

Momma and the Meaning of Life

Fiction And Non-Fiction Short Stories by Irvin Yalom

By

Daniel J. Tomasulo, Associate Professor of Psychology.

“Of all the world’s wonders, which is the most wonderful?
That no man, though he sees others dying all around him,
believes that he himself will die.”

-Yudhishtara answers Dharma,
from “The Mahabharata”

“One doesn’t do existential therapy as a freestanding separate
theory; rather it informs your approach to such issues as death,
which many therapists tend to shy away from”

-Irvin Yalom
(quoted by Brainard, 1992)

"Tragedy is when I cut my finger. Comedy is when you fall
down an open manhole cover and die."

- Mel Brooks

(quoted in Kaplan, 2001)

The existentialists used fictional stories and plays to identify and portray the issues central to existence. Irvin Yalom, the world-renowned existential psychiatrist and group psychotherapist, has continued this trend by integrating non-fiction storytelling into the genre of self-help literature. Following the success of his first non-fiction short story collection, *Love's Executioner* (1989), Yalom wrote, *Momma and the Meaning of Life* (1999), making use of fiction and non-fiction stories together to portray life's challenges and perplexities.

The book (Yalom, 1999) begins with the title piece where Yalom depicts a personal reflection of his relationship with his mother. Although she has been dead for years, he describes a recurring dream and encounter with her to ask her why she is disturbing him with this dream. This reflection offers the interpersonal dynamics between the author and his mother as the foundation for personal insight, which can then be extrapolated by the reader for application to his or her own life. This style is intriguing in the hands of a skilled, sensitive therapist because it provides for the weaving of flashback, dream sequencing, personal reflection and reframing, as well as empathic understanding of others. The use of self-reflection as a literary tool for both self-expression and teaching is a tricky path to navigate; yet Yalom does this beautifully. He

draws the reader in with a dream sequence image of him on his deathbed surrounded by what he refers to as “his entrails of death.” The voice is strong because he straddles the line between a genuine confusion and soul searching, yet with definitive analysis.

In his deathbed dream he darts to a carnival ride “The House of Horrors” and waves to his mother as he prepares to ride off. “How’d I do Momma? How’d I do?” is his parting question to her. Awakening from the dream he considers what the dream means for him, and questions why, despite his stature and prominence, does he still long for his mother’s approval. The question demonstrates both his genuine desire to understand, while resenting having the recurring dream in the first place. In the fulcrum point of the piece he notes, “I am a writer, and Momma can't read. Still I turn to her for the meaning of my life’s work” (Yalom, 1999, p5).

You gotta love this guy.

Yalom is a clinical researcher in group therapy, teacher, and writer. I share these vocations with him, and see him as a magnificent role model and the epitome of my aspirations. After ten years of therapy and supervision wrestling with the bug-a-boos of my own childhood I get a chance to read about the unresolved issues that haunt the person at the top of my field. In short he gives credence to the fact that the challenge for any therapist is to better understand the influences, conflicts, and motives that propel us, particularly the need for maternal approval. Yalom has discovered and revealed for his readers what the writer Thom Gunn, already knows: “The longer people are dead, the more our relationship with them changes.”

He also says things that therapists usually won't say about what they are thinking and feeling. The second perspective of story telling Yalom (1999) brings to this book is the profound learning he experiences from one of his patients. In the story *Travels with Paula*, he describes the emotionally intimate relationship he has with a dying patient. Eventually this relationship becomes a springboard to understanding his status as a clinical researcher and the development of a group treatment model for cancer patients. Finally he describes his failure to treat her as a person, and resorts to "handling" her as a patient who has become paranoid. This account is moving in many ways because he begins with his skepticism towards her way of being. But she is different in so many ways that Yalom is jarred by her presence, and he finds himself whirling in the murky border between patient and therapist, researcher and friend.

Although only the mildest of humor graces this piece, it help to establish who he was, and who he becomes:

"Before Paula, no one would have been quicker to ridicule the flaky California landscape. The new age horizon went on forever: Tarot, I Ching, body work, reincarnation, Sufi, channeling, astrology, numerology, acupuncture, scientology, Rolfing, holotropic breathing, past-lives therapy. People have always needed these pathetic beliefs, I used to think. They answer a deep longing, and some people are too weak to stand alone. Let them have their fairy tales, poor children! Now I express my opinions more gently. Softer phrases now come to my lips: "Who can tell?" "Maybe?" "Life is complex and unknowable." (p.25)

The lighter way of expressing his shift in perspective is valuable. This is a dark piece about death, betrayal, and the disintegration of a relationship. The lighter approach gives us the understanding of Yalom's change in perspective, yet does this with a sense of bemusement. This is not the case with most of his narrative, nor should it be. It is the

use of a lighter style that highlights and dramatizes other sections. Here Yalom (1999) refers to the shift in him without levity, because it would not be appropriate.

“I have always relished women with firm, graceful bodies, and a readily apparent sensuality. Yet a curious thing happened to me the first time I met Paula: I found her beautiful and fell in love with her.

We met weekly for a few months in an irregular contractual arrangement. “Psychotherapy,” an observer might have said, for I entered her in my professional appointment book and she sat in the patient’s chair for the ritual fifty minutes. Yet our roles were always blurred. The question of fees, for example, never arose. From the very beginning I knew this was no ordinary professional contract and found myself reluctant to mention money in her presence- it would have been vulgar. And not only money but other such tasteless issues as carnality, marital adjustment, or social relationships.

Life, death, spirituality, peace, transcendence: those were the topics we discussed; those were Paula’s only concerns. Mostly we talked about death. (p18-19)

Later, as we learn more of his attraction and appreciation for Paula he reveals the thread that allows the story to follow the first.

“I envied her son. Did he realize how blessed he was? How I longed to be the son of such a mother.” (p25)

Trying to grapple with his relationship with his mother is the tone laid out in the title story. It is reintroduced here through his relationship with a patient. This subtle use of thematic linkage allows each story to be simultaneously similar and different. In doing so Yalom allows the reader to view this issue at more than one level at a time.

As his relationship with Paula evolves the skepticism dissolves into recognition that her way offers a type of caring for others that is both effective and very different

from his own. Ultimately, he is in a double bind, not wanting to betray his supportive relationship with her, yet realizing she has become paranoid (most likely) as a result of her cancer. Again, as in the first story, he will use a dream memory to link the personal and professional. Moving back and forth between the intra-psychic and interpersonal is skillfully done in both stories. The result is the author's self-examination gives us opportunity and reason to examine our own relationships through reflection.

Perhaps the most skillful blend of humor and profundity are drawn from a section near the end of the story. Here Yalom is feeling the sadness of loss of his other patients to cancer and reconnects with Paula.

And all during the tolling I cried. I cried so hard that one of the nuns heard me, came into my room, put her arms around me, and held me.

“Irv, do you remember them? Do you remember Linda and Bunny-“

“And Eva and Lily.” I felt my own tears coming on as I joined her in recalling the faces and the stories and the pain of our first group members.

“And Madeline and Gabby.”

“And Judy and Joan.”

“And Evelyn and Robin.”

“And Sal and Rob.”

Holding one another and rocking gently, Paula and I continued our duet, our dirge until we had inurned the names of twenty-one of our little family.

This is a holy moment, Irv,” she said, breaking away and looking into my eyes. “Can’t you feel the presence of their spirits?”

“I remember them so clearly, and I feel your presence, Paula. That’s holy enough for me.”

“Irv, I know you well. Mark my words-the day will come when you realize how religious you really are, But it is unfair trying to convert you while you are hungry. I’ll get lunch.” (Yalom, 1999, p.46)

The arc of this story, from the blurred distinction between patient and therapist, researcher and friend, teacher and student, is revisited throughout. Yalom wrestles with his own decisions of how he was with her, while realizing she had much to offer him in understanding himself. The story begins with her walking into his life, barely unannounced, and ends the same way. There is symmetry and balance to its presentation.

The third story, *Southern Comfort* is one of my favorites for several reasons. First, it describes inpatient group therapy with exacting detail and offers commentary on the gradual decline of psychiatric care in America as a result of inept management of the insurance industry. The first section of the story has a journalistic style to it. It is like a war correspondent writing about the war you were in, and writing about it in a way that allows you to relate. Michael Herr’s book *Dispatches* (1991) offers this type of stark recognitions. Those who served in Vietnam praised Herr’s book for “telling it like it was.” As a veteran of facilitating inpatient therapy groups I can attest to the fact that Yalom has captured exactly the clinical and administrative frustrations that come with this position.

Yalom’s first two stories used the author’s intra-psycho phenomena with his mother, then a powerful personal relationship with a loving patient to relay insight to the reader. In the first story Yalom is trying to better understand his relationship with his mother and, as he dialogues with her he comes to an awareness about her that has up to

that time had not been understood. In turn the insight gives the reader pause for thought in his or her own life, and the goal of self-reflection is achieved.

The second story moves the narrator from an intra-psychic battleground to the “I thou” encounter with a woman whom he felt so drawn to he declared: “...I longed to be the son of such a mother.” (Yalom, 1999, p25). This establishes a working theme for these initial stories of trying to understand the influence on one’s mother on one’s life. He wrestles with this first in his mind’s eye, then in recounting his relationship with Paula, sees the issues and relevance from another perspective. The third story becomes a variation on this theme, but not from intra psychic, or deep personal relationship. Yalom describes his work with inpatients as lasting only for the length of one group session. It is vastly different than on-going outpatient psychotherapy, and the focus is only on what is said and done during a lone meeting. This reasoning comes from the fact that with inpatient group therapy you can never be certain who will be able to attend, and who will have been discharged. The primary basis Yalom gives for this situation is the inept manner of the insurance company’s decision-making process for discharge. Yalom does not temper his disgust with the business and politics of mental health. He places blame and fault with HMO’s and Ronald Regan’s poor decisions as Governor of California for the mess in the mental healthy system. Through the use of this narrative style Yalom educates and informs us of the faulty democracy, but we become aware of this in a nearly undetected fashion as the facts are folded into the fabric of the story.

While the humor is sparse in this piece, one line establishes his orientation to this collection of people for the day’s group.

“Good God! It was going to be a long, long session.” (Yalom, p.62)

This backdrop sets the stage for the author, a white, Jewish, Ivy League psychiatrist, to relate to a black, female, psychiatric patient with paralyzed legs who scrapes away imaginary insects and speaks with a southern drawl. Yalom focuses on the group members and the reactions this woman has to others. As she sets her agenda for the group, the theme from preceding stories is established.

Magnolia put forth this agenda: “Ah’d like to learn to listen better in this group. Don’t you think dat would be a good thing, Doctah? Mah momma always tol’ me it was important to be a good listener.” (Yalom, 1999, p.62)

A few pages later this theme is cemented as Magnolia addresses the group, then

Yalom:

Thas mah bes’ medicine, Doctah,” Magnolia repeated, looking over at me. “You jes let me help out folks.”

For a few moments I couldn’t say a word. I felt entranced by Magnolia- by those wise eyes, that inviting smile, that boutenous lap. And those arms-just like my mother’s arms, with those generous folds of flesh cascading down to obscure her elbows. What would it like to be held, to be cradled in those pillowy chocolate arms? (Yalom, 1999, p.67)

The turning point in the story is when the author is able to use his feelings of being loved and held by this patient to give her a chance to reflect on her interaction with others. Yalom tells of his feelings, and then uses these feelings as an intervention.

Speaking to Magnolia he says:

“I was thinking how great it would be to be comforted by you all the time. I’d like that too. I’d love it. But then, when I thought more about it, I realized I’d never be able to repay your help, to help you, because you never complain; you never ask for anything. In fact,” I hesitated again, “*I’d never get to have the pleasure of offering you something.*”

“Ah never thought about it jes like that.” Magnolia nodded thoughtfully. Her smile had vanished.

“But maybe it’s true, isn’t it? Maybe what we ought to do here in this group is help you learn to complain. Maybe you need the experience of being listened to.”

“Mah momma always said I put myself last.”

“I don’t always agree with mothers. In fact I don’t *usually* agree with them, but in this case I think your mother was right. So why not practice complaining? Tell us, what hurts? What do you want to change about yourself?” (Yalom, 1999, p.70)

The stories have now progressed to Yalom being able to assimilate his feelings for his mother, while being able to use them in a one shot, one time encounter with a woman he barely knows. This powerful transition of the narrator in these stories may impact on the reader at multiple levels. Not only do you learn of the struggle Yalom has in sorting out his own needs, you see the struggle enacted through different people. First his mother, then Paula, then Magnolia. This progression, from undifferentiated self to a clearly defined self and other, may well be the sub-text of these stories.

In the fourth non-fiction story *Seven Advanced Lessons In The Therapy Of Grief* Yalom now faces a patient whose fierce independence and emotional needs challenge his abilities in a new way. He must confront and support, confront and nurture. This is the story of a female physician, Irene, who has lost her husband and struggles to find her identity after his death. The stages she goes through are not only about her developmental changes, but also about Yalom’s capacity to stand with her through this

ordeal. The trajectory of the four stories has moved from the intra-psychic, to the interpersonal, to the encounter with an individual within an institutional structure, and finally to independent interaction. These stories, in their order reflect developmental signposts in the progression from dependency to self-determination for both the narrator and the other. I think it is interesting that the order and content of these stories share a likeness to the developmental phases of Margaret Mahler's well-known stages of symbiosis, separation, and individuation. Freeing himself from the burden of his mother's dream, having an intense relationship with Paula, whom he feels he has betrayed, using self-awareness and self-disclosure with Magnolia to relate to her, and functioning as an independent, reliable, sensitive individual to help Irene is an interesting conscious or unconscious choice Yalom makes in the order and selection of material to write about.

With Irene, Yalom tries to get her to deal with her husband, Jack's, death. The turning point in the story comes where the most humor is present. It follows Irene taking up painting and bringing the painting in for Yalom to see. After he looks at it she asks for his comments and he responds:

“But-well-un- I'm so pleased with you finding pleasure in painting that I dread sounding even slightly critical, but I guess I was hoping that you might do something with your art that might be more-uh-how to put it?-*resonant* with our therapy.”

“Resonant?”

“One thing I like about our work together is that you invariably respond with substance whenever I ask about what's passing through your mind. Sometimes it's a thought, but even more commonly you describe some mental image. With your extraordinary visual sense, I was hoping you could combine your art and therapy in some synergistic manner. I don't know-possibly I was hoping the

painting might be more expressionistic, or cathartic, or illuminating. Maybe you could even work through some painful issues on canvas. But the still life, while technically wonderful, is so-so-serene, so far removed from conflict and pain.”

Seeing Irene’s eyes rolling up, I added, “You asked for my feelings, and there they are. I’m not defending them. In fact I suspect I’m making a mistake by being critical of any activity that provides you an interval of peace.”

Irv, I don’t think you know much about painting. Do you know what the French call a still life?”

I shook my head.

“Nature morte”

“Dead Nature”

“Right. To paint a still life is to meditate on death and decay. When I paint fruit, I can’t avoid observing how my still-life models are dying and decomposing day after day. When I paint I am very close to our therapy, pointedly aware of Jack’s passage from life to dust, very aware of the presence of death and the smell of decay in everything that lives.”

“Everything?” I ventured.

She nodded

“You? Me?”

“Everything,” she replied. “Especially me.” (Yalom, 1999, p.132)

The slightly humorous way this material is introduced provided a discovery for the narrator, while representing a breakthrough for Irene. The reader is allowed to stumble into these realizations along with the author. The lighthearted hesitation in the beginning of the section by the narrator, shepherds the reader to the more existential theme buried (no pun intended) in the exchange.

Yet as powerful and insightful as his stories are, there's a problem; the first four non-fiction stories are so good, the remaining fiction pales in comparison. Yalom adds a collection of fictionalized stories that, in comparison, seem to lack the strength or power of his non-fiction. The feeling one has as a reader is that the fiction was included to fill out the book, and nothing more. (These stories relate back to a character in his fictional 1996 work, *Lying On The Couch*.) The addition of these fictional stories in what is essentially a non-fiction collection, seem unnecessary, and I was unable to find reason or rationale for their inclusion. This is particularly interesting since they are not introduced or separated in any way, and although the stories are instructive, the shift to fiction is difficult to make. The reader has just been treated to such high quality non-fiction accounts that the use of a fabricated story takes away from the impact. Humor or not, including these fictional stories in the same collection detracts from the non-fiction material. So why were they included?

I attempted to find the answer to this in written reviews and interviews, but to no avail. The question was important to me and I took the opportunity to ask Yalom himself.

Several years ago I asked him for suggestions on research I was doing. He provided excellent sources, which I followed up on, and I took the liberty of asking him to comment on the inclusion of fictional stories in the collection. His response, in part, appears below:

I included both fiction and nonfiction because I have, for the most part, an inbuilt readership of therapists and my primary goal was pedagogical – I placed that above ideas of unity of the book - perhaps an error - had a couple reviewers very critical of it - it's that

I blur the boundaries so much I become oblivious to the distinction - (private communication 4/14/01)

This explains the division in a way that is consistent with Yalom's original goal, to use stories as a vehicle for teaching complex existential issues. Indeed, the fundamental nature of these stories gives voice to the wobbly world between being a therapist, and having to resolve for yourself the same questions asked by your patients. As teaching instruments, these stories, all of them, have significant value.

His writing challenges, inspires, and gives me pause for reflection. I am looking forward to the release of his new book, *The gift of Therapy: An Open Letter to a New Generation of Therapists and Their Patients*, due out later this year.

Robert McKee, in the beginning of his wonderful book, *Story*, quotes Kenneth Burke as saying: "Stories are equipment for living." I believe that is true, and for me, reading Irvin Yalom has simply been one of the best ways to get the equipment.

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