

By My Own Hand

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My father taught me the alphabet using a post–World War II Remington Rand Noiseless Typewriter, Series Seven. When I was four years old, my mother taught me how to read. I remember this now as I ride the train home to Washington, where that typewriter sits on a shelf next to my writing table.

As a child, I treasured the two mammoth dictionaries from our encyclopedia set. I used to run my fingers up and down the pages, searching for words. One quiet day—perhaps it was a Saturday when my brother was out with his friends and Mom was taking a nap after her night shift at St. Clare’s Hospital—I came across the word melancholy. I don’t remember now which word I had been seeking originally, but melancholy grabbed me and I stayed there in its claw.

I knew melancholy. I knew that it was mine. I was a quiet, brooding child. As a toddler I’d apparently been a terror, willful and determined. Later in childhood, though, I lost that spunk, growing increasingly insular, inhibited, and shy. My teachers attached cautious notes to my report cards saying that I tended to cry, that I often wrote stories about my mother. There was a disconnect, an uneasiness about me. I never quite felt confident unless I was home alone with my mother reading a book. At that moment, on that Saturday afternoon, my finger upon the fine print of the dictionary, I concluded that I must have melancholy, a weakness that made me feel disjointed and sadly alone.

Forty years later, I sit on the train and read the word *melancholia* in William Styron’s *Darkness Visible: A Memoir of Madness*. Melancholy—from the Greek *melas* meaning black and *cholē*, bile. Depression feels like all light is slowly siphoned. Seeing the word in Styron’s memoir I am reminded of it as an old friend, a comforter during a time when I did not know how to ask for comfort. Years later, melancholy created waves of mood and emotion like rough winds on the sea. It grew more sinister. Somewhere between my child self and adulthood, I became bipolar.

My first noticeable mood shifts occurred when I was in my early thirties. In a performance evaluation at work my boss suggested that my moods were unpredictable from one day to the next, that I might consider seeing a psychiatrist. I was incensed; there was absolutely nothing wrong with me. Weeks later I announced that I was going to London for the summer. Once there,

when someone asked me why I'd come, I answered that I was averting a nervous breakdown.

My mother's generation lumped all of these symptoms into a massive category called *nervous breakdown*, in which one lost the capacity to function or cope with the daily rigors and dalliances of life. It was a term used in hushed tones, genteelly, but the underlying judgment was that the sufferer was morally and mentally weak, to be pitied for her failures.

As someone with manic depression, I have cycled at rapid intervals throughout a year, a month, a week, or even a day. Sometimes it feels like a summer storm—bold changes in clouds and sky, black streaked with the fire of electricity. My rage can be as destructive as gale-force winds, uprooting relationships as cleanly as uprooting trees.

My first hospitalization was in autumn 1996, at age thirty-eight. Each of the five subsequent hospitalizations was also in autumn. The season in which the leaves dance like fire is, for me, the season of despair. When I seek words to describe the wonder that is autumn, sickness comes first to mind. All of my shame was borne in the coolness of autumn.

I've read accounts of the glorious highs that manic depressives are not wont to surrender, the exhilarating hypomanic feelings of joy and invincibility, and I wonder: did I have that? Before my diagnosis there were certainly periods of joy: I remember feeling strong after running five miles along the Seine, self-righteous after two hours of high-impact aerobics. I rewarded myself by buying six pairs of Jones New York wool slacks—red and mint green among them—at \$120 each. Was that manic behavior or simply a well-earned gift to myself?

And what of the sex? Were those many lovers an example of impaired judgment or the liberating byproduct of the sexual revolution? Was I just single and adventurous when I vacationed on Caribbean islands in winter, the European continent in spring, or was I unable to hold a job? Was it a healthy creative whim to spontaneously buy a house while walking down the street on a Sunday afternoon or was it the height of fiscal irresponsibility?

If that was all disease, what would my life have been like if I had been "healthy?" Which life would I prefer? Kay Redfield Jamison, in *An Unquiet Mind*, writes about living more deeply when manic, feeling things more intensely, having more experiences, loving more and being more loved, laughing more often and harder. I have often said this myself, crediting the disease with my desire to live a life of intellectual curiosity and reflection. But couldn't my self-searching, my intensity, be who I am at my core?

I'll never know. I wasn't offered a choice.

My grandfather was 67 years old when he parked his car on the tracks of a freight train. Someone saw him and called ahead. At the time I just thought he

was drunk; I didn't think "suicide averted." Several months later, he shot himself through the heart with a hunting rifle. Suicide "successful." The stainless steel temporary plaque that marked his grave is now in my kitchen: Charlie Marable, 1913–1980. Its stake is slipped through a hole in the top of a cabinet so that the marker sits high above everything else in the apartment. Protecting it is a tin angel handmade and painted in Mexico, a brown face with wings open wide, a broken halo on her head. Never did I ask what I could have done to save him even though I had seen him just weeks before his death.

But I do know the all-consuming, unquenchable fire he must have experienced. I know that, inconceivable as it may be to loved ones who believe that their love alone is enough to save someone, sometimes a person decides that the stopping of the pain must be permanent. In this situation, suicide is not a selfish, deliberate act of cruelty against loved ones; it is a frantic final act against continued anguish. If there is a rational thought in choosing suicide, it is that the sufferer hasn't the strength to live through that agony again, much in the way that a cancer patient may not be able to withstand another bout of chemotherapy. Mental anguish can be as unruly as any terminal illness. It can, unfortunately, orchestrate its own end.

As I ride home after having visited my mother and brother in Schenectady for Christmas, I put down Styron's memoir to listen to Donny Hathaway's elegy, "A Song for You." Hathaway was a successful suicide, having jumped fifteen floors from New York's Essex House Hotel. During this visit my mother placed on the middle finger of my left hand her wedding band, fifty years old, and told me never to take it off. She did this as we sat on the edge of her bed as we always do when I come. This time she talked about my father, as I rifled through her dresser drawers, her jewelry, her perfumes. My father is dead three years now from strokes due to alcoholism, brought on, I believe, by manic depression. The train rumbles. I look at the ring on my finger while listening to "A Song for You" and I think of my father and me.

Five weeks ago my mother sent, via my cousin Annie, a collection of items for my sparse kitchen. Circulon pots complete with Dutch oven directly from Macy's Department Store. A full set of Rubbermaid storage ware. And my father's favorite carving knife, the one he used every Thanksgiving. I recognized it immediately—wooden handle, blade curved like a quarter moon, perfect point at the tip. The knife brought back warm memories of my father, but I didn't keep it. I explained to Annie why I kept no sharp knives in my kitchen, only butter knives and the single steak knife I took from my brother so that I could cut boneless, skinless, chicken breasts.

I told this to Annie, and she told my mother. My mother asked Annie to keep the knife for herself. I realize that if I truly wished to slice myself I could find a way. Still, I was greatly relieved that my mother understood. I did not

want it to be with my father's special carving knife that I did an awful thing. And of course, I felt sad for my mother that she even had to concern herself. When I stand unaccompanied on the platform of the subway, I always stand in the center near a pole. Each time the subway cars approach, I envision myself sliced below the wheels. When I approach the open doors, I wonder if my foot will get stuck in the space between the train and the platform, and the train will take off, crushing me. These thoughts come to me every single time I face a train. I assumed that everyone had similar thoughts until I noticed the ease with which others stand on the edge of the train platform, or ride a bike through traffic, or confront any number of dangerous things. I notice their sense of power, of invincibility, and realize that I am frightened of nearly everything. I see in any situation a way I might die. These are not moments of "suicidal ideation;" these are regular daily moments, the fabric of my normal existence. I never feel completely safe.

The current situation in which I find myself is not atypical for someone with manic depression. My livelihood is lost; I can no longer take a position commensurate with experience or intellect as I cannot abide the accompanying stress. My home was foreclosed. Diminished are my perceptions of myself and the value of my life. I struggle daily against feelings of debilitating demoralization. Each time I turn the key to my subsidized housing unit I feel a twinge of disgust in myself and wonder if this pain should be terminated. It may sound to you that I am advocating the right to suicide simply because my pockets are empty. Of course not. I am saying to you that manic depression has the power to deplete one of a life worth living, a substantive, independent, emotionally healthy, companionable, intelligent adult life.

I say this and yet I voluntarily make repeated trips to the hospital. A good hospital can bring near-instant, if temporary, relief. When I enter a facility it is because the pain has broken through the medication barriers or I have opened the barriers myself by not taking medications. A suicidal or homicidal frenzy is flooding through and I need to be medicated to a malfunctioning numbness. Always I look forward to the sleep and the dulling of the acute pain. In the hospital, at least for the moment, I feel safe from myself. But no amount of medication, therapy, or good intentions can undo the permanent damages of the disease. At its worst, manic depression is hell, and each time I cycle through an episode, a few more of life's pleasures are stripped away. One should only be forced to pass through hell once. Twice maximum. At 47, I have been to its depths a definitive six times. While I can just barely reconcile this current, abridged life, I am not willing to concede another inch. It hardly seems worth it.

I have no grand wish for death. I do not view suicide as a desire to end life or a dramatic way to go down in flames. Rather, it is a tool in my possession—the only one, really—that offers a permanent end to my pain. When I have lost enough of myself to this disease as to become unrecognizable even to me, I will stop. I will go no further. That, I tell myself, is my earned choice. ☞