
John Sedgwick

The Education of Mrs. Bemis
ISBN13: 9780060512590

This book is about Mrs. Bemis's recovery from a depression that comes on late in her life. There is an optimism in her story, with her recovering so well. What do you want people to learn from reading your book?

That understanding is essential to the treatment of depression. Anti-depressant drugs have their place, sure, but they can only take a person so far. To really rewire the circuitry you have to find out what brought the depression about in the first place. Depression is not just a matter of serotonin levels, it is a matter of life. Depression has its story, in other words, and I think it is essential to learn that story — and learn from that story — if you hope to climb out of the hole and keep from slipping back in. That is the truth in this book, and that is the truth in my own experience. Further, while all antidepressant medications have rotten side effects, from jumpiness to loss of sexuality, the "side effects" from understanding depression are nothing but good. They make your life better — fuller, richer, calmer, and more loving. This is true for Mrs. Bemis, and it is true for me. I am a huge believer in the wonders of the talking cure.

Did you pattern the institution in *The Education of Mrs. Bemis* after any one mental hospital in particular. And if so, can you say which?

I don't think it's any particular secret that my Montrose in the book has many obvious parallels to McLean Hospital, the well-known, Harvard-affiliated hospital in Belmont, Massachusetts.

Why did you select that hospital to pattern your fictional institution after?

To be honest, the book stems from the experience of placing my mother in McLean for a depression that she had been suffering from, on and off, ever since my father died in 1976. It was a grim experience for her to go in, and for me to take her there. But as soon as I did take her in, I knew that I would have to write about it. The experience was simply too powerful.

How do you see this institution today?

McLean is a harsh place, no question, and I have gotten into some trouble with current management there for saying so. But if you just go there and see all the broken down old buildings, many of them boarded up, you see the truth of the matter. In the old days, McLean believed in the rest cure, a therapeutic approach to mental illness that was most solicitous. Patients were to be soothed and indulged. Nowadays, under managed care, everything is rushed and coarsened. When a McLean ward might once have resembled a fine hotel, it now is most like a bus station, with indestructible furnishings and an imperative to move people out of there as quickly as possible. I can't imagine anything harsher on the nerves. And it was extremely painful for me to consign my mother there, knowing that she needed to be somewhere like this, and knowing that this was the best possible place, and knowing that it was horrendous, far more likely to increase depression than to lessen it.

Last September for *GQ* you wrote a searing account of your own experience with depression after the publication of your first novel. How have people reacted to that piece?

It was infinitely harder to go through a depression than to write about it. Mine came on the fall after I put my mother into McLean for a second hospitalization three years after the first one. I was well into the writing of the novel at that point, and it overwhelmed me to turn an experience into fiction — only to have that experience recur in real life once more. I was hit with it inside and out, and it penetrated me in a way that I would have thought impossible. I'd never been even mildly depressed before, and I was utterly shattered. I could scarcely function, but once the depression started to lift after three or four months, I thought it was important to write about, first to start to understand it myself and second to help others understand it better. In *GQ*, I was writing largely for a male audience, and there has been very little written about depression in men. Men don't get depressed, supposedly. But of course men do get depressed — they simply don't talk about it.

How have people reacted to that piece?

I have been heartened by the response. I received many letters from people who had experienced similar things, and were grateful that I had the courage—as they said—to describe what I had gone through so candidly.

And how did your depression affect the book?

My own depression experience definitely gave the book a certain coloration that it would have lacked if I'd never gone through it. I would not have been able to imagine Mrs. Bemis's point of view. In my grander moments, I think that my experience — grim as it was — was God's commandment to get closer to my main character.

Having witnessed depression in your family and your own life was writing this novel a therapeutic experience? How does depression affect the family unit? It was therapeutic to a degree, in that it allowed me to see a way that these demons might eventually be worked out. Mostly, the writing itself was therapeutic, once the depression cleared enough to allow me to concentrate, in that it got my mind off my own problems. But I have to recognize that the story did involve a good deal of my own longing for a cure. This solution for Mrs. Bemis was one that I sought both for myself and for my mother.

How is your mother doing now?

She's struggling with her health. The worst of it is an emphysema-like illness that has left her on 24-hour oxygen, and put her in a wheelchair. As Betty Davis said, old age is not for sissies. Between her psychiatric troubles and her physical ones, my mother has been hit very hard, and she's 89. But I do admire her resilience, and lately I've sensed that a good deal of the bitterness that has been a hallmark of her chronic depression has burned off, and that she seems to be lighter, more tolerant, and more accepting of her own circumstances. A bit of Mrs. Bemis! There is a bit of wry humor there, which is new. And that has lifted my heart.

Do you think depression is different for a young person like yourself than it is for an older woman like Mrs. Bemis?

Depression makes you old, I'd say. It saps energy, muddles the mind, dulls the pleasure receptors, and makes you want to crawl into a hole. So that the age difference between me and Mrs. Bemis evaporated after the depression struck. At whatever age, you imagine that your life is over. Everything is black; you're stuck; nothing you can do; that's it. I guess, if anything, it's more tragic in the young since it robs them of something they should be fully entitled to, namely, the hope that things can get better. Towards the end of one's life I think that hope is difficult to maintain, even in the best of times. One gets by with other good feelings, like satisfaction and connection

to others.

As a male writer, was it a challenge to have two female leading characters?

Not really. I love women, and, with my wife and two daughters, I live in a female-dominated household. So the woman's perspective comes very naturally to me. Also, I believe that psychiatry is inherently a female province since I consider women to be the gender that is capable of the greater empathy and deeper feelings. It would have been harder for me, I think, to write the book with two men in these leading roles. That said, I'm not a woman, and I'm sure that I've drawn a pair of women who may seem, to women, to be a little off here or there. I don't always like the portrayal of men by female writers. They sometimes seem either too wooden or too mushy. But many, many women readers have told me that they are amazed I was able to get these women so right, and that has been very gratifying.