sense of validation, some basic understanding of who I am as a depressive and, ultimately, as a person underneath this illness.

There are times when I feel like I've known depression longer than I've known myself. It has been with me since the beginning, I think. Long before I learned to spell my name. No, even longer than that. I'm sure that before I could even speak my own name or learn to love the color of my skin, this hollow heartache was following me, patiently awaiting the inevitable crossing of our paths, planning my future unhappiness. I've always been aware that something in my life was not quite right, if not totally wrong. My scales were never balanced. For every twelve joys, I had twenty-five sorrows. And each sor-

row was like a song. A melodious seduction bringing me closer and closer to this terrible sickness which has cost me lovers and friendships, money and opportunities, time and more time. So much wasted time.

At first, I had a hard time figuring out why there were no glossy magazine articles or literary books about depression by black people. I've never thought of myself as average, but I've also never thought of myself as an anomaly. Surely there were other black women suffering from depression, questioning their sanity, searching for an affirmation, if not an answer. Why were they not coming forward or writing about it like their white counterparts?

In deciding exactly what it was that I wanted to share in this essay about my experiences with clinical depression, I realized that mental illness and race are topics that can not be divorced from one another. Not easily. Not for me. You see, the mask of depression is not all that different from the mask of race. So much of clinical depression has to do with identity, with images, with how those of us who suffer from the disease perceive ourselves and how, based on these oftentimes grossly distorted perceptions, we interact with others. So much of racism has to do with the same. It, too, barrages its prey with groundless images; it concerns itself more with the fiction of a prescribed identity than with the notion of any true individuality. It, too, seeks to blur a person's vision of herself, and her place in the world. Racism is also an illness. Perhaps not in the same way as depression, but an illness nonetheless. To contend with either one is bad enough. To grapple with both at the same time . . . that's enough to drive a person—pardon the expression—“crazy.” Welcome to my insanity.

As a black woman struggling with depression, I don't know which I fear more: the identity of illness or the identity of wellness. One might imagine that the identity of wellness would, naturally, be the most desirable of the two. But that's usually the problem with desire: what you see is not necessarily what you get. The societal images of black female wellness, as evidenced (still) in present-day

popular culture, have nothing at all to do with being well. Far from it. They have everything to do with the lies of history—a history that, invariably, has been shaped, created, or informed by the poisonous ideology of racism.

In these lies black women are strong. Strong enough to work two jobs while single-handedly raising twice as many children. Black women can cook, they can clean, they can sew, they can type, they can sweep, they can scrub, they can mop, and they can pray. Black women can fuck, too. They are rarely romanticized, just oversexualized. Hookers, whores, Thursday-night concubines, and sultry-voiced back-alley blues club singers with Venus Hottentot hips. Either that or they are desexualized, just straight-up masculinized, mean-faced and hardened. Whatever the case, black women are always doing. They are always servicing everyone's needs, except their own. Their doing is what defines their being. And this is supposed to be wellness?

Not that the identity of illness is any better. Its only appeal is the allowance for vulnerability. You are able to need others, to invite their assistance, to accept their love—the catch is that you also have to be fragile. Anybody who's ever *really* been sick knows that the tolerance level for illness is low. Once the get-well roses begin to wilt, everything changes. Compassion and caretaking turn into burdens and vulnerability becomes weakness.

If the illness is something as nebulous as depression, folks begin to treat it like a character flaw: you are lazy, incapable, selfish, self-absorbed. The list is pretty much the same regardless of one's race. But race cannot and should not be disregarded; there is no room in the black female identity for weakness, laziness, incapability, selfishness, self-absorption, or even depression.

If I were to say that reading all the books by those depressed white people did not have a profound impact on my ability to come to terms with my own battle against depression, it would be disingenuous. Each one was like a mirror. Even if the external reflection looked nothing at all like me, what I saw of the internal reality was an accu-

rate representation. The disease was the same, the symptoms were the same. The resulting confusion and hurt were the same.

None of that was enough though. I craved wholeness. I wanted to recognize *all* of me. Yet no matter how much these authors' confessions assuaged the discomfort I felt within, their stories could only meet the marrow and bone. They could never move outward and touch the flesh, the blackness that dictated the world in which I existed. What they could, and did, do was inspire me to write my own story. In writing that story I began, finally, to see why voices like mine were all but absent in discussions about depression. Let me show you what I mean:

Anecdote #1: While I was in the process of writing what would eventually become a memoir about my journey through depression, I was invited to a dinner party. It was a rather boring affair, the type that's full of old blue-haired women with fake teeth, fake fur, and real pearls. Not only was I one of the few people in the room under fifty, I was the only nonwhite person there as well. It wasn't my scene, so I didn't have much to offer by way of conversation, but the friend who brought me was, for some reason, determined to have me meet and make nice with the other guests, probably under the misguided assumption that they could help my career as an emerging writer. With great pride, he told one woman that I was writing a book.

The woman asked about the topic of my book. My friend took it upon himself to answer. "A book about black women and depression." The woman chuckled. "Black women and depression?" she asked. "Isn't that kinda redundant?" Everybody who heard this comment, including my friend, found humor in it. They laughed and laughed. Their obvious approval encouraged the woman. "Don't get me wrong," she continued. "It's just that when black women start going on Prozac, you know the whole world is falling apart."

Anecdote #2: Another dinner party. This time everyone in attendance was black and under forty. I was only casually acquainted with most of the people there. There were several clusters of conversation,

including one being held by a group of women huddled in the kitchen. I joined them, figuring their conversation would be the most interesting. At parties, talk that takes place in the kitchen is usually simmering with colloquialism and candor. They were discussing pregnancy and childbirth. Two of the women were expecting, and everyone was taking turns telling tales of their own delivery dramas and dispensing wisdom that they'd heard or overheard from somebody who knew somebody who was an expert on these matters. Statements like, "Cocoa butter will make the stretch marks disappear," and, "They say that if you only breast-feed for three months, they won't sag after your milk is gone." Then someone other than me dropped the "d" word. "Hey, do you guys know anything about postpartum depression? I've been hearing about it a lot lately."

"Depression? I don't think they were talking about us. That is not a luxury we can afford."

"I'm telling you," another woman added. "That's all about white folks who don't have any real problems, so they have to create stuff to complain about. If black women started taking to their beds and crying about postpartum depression, who'd be left to play nanny to all those little white babies?"

Anecdote #3: When I was a creative-writing MFA student at Bennington College, I met Robert Bly, Mr. Iron John himself, the epitome of white male sensitivity. He was a guest faculty member. I was in the cafeteria searching for a place to park my tray when I noticed that Liam Rector, the director of the program, was having lunch with Bly. I decided to sit with them. I was introduced to Bly as a nonfiction student. He glanced in my direction and said hello. Then Liam added, "Meri is writing a book about black women and depression." Robert Bly looked over at me again and said, without hesitation, sarcasm, or irony, "Whew. That's going to be one really long book."

There is a lesson in each of these encounters, a soft sinew of truth connecting pain to power. It's always alarming to hear such opinions. They never fail to shock me, render me speechless. I don't believe

that anyone actually thinks black women are, in some way, immune to clinical depression. I think it's simply that the black female identity of wellness—and all its silences—is ultimately preferable to the loud revelations that lie beyond the black female identity of wellness. After all, the women at both dinner parties were right. When black women fall apart, the world as we know it also falls apart. The myth of Mammy comes tumbling down.

Based on his frank reaction, Robert Bly obviously had some idea of what is hidden behind that myth. He was right when he suggested that the despair which generations of black women have had to endure could fill volumes. And, in fact, it has. From folklore to old wives' tales to contemporary novels, we have attempted to write the wrongs of our identity, to claim a humanity. Yet by and large, this documentation has been relegated to the pages of fiction. Which still positions our stories under the label of a lie, the invention of an artful imagination. Which prevents us from being able to distinguish diagnosable illnesses, like depression, from adaptive responses to the inequity of our circumstances, like despair. Which keeps us feeling fraudulent—as if we're not “keeping it real”—when we are not able to get out of bed on any given morning, let alone rise up to the challenge of life's hardships. What will it take to heal us of this legacy?

There is strength in numbers. It's hard to be the only one of anything—the only disabled student in a school, the only single mother in a community, the only immigrant on the job. You are perpetually aware of your difference. After I met two other black women who were willing to openly admit that they were also dealing with depression, the sense of helplessness I had been feeling when I thought I was all alone turned into a sense of hopefulness. They were walking, talking, breathing people—not well-crafted characters. Their experiences authenticated mine in a way that nothing else could. Their presence addressed all of the questions and issues I had about what it means to be a black woman living with a psychological disorder. It means seeing yourself in a way that is often inconsistent with the way the world sees you. It means seeing yourself as a human being

who is entitled to a wide range of human emotions and conditions, including illness and wellness.

By the time my memoir, *Willow Weep for Me*, was published, I had undergone various methods of treatment for my depression. Therapy, antidepressants, mood stabilizers—some of which were ineffective and others of which worked marvelously. I had become unashamed of the illness and unafraid of its stigma. Moreover, I had moved past the tendency to view my life against the blinding background of whiteness, the need to paint it with predetermined images of blackness. Every now and then, I find myself thinking about those white Jewish women from Boston. I find myself wondering about their reaction to *my* story. Do they read my work and see more than race? Can they enter my world and recognize something of themselves in my reflection?