Madwoman in the Living Room

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As a young child, Tara Elgin Holley knew little of her mother’s actual character. Raised by her grandparents and then by her aunt, she desperately wanted to understand the mother who was institutionalized shortly after her birth. In her aunt’s attic she found an unexpected treasure trove: her mother’s preserved musical recordings and show dresses. At first the clothing was just a way for Holley to be near her mother, but once the costume was on, Holley’s sense of self fell away. She writes in her memoir, “I would clamber into the beautiful red dress, the long skirt pooling around my feet, the collar slipping off my thin little-girl shoulders. With one hand, I would hold the dress up; with the other, I would grip my broomstick microphone. I became Dawn Elgin, the glamorous Hollywood entertainer” (Holley 46). Holley may only have been a child, but her imaginative journey into her mother Dawn’s past foreshadows a lifetime of searching for her identity in the context of her mother’s mental illness. Her search is made more intense as Holley’s role switches from daughter to caretaker.

Holley’s memoir, My Mother’s Keeper, tells of the strained relationship between a daughter and her mother suffering with paranoid schizophrenia. Within the genre of family memoir, works such as My Mother’s Keeper and Mary Clearman Blew’s Balsamroot show the blurring of borders between psychology and creative expression. Holley and Blew both write from the perspective of caretaker for their older family members. By closely examining their works, we can find techniques for both personally coping and professionally painting the stark realities of mental illness for women in the United States. Holley and Blew use their memoirs to show the personal identity crisis associated with caring for a mentally ill family member. As they try to understand their difficult roles as caregivers, the weight of responsibility leads them to search the past for impossible answers. For both writers examining the past only increases the
questions they have about the future. The overwhelming obligation they feel toward the family member they knew causes a temporary confusion of selfhood. Only through increased focus on the future of their personal lives and their children’s lives do they feel grounded again in their identities.

Memoir is the perfect genre for narrating this process of self-discovery during the difficult period of adjustment. Dan McAdams discusses the way narrative establishes identity, noting that narrative gives people a sense of “unity and purpose as they move into and through adulthood. They aim to make some narrative sense of their life as a whole” (102-103). Thus memoir, with its ability to encapsulate long periods of time, is an ideal method of coming to terms with the trauma of mental illness in the family. Although Holley’s memoir is focused on her mother’s paranoid schizophrenia rather than her own, the same principles of identity construction apply. Memoir provides a canvas for caregivers to discover their own identity in relation to the overwhelming responsibility of caring for their mentally ill family member.

No matter when the burden of care falls on family members, the change is dramatic. Blew’s memoir Balsamroot explores what happens to a woman and her aunt with progressive dementia. Even early on, Blew reaches a point where her responsibility for her aunt’s care expands from physical to emotional care. In that moment, Blew realizes just how much her own identity is tied up in her aunt’s progressive dementia:

I possess more of my aunt’s repository of memories than she does, nowadays, though I don’t understand all the connections. The thread of narrative attaches itself, spun thin, endless, stretching across the parking lot and the street as I drive away…It will stretch as far as I will ever go. In a sense, I am possessed. My life is hers, after all. (Blew 91)
For Blew, holding on to her aunt’s history, her memories, is just as overwhelming as caring for her physically. Although her experience caring for her Aunt Imogene is at times devastating, Blew’s narrative is a practical application of theoretical approaches to identity. She asks the question, “who am I?” and finds the answer in her own life and in the relationships she shares with others.¹

Not only do family memoirs of mental illness give insight to identity, they also suggest ways in which stigmas can be recognized and explored. Family members face the dominant ideas of twentieth century psychology, which “held that the core cause of mental illness was faulty parenting, as well as personal weakness and deep character flaws within the afflicted person” (Hinshaw 7). Scholar Laura Kanost sees the present shift toward realistic depictions as liberating. She writes, “The attic, along with the marginal physical, social, and intellectual spaces traditionally afforded to people with mental illness, is being opened up and reconfigured by literary and popular culture alike” (112). In fact, as both Blew and Holley’s memoirs suggest, the madwoman is brought out of the attic and into the living room, no more shut away but part of the regular household. Liam Clarke’s 2011 article may have argued for more psychological practitioners to look to fiction for a more personal understanding of psychological trauma, but I suggest we should also examine descriptions based on memoirs written by those who bring their mentally ill family members into their lives and living rooms. Blew and Holley both write from their perspective as loving family members and overwhelmed caregivers. Their memoirs can then provide insight into how a loved one’s mental illness impacts perspective and identity, ultimately influencing multiple generations. They also provide a possible template for coping

¹ Identity Theory actually includes three levels of identity: individual, relational, and social. Although Blew mainly references the first two, the third level is implied in the act of writing a memoir for publication. See Vignoles, Schwartz, and Luyckx 1-5.
with the strain caretaking can have on individuals and families, though more examples are necessary for making such a process generalized.

**Recognizing Responsibility**

While *Balsamroot* and *My Mother’s Keeper* focus on family dynamics over first-person narrative mental illness, they still show the complexity of their situations.\(^2\) By allowing the mentally ill to speak for themselves, authors escape treating mental illness as a metaphor. Elyn R. Saks and Kay R. Jamison are well known for not only writing from their own experiences as mental health practitioners but also as individuals with severe mental illness.\(^3\) Saks’ memoir *The Center Cannot Hold* and Jamison’s memoir *An Unquiet Mind* balance between these two perspectives. Perhaps because of their intimate understanding of the struggle from both angles, they avoid making their illness a symbol and instead show its realities. Their descriptions balance between personal narrative and practical advice. Critics look to their blend of psychological information and personal narrative as an introduction to identity theory. Serife Tekin shows how their writing mirrors the trend of modern self-conceptualization. He notes the shift in defining the self from “an independently existing metaphysical entity waiting to be discovered through self-knowledge and self-understanding” to “what constitutes the self, i.e., the social and cultural factors that contribute to one’s traits and comprise their identity” (357-358). These memoirs enable us to see the multiplicity of factors involved in formation of selfhood, especially when dealing with the complications of mental illness.

While the work done by memoirists describing their own experiences with mental illness has been recognized as valuable, we need to extend greater value to memoirs by their family

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\(^2\) Some of these complications come in the form of stigma and misinformation. As Hinshaw remarks, “Even today, despite our apparently more open and progressive era, serious forms of mental illness are akin to the leprosy of earlier eras, eliciting extremely high levels of shame and disgrace” (6).

\(^3\) See Elyn R. Saks’ memoir *The Center Cannot Hold* and Kay R. Jamison’s memoir *An Unquiet Mind*
members. Especially for family members, finding support and understanding in their role as caregivers for their mentally ill relatives becomes essential.  

Elizabeth Young points out how memoir can rewrite the social constructions of mental illness:

> The dominant cultural interpretation of mental illness focuses on intransigent exclusion and loss due to personal weakness, and indeed for many people who have internalized these cultural values (consciously or not), the diagnosis of a mental illness is a terrifying doom. In the memoirs of mental illness, however, we see a different plot emerge as the writers describe their experiences in ways that show them confronting and resisting the dominant story, and ultimately offering a new narrative of empowerment. (64)

One of the major issues involved in portraying the mentally ill is that there must be a break from the illness to write.

Both Saks and Jamison write their memoirs looking backward at their times of intense struggle. But as Blew and Holley point out in their memoirs, sometimes the mental illness does not have a solution, and treatments seem to fail time and time again. In reality, even family members writing memoirs about a relative still need some kind of reprieve to write about their experiences. Again, the issue is that there seems to be no moment of relief because the responsibilities seem never to end. Identity theory clarifies what the family’s difficulty is by differentiating what kind of role they are taking on. Both Blew and Holley are somewhat forced into their role as caregiver. As theorist Thoits argues, “Obligatory identities are more compelling and, when taken on, are difficult to exit” (qtd. In Burke and Stets 146). Because they are part of

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4 A study done by Abraham and Stein shows that on some levels “having a mother with mental illness was associated with higher levels of psychological symptoms and lower levels of psychological well-being” (607). Their study emphasizes how mental illness affects a large circle of relationships.
the family by birth, their relationship is not simply voluntary but part of their familial responsibility.

Perhaps because of their personal experiences with a mentally ill family member, Blew and Holley become guides through the process of recognizing what it means to be a caregiver. Because the care they give comes from a foundation of love, they want to be involved in their relative’s care but encounter “some unexpected consequences: giving up work leading to financial hardship and struggling to cope with their own feelings” (Rowe 73). Once involved in such a high-demand relationship, Blew and Holley find it almost impossible to leave it, but they use this sense of frustration to help others. Reviews for *My Mother’s Keeper* include actual resource information for struggling families, and the memoir itself adds introductory material directed toward ignorant readers. Antoinette Brinkman describes this shift toward educational writing in her review of the book: “Formerly blamed for the illness, the families of schizophrenics are now more likely to be viewed as facilitators of treatment and healing” (101). Both memoirists do exactly as Brinkman writes, showing how as family members they had to transition from a position of being cared for to a position of caring for others.

When physically and emotionally distanced from her aunt, Blew can see the “funny turn”—when Imogene forgets how to make oatmeal—as simply a mistake (Blew 14). Blew realizes that her aunt is not perfect, but she also sees Imogene in an idealistic light. Imogene’s cluttered home is “a place of peace and squalor [she] can always come back to” (6). The context of Blew’s own life at this moment suggests that she feels a need for comfort, but instead finds physical and mental disarray. Any early descriptions of Imogene focus on her nature as “stout and vigorous” (2). Notice how Blew writes about her beloved Auntie. She sees herself as a child

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5 Having support in caretaking becomes increasingly important when there are “1.5 million people caring for a relative or friend with a mental health problem or dementia” (Rose 71).
around her aunt, the kind of relationship where she is loved and taken care of. By starting the memoir with this image, Blew clearly defines the expected roles. Her aunt is the one who cares for others. Already, the way Blew denies her aunt’s worsening condition signals how dramatic the shift toward being a caretaker will be when it ultimately happens.

“I’m going to sell my place,” Imogene writes to her niece (Blew 8).

“Why?” Blew writes back (8). In the time before the forgetfulness took hold of Imogene’s life, she was strong and independent. Blew cannot understand why she would give that up. But at the time Blew does not know what Imogene knows, that something is wrong and she needs help. In her dilemma she turns only tentatively to her closest relative. By the time Blew catches on to the need, it already seems too late. Blew recounts her interpretations of the clues in hindsight. She writes, “[I] would ask myself savagely again and again in the course of the next year: Why? The woman is seventy-nine years old, that’s why! Did you think that, because you’re still a fool and still need her, she was never going to age?” (8). In reality, Blew realizes that her aunt Imogene needs much more than she originally thought. Imogene not only sells her house but moves into a house next door to Blew. Although Blew is eager to help the aunt she has loved for years, the responsibility is already overwhelming her.

For Blew, the realization that Imogene’s dementia is here to stay is an important shift. The earlier examples of Imogene’s confusion took place far away physically and emotionally. When she heard about trouble last autumn, Blew could pass the events off as unrealistic or temporary. Only when her aunt is having episodes of confusion right in front of her does she realize the gravity of the situation. Part of what makes understanding mental illness so difficult is the attitude of distancing oneself from its realities. Kanost points out that far too often the
ubiquitous use of madness as a metaphor for experiences of oppression and confinement, famously exemplified by the Madwoman in the Attic, empties mental illness experiences of any meaning in their own right and equates them with silence and powerlessness. (Kanost 104)

Indeed, Gilbert and Gubar’s significant text on the metaphors of mental illness shows how historically authors used madness to symbolize women’s oppression and rebellion. Though Charlotte Brontë’s Jane Eyre and Charlotte Perkins Gilman’s “The Yellow Wallpaper” depict madness and its devastating effects, they also refuse the characters agency and depict their family as heartless caregivers.

Although Blew’s new role takes her by surprise, Holley has been preparing for the transition to caregiver all her life. Holley constantly looks backward and forward, seeing how the past she knew would affect the future she would live. She muses on her childhood: “I needed to learn responsibility, self-reliance. I would need those qualities in the years to come, when my mother came back into my life” (Holley 56). Yet even with the years of preparation, Holley still struggles when adapting to the role reversal. When they go out together, Dawn treats her daughter as “a sister, a chum” (242). On Holley’s end, her emotions span from bitter disappointment that she was robbed of a mother to powerful compassion for the woman who bore her. She must constantly remind herself of the relationship’s origins:

That’s my mother, I reminded myself. A feeling that’s difficult to describe—of disbelief, of love and sadness—washed over me. I wanted to take her into my arms and comfort her like a baby. I felt an overwhelming need to protect her—from the world, from her illness, from the people sitting around us who just didn’t understand. (242)
Blew and Holley seem to find their present selves in a place that precariously balances the pressure of caring for their loved one with their day-to-day life. They are not alone in their struggle. In a study on family caretakers of the mentally ill, Hedelin found, “Love, compassion or sense of duty combined with a changeable situation made it difficult to find a durable balance” (105). At points it seems as though both authors are, as Blew writes, trying to “get us all back to normal,” but that normal is lost (39). Instead, family and friends are left gathering the pieces of narrative to show that their loved one’s life meant something and still means something. Not only is the responsibility left to families to share their side of the stories, but since the 1970’s families are increasingly in situations just like Blew and Holley, as caregivers. Having mentally ill family members at home means there are more options for their care, but it also brings “more ambivalence and difficulties, making modern health care largely dependent upon informal carers to shoulder the psychosocial burden of care” (Rowe 70). When the responsibility of the family is increased, stress for the family also increases. With 1.5 million people caring for others with mental illness or dementia in the United States alone, learning to cope with the harsh realities is a necessity.

The beginning stages of the memoirs focus on making that switch from mental illness as something far away, almost metaphorical, to something tangible. At one point, Holley points out how Dawn must have just been on a higher plane than the world’s reality. Part of the value of memoir is that Blew and Holley begin here, but they do not remain in the symbolic realm. They are able to move through it to the difficult and very real experiences of caring for a family member.

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6 In the 70’s, horrific descriptions of institutions, improved medical treatment for mental illness, and other factors contributed to widespread deinstitutionalization. Over the next decade, facilities shut down and doctors recommended inclusion instead of exclusion from community and family. Instead of being physically isolated from their families, the mentally ill were supposed to be fully integrated with society.
Seeking Understanding in the Past

After the initial shock of realizing that mental illness is here to stay and they will be responsible for their family members, Blew and Holley both make the same move. They begin delving into the past. Part of the reason they act the same way may be because the new role now changes their identity. Within identity theory this part of identity is called relational, meaning the way we define ourselves by our roles with other people. Theorists Chen, Boucher, and Kraus write that “relational selves are composed of people's stored knowledge about the self in the context of their relationships with significant others that is distinct from, but linked in memory to, people's stored knowledge about their significant others" (150). When Blew and Holley realize that they now have the role of caregiver, they seek to understand what that entails. Blew even asks herself, “what, if anything, is my plain duty?” (Blew 10).

The term caregiver implies much more than just physical care. It extends to emotional care as well. The study of identity includes “not only ‘who you think you are’…but also ‘who you act as being’ in interpersonal and intergroup interactions--and the social recognition or otherwise that these actions receive from other individuals or groups” (Vignoles, Schwartz, and Luyckx 2). So in the very act of becoming caretakers, Holley and Blew change the way they perceive themselves and the way they are perceived by society. The genre of memoir is at root a written story composed from the themes and the fragments of life as the writer perceives them. So as Blew and Holley expand their identities to caregivers, their memoir expands to include that identity as well. At the same time they are trying to understand and make meaning of the snippets of information they have on their role, they are also risking much. Memoirist Judith Barrington writes, “to speak honestly about family and community is to step way out of line, to risk accusations of betrayal, and to shoulder the burden of being the one who blows the whistle
on the myths that families and communities create to protect themselves from painful truths” (12). These memoirs do function as a sort of exposé on the past that was previously hidden, but they also contribute to the myths.

The search for information about Dawn is a painful process for Holley but one she is always engaged in. For Holley, her mother was a mystery. When she moves in with her aging great-aunt, she is discouraged from speaking of Dawn too much: “to ask would mean [she] didn’t appreciate Auntie” (Holley 146). Yet each time her grandmother calls to talk to Auntie, Holley eavesdrops, desperate for any news of her absent mother. She writes, “once I realized it was Mama calling, I tuned in. I knew I would be hearing about my mother. Much of what I knew about her, I learned from Auntie’s end of their long conversations” (Holley 132). But as much as she wants to understand the mystery, she also understands the trouble surrounding her mother, the burden she is to others.

In one particular instance Holley overhears a conversation between an old family friend and Auntie. The friend tries to convince Aunt Elsa to just tell Holley that her mother is dead, but Holley realizes that someday she will be in charge of her mother and she must be prepared for that reality. Holley’s life is full of hearing others talk about her mother in varying contexts. Though these moments cause her pain, they also help her come closer to knowing who Dawn really is. Ultimately, some see Dawn as the woman selling flowers on the street, or the “stinky lady,” or even “Piss Lady” (Holley 281). Later, Holley gains access to doctor’s records. The records tell of distanced, medical analyses of Dawn. Holley’s findings place her on center stage at times. The doctor’s note reads, “it seems that her present illness revolves in a large part around a five-year-old daughter” (Holley 235). Holley’s response is anger, not at her own presence, nor the implied blame, but at the doctor’s attempts to sum up Dawn in a medical report.
Although Blew initially feels guilty snooping through her still-living aunt’s journals and personal mementos, “like a voyeur, a prowler, a vandal of my aunt’s secrets,” she still moves forward because the need to understand overwhelms the fear of what she will find (Blew 28). Continuing her journey to understanding, Blew must rely on the snippets of Imogene’s life found in these diary entries and in her vague memories. She likens her present-day search to her childhood habit of listening to the women talk. She writes, “No story is ever the whole story. When I was a child I sometimes listened to the women’s bitten-off conversations” (151). She desperately tries to see how Imogene could have become so different from her old self:

It may be that the disintegration of the brain is a mechanical process, a whirring of broken film on a spool that throws one image after another on a screen in split-second random flashes. Can one flash matter more than another? The bay horse Dolly, the spilled water, the name of the man? Continuity has been disrupted, arrangement seems accidental. With the absence of any sustaining narrative, with the loss of the story by which my aunt constructed herself and assigned a shape to her life, those ragtag-and-bobtail fragments retain only the meaning that I might impose upon them. And yet I keep looking for clues. (Blew 162)

No longer is Blew cautious in her search. She anxiously combs through years of diary entries for clues that might jog her aunt’s memory and give them more of the story than the three-line-a-day the diaries promise. Blew’s lifetime of understanding Imogene is seemingly wiped away with the realizations of a few journals. Of course Imogene is still her beloved aunt, but Blew recognizes “the four-year-old in the snapshot with her stomach thrust out and her face inscrutable. But the vulnerable young woman, caught unawares in her own secret pages, who is she?” (Blew 165). So she continues searching.
As Blew and Holley gain understanding of the near past and move even further back, they are constantly rethinking the way things were and the stories told. Part of their findings shows the disparity between the pasts they would like to imagine and the past as history. Instead of accepting only the historical past, both authors seek to use it for their own purposes. They see multiple layers of history: their personal memories, the memories of others, the documents and records, and the imagined histories. While seeking the past leads to more information and a better understanding of it, using the past helps struggling family members to shape their feelings about the present. Memoir lends itself to reconfiguring the past for presentation to others.

Both memoirs are filled with images or journal entries, not from their own history but from their family member’s. These images serve to set up a sort of legacy of mental illness rather than trying to pinpoint a specific moment when mental illness began. Blew’s way of describing the situation is in comparison: the strong, independent woman of the past with the needy Imogene of the present. When things are better, Blew describes her aunt as “almost like herself” (Blew 25). This present person cannot possibly be the ‘real’ thing.

Holley’s structure moves the reader toward the past as she would have us understand it. Interspersed in the chapters are pictures of her progenitors. Photographs of her mother abound, but photographs of other family members move even further back in time, black and white photos of serious ancestors involved in the work of building up the family name, settling in new places. Dawn Elgin greets us before the memoir even begins, smiling demurely from 1935. Eight photographs in total of Dawn pepper the pages. Of those, only one is recent or includes Holley at all. Instead, they stay in the distant past, speaking to better times before Dawn’s illness. Even the one photograph of Holley is of her turned away from the camera, locked into an embrace with Dawn. Here is the only glimmer of the present given. The light reflects off their hair, making
both figures glow idealistically. This photo of Dawn is very different than most written descriptions. Here Dawn looks fine, and their relationship looks like that of a typical mother and daughter. It comes near the end of the memoir, when the readers know better. Yet Holley’s image continues to pull us toward the still moments of life, the idealistic images. Only Dawn’s defacement of her own photograph shows the way time has passed and the person has faded. Her face is caught in the moment of performance, but a pen has scratched an all caps “HAHA” on her cheek. But neither of these images are Holley’s last. Instead she chooses the most ideal image of all: Dawn with her luxurious hair splayed, her perfect skin bared, and her eyes bright and laughing. The picture is titled “Stars in her eyes—Dawn, 1946” (Holley 352). Here is the image Holley wants readers to remember: her mother as the promising young singer, beautiful and passionate. This brief moment in history is Dawn the way Holley chooses to see her.

Neither writer can literally travel back in time, but their memoirs take a shift from the present moment to the past, to see how and why they are where they are. In some ways this move is part of the reaction to the culture surrounding mental illness, one which is filled with “research on the ‘schizophrenogenic mother; the mother who produces…’criminal’ or ‘neurotic’ children” (Chesler 109). In this climate of family blaming, the past may be the key to understanding what “caused” the mental illness, if such a thing could be tracked. Although both writers realize that there cannot possibly be a specific moment, there is still a tendency to try and understand.

Baumeister argues that trying to find yourself in the past is “an obsolete feature of identity” (6). Yet telling the story of the past seems to provide a form of comfort for both Blew and Holley. Chen, Boucher, and Kraus argue that we make meaning out of the things we discover about those we are in relationships with. And when we put stock into this kind of meaning, transference is more likely. Searching the past provides Blew and Holley with
“warehouses of knowledge about these important individuals, including beliefs about their physical and personality attributes, as well as their internal states, such as their thoughts and feelings” (Chen, Boucher, and Kraus 153). So the search does matter because it provides a hope to understand who Imogene and Dawn are and were.

McAdams calls this search for understanding a formation of “narrative identity,” where a person tries to make sense of a life through “selective reconstruction” (99). In other words, Blew and Holley do not just piece together the past, they alter it in the telling to try to understand events which may have seemed disconnected. From early on Holley sets up her family as different, but not in an altogether negative way. Her grandparents lived in the same sort of fairy realm as her mother, though they did not get lost in it. As she writes, “Respectability was not something Mama worried about. She was bright and quick and had never lost that childlike fascination with the strange and mysterious” (Holley 22). With her description, Holley in some ways sets us up for assuming the lifestyle at home was what led her mother, Dawn, over the edge of madness. But when Holley examines deeper, she finds that theory falls apart like so many others. Much of the construction of the narrative invites us to make assumptions based on stigma, and then removes the foundation of those assumptions through deeper examination.

Tara Elgin Holley’s search for answers begins much earlier than Blew’s. Of course, her relationship was more tenuous from the beginning. Unlike Imogene, Holley’s mother was suffering from mental illness from her birth onward. The paranoid schizophrenia robbed Holley and her mother of their traditional relationship with each other early on. The memoir’s beginning suggests when Holley first understood that she would have to find her mother. Probably one of her first memories is playing hide-and-seek in a park. Only, instead of playing the game,
Holley’s mother just disappears. She reflects, “In a way, my search for Dawn, my mother, began that day and has never really ended” (Holley 18).

As much as Holley is seeking to understand the past, she is also interested in interpreting it. She actively takes part in the past, even the past where she was too young to remember or had not yet been born in. As a young child she sees her mother as a sort of fairy tale character: “For me, my mother was more like the fairies who attended Sleeping Beauty; she drifted in and out of my life” (Holley 17). While this image is generally positive, it hints at what Holley realizes later in life, that her mother was also as fickle and absent as those fairies. The sense of the make-believe as reality comes not only from Dawn but from Holley’s grandmother, Mama. “Mama believed in fairies,” Holley tells us (Holley 22). It wasn’t just that Holley sees her mother as a sort of fairy, Dawn’s own parents see her in this way.

At points Holley can hold on to the fairy tale she establishes. She carefully constructs places and experiences where Dawn can be the star she once was. When she sings or plays the piano, the ‘old’ Dawn seems to reappear. Once an experimental drug brings Dawn into the daylight and Holley and her husband get to interact with Dawn in ways they never had before. But as the effects fade Holley is left to pick up the pieces of the failing image: “I would see my mother in that dark, smelly apartment, my mother alone with her music, alone with the voices that did not sing. The fantasy became more and more difficult to conjure up” (Holley 164). The play with dark and light reflects the effort to bring Dawn and Holley’s story into a narrative where happily ever after is possible. Holley sets up the happy narrative multiple times only to have it fall apart in her hands. Over time Holley’s hopes for Dawn change. Once she hoped for a return to normal life and having a mother to rely on; later Holley longs for her mother to have the chance to age in a retirement home with a piano, singing and playing for the other residents. Yet
she continues to hope, writing of the life that new treatments may bring to Dawn, one which allows her to escape to “the country whence the shadows fall” (MacDonald qtd. in Holley 12).

Holley moves back and forth between presenting pictures of happiness and loss. Later in the memoir she ponders on the reunion she had always expected with her mother after years apart:

I had always known how our reunion would be, and I would feel a delicious thrill whenever I thought about it. I had fantasized for five years about this moment. She would be pretty, like Betty Lee, except her hair would be a deep golden, like honey…She would take me back to Hollywood, and we would live happily ever after. (Holley 147)

This dream constructed from fairy tale hopes of youth, makes her reunion more disappointing than she could have realized. Instead of a beautiful woman, she finds an old woman, someone she cannot even recognize. Other relatives refuse the image completely, choosing to remember only the nostalgic ones. Holley’s Aunt Sally and Dawn’s closest childhood friend cannot bear to think of Dawn in the present tense. But Holley must face whatever images she finds because she is responsible for her mother. Although she hopes to be the one to “rescue my mother and lead her out of the darkness that kept her confused and off balance,” Holley’s hope is less plausible than she realized (Holley 165).

The kinds of dreams Holley holds show how long she has struggled with a relationship to her mother. Childhood fantasies are remembered and a workable treatment sometimes seems possible. Balsamroot holds an entirely different set of fantasies. Unlike Holley, Blew cannot hope that Imogene will recover from her dementia, nor return to any semblance of independence. Yet Blew continues to conjure up explanations for the past with the stories she does have. She
begins with the ever-continuous idea that Imogene is strong and capable: “My aunt at this time is in her late fifties, stout and vigorous from years of all-weather gardening. Nothing ever fazes her” (Blew 2). This image is the touchstone for Blew’s continued frustration with Imogene. If Imogene is all of these things, then who is the woman in Imogene’s body, confused, emotional, and completely dependent on Blew?

Part of the trouble arises with the gap between perceived history of identity and real history. Even as things are falling apart, Blew refuses to see the situation as permanent. Once Imogene is out of her dilapidated home in Washington and closer, Blew remarks, “Now we can get Auntie moved into her own house, get us all back to normal” (Blew 39). Only there will be no more normal for Imogene or Blew. As discussed earlier, Blew then makes the move backward in history, searching for clues to her Aunt’s life story, the one that is slowly being stripped away and lost.

Like Holley, Blew also uses a picture to lead us to the image she wants us to see of Imogene. The memoir’s cover features an old black and white photo of Imogene with her horse and dog. Here she is not young and beautiful, but she is capable. She expertly holds the horse’s head still for the photo. It is the precise image Blew would hold from her own childhood with her beloved aunt. In the same way, Holley’s childhood becomes the best time, filled with the most ideal memories, even if those memories are jaded by nostalgia. Blew’s search takes on new meaning as she finds the intersection of her own memory, family members’ memories, and the diary Imogene kept for almost fifty years. Blew realizes that she has been filling in her aunt's memories from her own, “I wonder what I do know, and how much of that is my own fiction, and how much was hers” (Blew 126). Immediately after this realization, Blew begins “I now
believe” (126). She has seen that she must move into the realm of belief and freely admits to doing so.

With the shift to reflection, the memoir becomes more personal than before. Blew speaks to Imogene through its pages directly, asking her, “Are you listening?” (Blew 93). Several times these questions come up, as though Imogene is present in writing for Blew and Blew is present in Imogene’s writings. Unlike Holley’s joy-filled musings on her mother’s life before illness, Blew’s storytelling takes a different form. She is constantly filling in for the false sense of cheeriness she had previously associated with her aunt. The primary target for Blew’s musings is the mysterious relationship between Imogene and a man named Lud. He was absent from Blew’s former understanding of her aunt. Only when the dementia began throwing Imogene backward in time did his name come up. With the half stories of the diary, Blew not only pulls pieces together, but interprets them into the kind of narrative that would match her own life.

These clues are what make up Holley’s understanding of her mother and Blew’s now greater understanding of Imogene. They seek the understanding not to just see what the past held, but who Imogene and Dawn were and are. For both of them the past promises answers that the disintegrating mind of their loved one cannot provide. Neither doctor reports nor other family members seem to understand the full story. So as the caretakers, they must be the ones to seek and discover the truth of the past. Through their search they become the experts on the lives of the ill and the retainers of who they were then and are now.

Losing Self

The story of Lud and Imogene is one which pulls Blew deeper into the journals and reconstructed narrative. In this section, the extent of her involvement in the story becomes clear to us as readers, though Blew still seems reluctant to admit her obsession with the past. Consider
how Blew presents the tale of these ill-fated lovers. Lud and Imogene were in love despite the protests of family. But the fairy tale is ruined again with Lud’s arrest for stealing a saddle. Without any further decision, or so it seems, he is cut off from Imogene’s life. Blew’s search in the diary turns up little else on him. Only by consulting other sources can she fill in more of the story. Even back then, Imogene did not pine publicly. Blew’s story follows her own memories of tragedy, of how a young woman became her “auntie.” She sees Imogene trying to move on, but failing to connect:

No feelings at all, perhaps. Except when she catches sight of the hulking dark figure at the other end of the street, the angle of his head and his big shoulders as familiar as the tips of her own fingers, the line of his back as he walks away. She feels sick. How could he—how can she—. (Blew 192)

Imogene’s life becomes Blew’s ground for reconstructive history; especially the more Imogene slips into the void of forgetfulness. She rewrites Imogene’s life as a sort of “alternate history” where she determines the details and the motivations (Blew 147). Sometimes Blew’s response is to add these alternate views to her own life narrative, but sometimes she feels the sting of exposing her aunt’s private life, even if the stories are not hers. Blew’s daughter Elizabeth joins in the search for Imogene’s history. There is a moment when we as readers are not sure who is responding to Elizabeth’s contribution to Lud’s story with “Now, leave those letters be. They’re not yours” (Blew 150). Was this someone Imogene or Blew herself?

Ultimately Blew’s connection to her aunt is made more complex by the alternate histories. Blew sees Imogene’s plight with rich images: “I imagine my aunt falling through the hole in her mind. Coming to consciousness again in another time and place, in the smell of alkali and sagebrush, with nowhere to get out of the sun, with no sense of future” (Blew 15). The sense
of Imogene’s loss is apparent to Blew, but there seems to be much more than a story of loss for Imogene. The twisting narratives sometimes blend Imogene’s story and Blew’s. The constant in both stories is Blew’s involvement in the storytelling. It matters to Blew that she is the new retainer of not only her aunt’s financial accounts but memories. She holds on to the things she knew and the things she is learning about Imogene. She becomes her defender at the same time she is forced to place Imogene in a care facility.

The transition from writing about Imogene (and Dawn) to writing from their perspective is subtle but important because “identity comprises not only ‘who you think you are,’ but also ‘who you act as being’” (Vignoles, Schwartz, and Luyckx 2). So at the same time Blew and Holley are searching the past for understanding as caretakers, they are taking on aspects of their loved one in trying to tell their story and hold on to their memories. Vignoles, Schwartz, and Luyckx continue their argument by pointing out that characteristics become part of identity when they are “interpreted and infused with personal and social meaning” (3). In the process of holding on to the past, Blew and Holley are integrating part of that past into their own identity.

The complexity of Blew’s relationship with Imogene and Holley’s with Dawn inevitably leads to a confusion of identity. Blew and Holley may have found the past, understood it, and begun to rewrite it, but in the process they have written themselves into it. And their characters, as often as not, are Dawn and Imogene. Their melding of experience shows what often happens when mental illness strikes. Family members become consumed with the effort it takes to care for the ill; sometimes time for self, even identity, is neglected and forgotten. Holley writes of her time in Europe, “No matter how far away I got from her, no matter how caught up in my music, my travels, or my various boyfriends, my mother was always lingering in the shadows of my
mind” (Holley 223). Her words are mirrored in Blew’s memoir as well. They feel lost in the enormity of the mental illness plaguing their family.

Blew sometimes counts her loss of self in hours, “trying for a total that will ease [her] conscience” (39). She can never find the right amount or even the answer to her question of how much is enough. She compares her experience to drowning but cannot back away from the feeling that she must do more. She finds others in similar situations: “I find plenty of folks who have coped willingly, gladly, for years. Sometimes with almost a competitive edge” (Blew 75). She then goes on to describe the incredible things these caregivers have done, finally coming to a defeatist attitude: “The problem Auntie and I have got here is me. I have never been worth a good goddamn at self-sacrifice” (75). Her frustrations are echoed by other caregivers as well. As one father says when interviewed, “You have no life. You only exist for the sake of the one who is ill” (Hedelin 102). Not only Blew contributes to the efforts to care for Imogene; Elizabeth and her new boyfriend step in. Blew’s young daughter Rachel must feel the effects of the time spent away from her. Blew reflects on the list of needs Imogene has:

My life has gradually become my aunt’s. I write the checks to pay her bills, often over her indignant protests, and I balance her checkbook and keep track of her bonds and when they need to be renewed, and her portfolio, and I chauffeur her to doctors, try to interpret for her, try to be my aunt’s memory—And yet, and yet. I know I’m doing very little when I think about what lies ahead. (Blew 55)

She is perfectly capable of seeing the unbalanced life she lives, but Blew still is lost.

What her memoir shows is more than the loss of time, energy, and money. The more Imogene falls away from the real world, the more Blew tries to fill in the space left behind. As the memoir progresses Blew begins to blur her personality with Imogene’s, her memories with
her dear Auntie’s. The memoir stops telling the story of Blew’s experience and moves into longer and longer quotations from Imogene’s diary. She begins with a day here and a line there, then whole weeks, almost months told from the brief lines written nightly. The story of Lud fills the memoir’s pages, told through Imogene or Blew. The line blurs and the sections Blew chooses to include seem to mirror Blew’s own moods: “where will I be in one month—next year?” (Imogene qtd. in Blew 169).

The earlier tale of seeing Lud’s figure, wondering “what would have been,” quickly shifts from Imogene to both of them, “If loss of feeling is the alternative to the agony of abandonment, who can blame us?” (Blew 192). Here we finally see how Blew and her aunt connect and the stories collide. It is the story of loss and numbness. Through Imogene’s life Blew hopes to understand what it means to feel or refuse to feel. Back and forth the story goes, from Imogene to Blew. She writes, “Lately, Imogene, I’ve had trouble concentrating on your story. I’ve got one of my own that’s clamoring for my attention” (Blew 160). So as much as Blew would like to stop telling Imogene’s story, she can’t. She is, for better or worse, the favorite niece and the family member Imogene trusted enough to tell about her first “funny” incident.

For much of the memoir the overlapping stories are merely crafted into the narrative subtly but persistently. The points where Blew clues us in bring back the sense of a storied life, for example, when she drives away from the nursing home or stops to consider how many hours she has spent taking care of Imogene. There the realization finally hits. Blew’s life is not just owned by Imogene, it has been overtaken. In realizing her loss, Blew accepts her responsibility toward Imogene. More than simply accepting her obligation, she moves toward accepting the reality of her aunt’s past and her future. It isn’t a pleasant sensation to be holding on to the memories and experiences of another, but when Blew realizes what she has taken on, she is able,
in some ways, to separate her own life from her aunt’s and let her aunt move “on her inward journey without me” (Blew 51).

Chen, Boucher, and Kraus claim that “the closer a relationship is, the more the relationship partner has been included in the self” (163). Blew’s close relationship with her aunt is the reason she is the caregiver to begin with, but her increased research into Imogene’s past only strengthens that bond. Holley not only becomes her mother but also other characters. At points she impersonates her readers, showing us how to interpret the life she’s lived. Other times she slips into the thoughts of other family members and even unknown neighbors and strangers on the street. Her whole life has been preparation for taking care of her mother, thus she is well prepared for the process of assuming her identity, memories and all. Yet Holley resists the charge to become the motherly figure, preferring instead to be her mother: “Dawn was the child, it seemed; I was her keeper. We both found it humiliating” (Holley 262). As much as she has been prepared for this task by her family, most especially her aging great-aunt Elsa, Holley still feels the frustration of giving up a normal young adult life to try and find answers to the decades old “problem” of Dawn.

In some ways Holley’s progression toward being her mother is backward. Her childhood is filled with references to Dawn. For her eighth birthday, she receives a phonograph and finds her mother’s old recordings: “Day after day, I played them. I put on my mother’s bright red dress, and I sang along with her” (Holley 57). For Holley, the need to know her mother is an obsession. Only her aunt’s strict insistence that she go outside and leave behind the records helps Holley break away. And insist she must, because Holley seems to be far too much like her mother as a child.
Holley is not the only one who struggles to separate from her mother’s memory. Aunt Elsa’s fierce discipline seems determined to eradicate any of Holley’s flighty tendencies. When Holley stands up and performs with the ease and grace typical of her mother, Aunt Elsa actually sees Dawn. Holley realizes years later, “Auntie wasn’t seeing me on that stage. She was seeing my mother, hungry for an audience’s adoration, caught up in the seductive lure of performance. She would not allow me to be seduced. I would have to be broken, disciplined” (Holley 49). That is the beginning of Holley’s break from her mother. At least, that is what she sees as her break.

Like Blew, Holley comes to own her mother’s story. Though she has no diary to reference, she also collects the stories. She asks her mother questions, even if the answers are unreliable. She reconstructs the pivotal moments of Dawn’s life in the memoir. They connect Holley’s childhood to her adult understanding of her mother’s illness. As she grows she sees herself as her mother and her mother as her own future: “We were separate, and yet the same” (Holley 168). The fear Holley has helps her separate her own identity from her mother’s. She writes of her slight differences in lifestyle. Instead of studying jazz music, she studies classical. Instead of singing in bars, she goes to Europe. Despite these differences, music continues to be the connection between Holley and Dawn. So Holley further separates her identity from her mother’s, gradually realizing her separate life and separate future.

Through all the surface separations, Holley is still aware of her place as a caretaker. Even though loss of identity is a risk, the equally demanding role of caregiver forces Holley and Blew back to the present time and time again. Burke and Stets argue that we are never really just one identity, but several (7). One of the major issues Blew and Holley face is the conflict between these identities. On the individual level, they both feel like they are losing themselves, becoming Dawn or Imogene. But on a whole different level, they never lose sight of who they are because
they are always part of the social group of ‘caregiver’ with the responsibilities attached to that role.

**Revising Identity**

What does happen to Blew and Holley by the end of their memoirs? Neither descends into a state of confusion and loss of self equal to what Imogene and Dawn experience. Theory, by its nature, does not give the end of the story. Both authors provide some kind of conclusion to their experiences as caregivers, even though their responsibilities continue. Gauntlett writes that the ending is where “the whole story can be viewed…which enables us to see the meaning of it all, the ‘point’ of the story” (167-168). In a nonfiction work the culmination of it all has to reflect reality in some sense. To escape the common stigmas of mental illness, there must be more to the narrative than a miraculous cure or a heartless desertion.

There are actually few happy endings looking back in both memoirs, but in each instance they are pivotal. Blew finds her moment of selfhood, oddly, when she is doing something she used to do with Imogene as a child, riding horses. But in this case she is with her own daughter Elizabeth. The final scene of the memoir is not just about Blew anymore. It is about the future of her life with her daughter. As they ride horses together, Blew is finally able to separate herself from her aunt. There, in the very act that she used to associate with Imogene, Blew feels like herself. And there is the conclusion, realizing that while she is still responsible for Imogene’s past, she has another role which focuses on the future, motherhood. Mary Clearman Blew’s interpretation of looking to the future centers on her daughters, Elizabeth and Rachel. Just as Blew has been taking on Imogene’s life story and habits, she sees her older daughter doing the same thing with her. “Is she trying to reprise a part of my life?” Blew asks herself (Blew 133).
After all, she and Elizabeth have not been close for years and suddenly she shows up. An unexpected pregnancy and vet school at the same time ring familiar in Blew’s ears to her own life. Yet, Blew sees how their relationship has a chance to be salvaged. She sees Auntie’s life disintegrating and her own identity in peril, but at the same time she seems to be gaining the relationship she never had with her daughter. There is so much time spent considering the past: the past as it affected the present, the might-have-beens and the happier moments. Ultimately, the parallels between the writer and the subject lead to the final questions. How are they alike and how are they different? Will that difference be enough to allow the writer to avoid sorrow? In Blew’s case, she also wonders if her own daughter is different enough to avoid both of their sorrows. Blew remembers the moments where she failed her daughter. After a tragic car accident years before, they speak. As Blew recounts, “what will not occur to me for another ten years, is that not once did I try to touch my daughter that night, nor she to touch me” (Blew 136). Making up for those moments is part of motivates Blew onward.

Near the end of the memoir, the intended reader suddenly changes. Blew stops speaking to Imogene and instead writes to her daughter. When she gives the final bits of Imogene’s love story with Lud, she simply adds, “And that’s it, Elizabeth. That’s all” (Blew 197). Just as we get pieces of Imogene’s life, Blew moves toward description of Elizabeth’s life and its new turns and twists. From the frustrations of taking care of Imogene and the personal trauma Blew experiences, she suddenly realizes, “Is this what I’m going to be able to salvage? Elizabeth and my being able to talk?” (Blew 211).

In the very act of writing the memoir, Blew is interpreting the world and her aunt’s life. Holley similarly looks for ways in which her life can be understood, in which she can be understood. Gauntlett argues “the world cannot be directly and instantly known and understood,
but must always be \textit{interpreted}” (166). Although they lose themselves in memory, in the
overwhelming role of caregiver, Blew and Holley also write from a space distanced enough that
they can actually achieve interpretation. By the end of the memoir, the stories they tell
demonstrate how “writing \textit{transforms} human cognition” (Rose 347). Through the story of the
past and the hope for the future they show their own capacity for hope.

Holley represents her own mother’s few moments of lucidity before the schizophrenia
takes hold. Dawn’s first fear is not the disease, but how it will affect the future. Her earliest letter
to the doctors pleads, “You have to tell me whether or not my illness is going to affect my baby”
(Holley 31). As the memoir progresses, it is easy to see that Holley does not have any indications
of mental illness. But her own realization of her escape from mental illness takes time. She
finally admits, “To imagine my mother as my future was almost more than I could bear” (Holley
173). At times the fear consumes Holley, keeping her from revealing her personal struggles to
others. She does not even reveal her mother’s condition to close friends for fear they will think
she is crazy as well. It is years before she can accept, “Whatever genetic roulette is involved in
schizophrenia, I knew I was not going to repeat my mother’s fate” (Holley 315). For most of the
memoir though, Holley is concerned with how she will take care of her mother. It is what she
spent her childhood preparing for.

Eventually, Dawn’s life evolves separately from Holley. Though Holley helps her, visits
her, and loves her, the real concern now is for the future. In the preface, Joe Holley writes that
before he married Tara Holley, he was afraid that some of their children might have the same
disease as Dawn. That fear kept him from building a relationship with Tara Elgin for a long time.
Even later Holley admits, “I know Joe has been concerned about a genetic factor, and I have
shared his concern,” because their daughter Kate bears a strong resemblance to her grandmother
Dawn (Holley 327). But having a daughter is what Holley finally realizes helps her become her own person fully: “Recalling those few years I had with my mother as a child, which were awakened by my connection to Kate, was enough to loosen the bonds of my over-identification with Dawn” (Holley 329). Through her own relationship with her daughter, Holley finds hope that they can both find themselves separate and whole, but still close to their mothers.

One of the major points of Burke and Stets’ writing is that identity roles become more or less prominent as other roles increase in priority. When Holley and Blew begin receiving more positive reinforcement from their role as mother than their role as caretaker, motherhood becomes more rewarding and thus more prominent. The role of caretaker does not go away, but for moments it takes a backseat to the natural hope for the future centered in the positive experiences they have with their children. Though their stories are vastly different, Blew and Holley find a similar way to cope with the trauma of caring for the mentally ill. Though they struggle to center themselves and to distinguish their own identity from their family members’, their connections to the past and the future place them on solid ground. Ultimately, it is through their relationships with their own children that they find themselves.

In these two memoirs we can find the essential movement away from generalizations and toward complex descriptions of mental illness. More than depicting mental illness, family members show the deep personal struggle associated with caring for and understanding their family member. Here is the struggle which holds widespread applicability. For as many people as there are in a family tree who experience mental distress, there are a dozen more who still want to be part of their loved one’s life. Writing memoir allows Blew and Holley to “make meaning of their suffering” (Young 67). Additionally, it gives us a chance to explore fears of duplicating their fate or losing family members to the void of psychosis. Young writes that one
of the major dangers in diagnosis is perpetuating the myth of “pervasive and permanent loss of self” (63). In writing down the history and character of their loved ones, families can retain the person they knew even in the struggle of the present and the seeming hopelessness of the future. At the root level it is the story of families. As the forward to *My Mother’s Keeper* states, “it is the story of mothers and daughters” (12).

In many ways the conclusions provided by Blew and Holley show understanding of the real situations caregivers find themselves in. Realistically, there is no ‘happily ever after’ as Holley may have hoped early on, but the lack of finality only increases the impact of the memoir. The story they choose to tell is not wrapped up in metaphor or lost in symbolism. They succeed at what Young calls “confronting and resisting the dominant story” (64). In this telling, they sometimes lose themselves and feel overwhelmed with their endless responsibilities. They also conclude not with triumph, but bittersweet hope in their own and their children’s future.
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