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What reader does not search for a happy ending at the end of a love story? How many of us yearn for a better ending to a human conflict or loss that we have suffered in our own lives? I confessed to a healer years ago that I struggled to make order of my mother's life and to write a better ending to her story.

My mother, Helen Windt Mack, died at the age of 35 by her own hand in the spring of 1956. She was devoutly Catholic, and the puzzle I found most hard to unravel was her choice to take her own life knowing that the Church considered suicide to be a grave and unforgivable sin. She left behind four children ranging in ages from seven to eighteen months, a husband, and a large Catholic family of Polish origin including her mother, seven sisters and two brothers.

She lived in a rural Wisconsin town nestled in the hills and countryside that surround Lake Superior's shores. She graduated from a Polish Catholic high school and married in her late twenties. She worked in a Lake Superior Island community as well as in her hometown before she married. She was strongly connected to her mother, her siblings, and her church. Once married, she lived in the same town as her mother, two sisters and two brothers. The unanswered questions are: Why did she commit suicide, believing it to be a grave sin, and why did she not disclose the pain she suffered to the women in her family, some of whom were so close by?

In 1955, the year before her death, my mother was subjected to electroconvulsive shock treatment administered at a Catholic hospital in Duluth, Minnesota in 1955. She was changed. I watched her from my second-floor bedroom door as she walked the hallway that led from her room, past mine, to the bathroom. She seemed to float. Her eyes were fixed ahead of her. She never made eye contact with me. It was as if I was not even there, or perhaps, that she did not recognize me, her six-year-old daughter.

I learned to ask my paternal Aunt Margie, who lived with us, the questions a child would ordinarily ask her mother. I knew from the nonverbal feedback that I was getting from my mother that she was not cognizant of me or of the daily events that governed a child’s life. She was altered. As a child I innately knew that, but a child's mind cannot sort out cause and consequences.

Thirty years later, my Aunt Margie, then in her eighties, revealed to me in her Michigan apartment that my father had struggled with the status of my mother’s health. Following my mother’s electroconvulsive therapy, Margie had discussed with my father that she believed my mother’s health problem was primarily physical, not emotional. She recommended that a doctor conduct a physical examination of her. While never done in today’s medical practice, during the 1950s it was not uncommon for a psychological diagnosis and treatment to be implemented before ruling out physical causes. Acting upon her insights, my father arranged for a local physician to examine her. The doctor diagnosed tuberculosis. The disease had already invaded one and one-third of my mother’s lungs at the time of the initial diagnosis. In the 1950s, state law mandated that upon documentation of tuberculosis, a patient needed to be removed from the home and housed at a tuberculosis sanatorium. Few patients improved; most never returned home.

On the day of my mother’s death, April 13, 1956, Margie assisted my mother in the preparations for her to leave the family home that afternoon and to be admitted to the TB sanatorium in Washburn, a
small community 40 miles away. I retain vivid memories of that early morning before going to school. My mother had pleaded with my father as he made a phone call to the facility confirming the arrangement. She wept and made continual attempts to break the phone connection by holding down the small button on the receiver. She was distraught at having to leave her family for residential confinement.

Margie recalled that she had sent the three of us children off to school. She had drawn a bath for my mother and was attending to my eighteen-month-old baby brother. She said she went downstairs to feed the baby in the kitchen while my mother was bathing. When she returned upstairs to assist my mother, she found the bathroom door locked and my mother unresponsive to her calls to open the door. She said she knew my mother was in trouble as she recognized the sounds of gushing blood.

I had returned home from school with my brother and sister during the noon hour for lunch, as was generally done in those days. My brother and I witnessed my grandfather breaking down the bathroom door with an axe. He blocked our view as the door caved in and with the booming voice of an experienced woodsman confronting life or death, he screamed for my brother Mike and me to go downstairs. We huddled in the dining room where my younger sister clung to a wall. My Aunt Margie had called for help. Seconds, minutes, it seemed like hours passed (for life freezes for children in such a situation) before my mother was brought from the second floor of the house on a stretcher, passing in front of my siblings and me in the dining room and then out the kitchen to the waiting ambulance.

My mother was a beautiful woman—I knew this as a child. But the memory that froze in my brain from that day forward was her beautiful dark hair draped over the stretcher, covered with a white sheet streaked with bright red blood with more blood circling a large gape across her throat. It would be years before I could remember any other event associated with my mother and our life with her.

After my mother’s suicide, the adults in my life (my father, aunt, and grandfather and other family members) could not speak openly of my mother’s death.

My father was the only adult who talked to us children about the death of our mother. He sat my older brother, my younger sister and me down at our dining room table. He told us our mother had died. His eyes were teary and filled with anguish. His voice broke. I don’t recall that any of us asked any questions. I felt that my father was breaking in two and I was more worried about him rather than my siblings or myself.

I was not surprised to hear from my father that she was gone forever. I already knew that on an instinctual, survival level. My heart turned immediately to my father. I cannot remember the words he used other than saying she was in heaven and that an angel was now with her.

Looking back, I experienced my first depression the summer of my seventh year, just months following my mother’s death.

I returned to my first-grade schoolroom the next day after my mother’s death. No one, not my first-grade teacher, not any teacher, said a word about me losing my mother. I was left alone to deal with my grief in my own way.

Over the years, I became a true May Gemini, sprouting a two-dimensional personality and memory. On the one side, it remained the day of my mother’s death frozen in space and time—my childhood juxtaposed between the morning of her death and the afternoon of my actual life. If I was 10, I lived the morning as a six-year-old in the house of my childhood, and the afternoon of my ten-year-old life. The other side continued to grow, develop and mature, obsessed with acquiring literacy skills, independence and a keen drive to count on myself and to get past childhood so my “real” life could begin.

As the one Gemini gained education, security and independence, the child Gemini threw a dark, dense shadow over the years. Looking back, I experienced my first depression the summer of my seventh year, just months following my mother’s death. Questions began to stream across my mind but I restrained from asking them of either my father or Aunt Margie.

I experienced subsequent depressions beginning in fifth grade and fought off the dark shadows of the child Gemini throughout my teens. I experienced panic attacks and a range of anxiety behaviors plagued me for years to come, muscle restrictions in my neck, shaking, fainting, and an immense sense of aloneness when semester breaks came during my undergraduate years. I was alone with the child Gemini and I was unsafe.

All of these depressive episodes were precursors to a prolonged “situational” depression in my forties. The time my depression was due to the long duration of untreated darkness which still enveloped my life. The depression in my early forties was to bring the Gemini together. It proved to be the impetus in getting the answers to the thousands of stored-up questions of a lifetime. I returned to my home town, to Mack Hill, to the county courthouse birth and death records, to Madeline Island to find and talk to my mother’s early female friends, then in their eighties.

The most important trip proved to be to Michigan to talk to my Aunt Margie, who lived in the family home prior to and after my mother’s death. We talked about the morning of my mother’s death and my mother’s illness. We talked about how my mother’s death impacted Margie; she revealed to me that it was the first time she had talked about it with anyone.

I visited a retired doctor who practiced medicine in the 1950s at the start of his career and who had worked at a TB sanatorium as a young intern. I read medical research on the treatment of TB, depression and medical treatment of women in the 1950s. All of my questions were answered but one. Why did my mother choose to take her life?

Was there other familial occurrences of tuberculosis? Yes. My mother’s mother had TB but self-healed, which was not uncommon. My father’s father, who lived with us in the Mack family home, also was diagnosed with TB and was treated at the University of Wisconsin Madison hospital around the same time of my mother’s illness. It is not clear to me what the nature of Grandfather Mack’s TB was. It is clear he was never given the ultimatum my mother
Ten years later, doing research on another topic, I stumbled upon the probable cause behind my mother’s suicide. In reading about the life of Ernest Hemingway, I found that he had received electroconvulsive treatment to combat depression. Hemingway was significantly altered by it. He could not retrieve words to continue his writing. It was a choice to continue the treatment or live with the depression. He eventually took his life. I began to research electroconvulsive shock treatment. In Lee Coleman’s book, The Reign of Error, Coleman describes the devastating after-effects of the treatment suffered by most patients. They included mental confusion, retrograde and anterograde amnesia, and a controlled type of brain damage, which subsided in some and was permanent in most. In some cases, patients suffered short-term memory loss, which impacted their ability to remember family members or recent events in their own lives. In other cases, the treatment destroyed memory traces in the brain; thus, the patients could not recall the months immediately before and after. The injury to the brain caused by the “treatment” produced permanent deficiencies in retention of new information (anterograde amnesia). In some patients, the treatment caused a permanent lowering of intellectual functioning altogether.

In the past as well as today, the vast majority of electroconvulsive shock therapy is administered to women. In the past, including the 1950s when my mother was administered this treatment, male family members made decisions regarding treatment of women in their families. Women did not have the right, as they do now, to select and govern their own medical treatments. Simply put, once diagnosed with a mental disorder of any kind, patients were powerless to refuse an unwanted treatment. And electroconvulsive shock treatment was frightening and devastating. Treatment was delivered in a routine, gruesome manner with little to no after-treatment. Patients were sent home to family members who were clueless as to the nature of the treatment or to the devastating after-effects it caused to most patients. Instead of improving the mental stability of patients, it unraveled the majority of them.

After reading and studying this research, the planet moved. The Gemini united. It was as clear to me as the northern lights in a Lake Superior summer sky: my mother had been fundamentally changed and intensely frightened. She reached the end of her ability to endure. My memories of a “different” mother who came home after treatment now made sense as I uncovered the facts of both her electroconvulsive treatment and her undetected and untreated tuberculosis.

My father never recovered from the death of my mother. He and her brother carried the burden of allowing multiple treatments to be done on her, believing that psychiatrists knew best. I do not blame them for doing what they believed to be the right decision at the time. They suffered a lifetime with the aftermath of my mother’s death.

A better ending? The only way to create what would be to rewrite history and to give the patients of yesterday the civil rights that patients and women possess today: If women of yesterday had possessed the knowledge of best medical practice, had sought second opinions and sound medical research to ground practice, and had exercised the authority to make decisions for their own care, the errors of past medical history would have been far less in number. However, past medical mistakes, no matter how painful they have been, have taught us one important lesson. The most important duty of the patient is to exercise the privilege and the right to accept, refuse and/or combine any medical treatment(s).

The men in my mother’s life were faced with the heavy duty to sort out and select treatment. Women may have voiced their opinions, but at the end of the day, it was the men who made the most important decisions of a woman’s life. It was a man’s right; it was a man’s curse.

In the end, my mother’s choice to end her life was the result of enormous pain that she endured silently alone. Her mother, while undoubtedly intelligent, was an immigrant woman immersed in the religious beliefs of the Church, a church you did not question. While her mother and two sisters lived nearby, with many other sisters spread throughout the state, I do not remember ever seeing any of them, except one, at Mack Hill, visiting before or during my mother’s illness and subsequent death. They stayed away, most likely due to misunderstanding, to the unwritten code that you do not interfere in another man’s family, and due to the enormous pain so many of my mother’s family carried for years after my mother’s death.

My mother’s medical care was standard care for women at that juncture of time in our society. My mother did not deliberately set out to cause pain to her children, to her husband or to her own family of origin. My mother was a sensitive, bright woman, misdiagnosed and subjected to a horrifying treatment from which she never recovered.

The better ending lies with women understanding the past, in making choices for their own lives and in respecting the right of any of us to possess autonomy over the quality of our life and life-choices. Ten years have passed since I began the journey of cutting the small pieces of my mother’s story into a complete whole. While I have suffered pain along the way, I have found a healing peace and grace. Grace has quieted the rush of questions and replaced my memories of a mother’s face every child cherishes.

I believe in the universal spirit of creation. I believe that God/dess is within each of us. I believe that we carry the message from creation, unknowingly, from person to person. The image of angels has surrounded my mother’s untimely death for many years, probably first suggested by my father when he struggled to tell his very young children where their mother was following her death. I have spoken with several family members who have been visited,
Ten years ago, while I was recovering from the depression I spoke of earlier, I attended a writer's workshop sponsored by Hazelden of Minnesota. There were thirty adult participants and one teenager. The teen was required to submit a portfolio of work in order to be admitted. During the final session, the seminar leader asked if there was any one piece we wanted to read again out loud. A minister asked the youngest among us to read his piece. The young man was struggling with a title. After reading the poem once again, the minister replied that he believed the poem was finished and needed no title. The poem was published a few years later, untitled.

The poet was my son, who never met his grandmother but knew she had taken her life as a young mother. He may not have had her in mind when he composed his poem. The spirit of the message carried through my son mannered so very much to me at a critical juncture in my life. I believe that the poem captures the physical and emotional state of my mother at the time of her death. So calmly she turned out the light and threw last chance aside. She was beyond any ability to cope for one moment more. So soon she wept and waited until angels came, lovingly, to take her to freedom.

For my Aunt Frances, now in her 86th year, who lost her beloved sister, Helen, many years ago when she still needed her.
And for Kerry MacK who wrote a paper in a college class seeking for answers concerning her grandmother, Helen, whom she never met.

**untitled**

*by Bradley Leo Baumgartner*

1999

So calmly
He turned out the light
And threw
Last chance aside.
Without Jesus,
An unforgiven
goodbye—
Not sane enough to
Be accepted.
So he wept until
The end.
When freedom came—

And slept on his
Shoulders with
Giant angels
Caressing his
Footsteps on the
Way out the door.

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About the Authors

Bradley Leo Baumgartner is employed in the field of adult disabilities and is currently completing a degree in secondary special education. He is a graduate from the University of Iowa with a major in English. He is a jazz harmonica player, poet, and writer. He lives in Eau Claire, Wisconsin.

Kristen E. Cole resides in Waco, TX, where she is pursuing an undergraduate degree in creative writing/neuroscience from Baylor University. After graduation, she hopes to attend medical school and become a psychiatrist. Kristen believes that her own history of psychiatric illness will make her a more empathetic and effective psychiatrist. She considers working with the mentally ill to be an honor, because psychological pain builds amazing strength in its sufferers.

Mark Crosby writes poems and songs that deal with love, nature, and topical themes. This year, he will have poems published by The International Library of Poetry, and Love's Chance Magazine, as well as Open Minds Quarterly. Most recently, Riverhawk Publishing has taken an interest in publishing one of Mark's ballads. Mark has lived in New Hampshire, Massachusetts, and Maine. He currently resides in Augusta, Maine.

Barry Daniels is a retired Federal Civil Servant living in a converted boatyard on the shores of Mahone Bay, Nova Scotia. He has tried his hand at fiction writing in the nineteen eighties, and had several pieces published by the Toronto Star as finalists in their Short Story Contest. Barry was a second-place finalist in the first Brain Storm Short Story Contest in 2003 for "Remembering Aunt Daisy." Barry has lived with depression since his early teens, but was not diagnosed until his early thirties. He has been taking anti-depressants daily since 1991, with "remarkable results." He says "I consider myself extremely fortunate to have found my 'cure' so easily, and with so few unpleasant side effects."

Preston Gresham lives in Chicago, Illinois. He is serving the lord in a ministry called "Partners For Christ" where he encourages young people to do their best to stay out of trouble. He and his wife Sarah own a website design firm. Preston loves to write, exercise, and listen to gospel music.

Ardis Powell, 59 years old, has struggled with bipolar disorder and BPD all her life. She received her BA in Social Welfare in 1972. She is active in NAMI, her church, The Methodist Children's Home, and her community of Tahlequah, Oklahoma. Ardis has lost both parents and her husband of 21 years. This painful and challenging time has been overcome with the help and support of her strongest advocate, her brother Robert, her loving church family, numerous caring friends, a very competent psychiatrist, and her warm furry friend, her cat Manigold. She concludes that peace and happiness have come to a long, hunted soul.

Kurt Sasso has battled major depression since 1979. He has had 22 electroconvulsive therapy (ECT) treatments and numerous hospitalizations. He is 47 years old and lives in "Da Bronx", New York. He has been married for 24 years, and has a 22 year-old son who is manic depressive and developmentally disabled. Kurt is on the Board of Directors of The National Alliance of the Mentally Ill, NY Metro Chapter and is a public speaker on mental health issues for both NAMI and The Mental Health Association.

N.J. Sherberneau lives with his wife and three step-children in Lansing, Michigan. He was first diagnosed with schizophrenia in 1976, and has struggled with his illness ever since. He has held down a part time job for over seven years and enjoys music, friends, and taking walks along the river.

Sophie Soil, a grandmother, is an artist/craftsperson who won first and second prizes at the C.N.E., was published in various magazines and anthologies, shortlisted in many contests, won first prize for her poems "search for measure", "the jar", and "war years", second prize for "stark and naked", and first quarterly prize for her chapbooks and stories. She is a woman of ten flight names. Presently, she has a full collection, Bygone Daughters of a Lesser Fate: a poetic memoir, is under contract and is presently being published by Publish America. Her poem "The Planet" has been nominated for the Pushcart Prize in 2003. Sophie currently lives in Toronto with her husband of 50 years.

Manav Sachdeva Maasoom, 27, is presently wandering in Afghanistan while working there to transfer the ownership of Afghanistan's development back to the Afghan Government. Maasoom studied Poetry and Policy Studies, an independently created field, as a Master's student at SIPA, Columbia University. Maasoom reads and writes poetry in English, Urdu, Punjabi, and some in Persian.

Dr. Maureen D. Mack is a professor in the Department of Curriculum & Instruction at the University of Wisconsin–Eau Claire. She specializes in teacher education and issues facing youth in today's culture. Mack's work includes advocacy efforts to support girls and young women. Maureen has two grown adult children, Rebecca, a full-time mother of three, and a son who is a professional in the field of adult disabilities. Maureen lives in Madison, Wisconsin in the Lake Superior area as her spiritual home but physically resides in Eau Claire, Wisconsin.

Karen D. Mitchell lives in Indianapolis, Indiana. She is a wife, mother, cat lover, legal secretary, English major and poet. She loves to write, read, walk and watch birds. Karen has struggled with anxiety/panic disorder since 1989 and was diagnosed with major depression in 2002. During recovery, Karen rediscovered her love for writing. She hopes to someday help others heal themselves through the power of writing, possibly as a poetry therapist. Karen's poetry has appeared in Genesis and Jake Magazine. She is the author of one chapbook, Thanatology of Mobs.