

9/26/10 Sermon

“Pain and Suffering (And Healing)”

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Many of us have experienced a seminal event, an experience or incident that profoundly changed us in some way. And while a seminal event doesn't *have* to involve pain or suffering, many do. I'm talking about those events that are heartbreaking, those that come without warning, without our asking for it, without our wishing for it, without our wanting it. For some, this event may have been the diagnosis of a life-threatening illness; for others, it may have been the death of a dear one; for others still, it may have been a physical disaster, like a hurricane or an earthquake.

For me, it was My Car Accident.

It was 1990. I was 22, and in the last semester of my Master of Social Work program at the Boston College Graduate School of Social Work. The major assignment for the Integrative Seminar in Social Work Practice course was to write a paper describing a particularly painful event in our lives and how we would use our experiences of healing from that event to inform our professional social work practice.

To use the words of my professor, this paper should detail how we might use our experiences to become “exquisite healers” to others. Self-awareness is a vital part of becoming a professional social worker, since the instrument for helping others is the social worker herself. Without self-awareness, boundaries between self and other (and whose “stuff” you are really working on) can become blurred, rendering the helping process, at best, useless and, at worst, harmful. This assignment was aimed at increasing our self-awareness.

By 22, I had had two painful events in my life that were possibilities for me to write about: the death of my maternal grandmother and my parents' divorce. They both had happened during my freshman year in college. And while my grandmother's sudden and untimely death was nothing short of tragic for me, the divorce, which had been in the works for quite some time, had been more influential in my life. So, I had decided to write about the divorce.

The paper was coming together rather nicely in my head as the weeks passed. For spring break in early March, I set off for Florida with Eric, my boyfriend at the time, to visit Laurie Berliner, my dearest friend since we

were freshmen in high school, and two other very close friends, all of whose jobs had brought them to Florida.

Laurie was just starting her career in hotel management; she lived in Orlando and she loved it. Five months before my visit, Laurie wrote me this postcard: "Hi! I didn't want you to think I've forgotten about you. I think about you all the time, but life is go, go, go all the time, and I've fallen out of the fine art of writing. I am still loving it here (please visit!!!) I don't ever want anyone to wake me up from this dream. Work is great and so are the people there. I'm doing the tourist thing big time, and I met the sweetest guy—Mike. I'll keep you updated. How is grad life? How's the love life? Please drop me a line. I don't care if we just send postcards back and forth, just so I know how you're doing. I miss you! Love ya, Laurie."

I didn't know, as Eric and I happily set off on our vacation, that by the end of it, my paper on pain and suffering would not, could not, be about my parents' divorce. In order to bring you into my experience, I am going to read you several excerpts from the paper I wrote 20 years ago entitled, "PAIN AND SUFFERING." I wrote:

"Originally, the idea of writing a paper about pain was appealing to me, particularly in light of the fact that the assignment is intended to be more personal and thought-provoking than most papers one is asked to write. I saw it as a challenge and an opportunity for learning more about myself and my own pain and healing, which would ultimately help me understand the suffering and healing of my clients. However, immediately after my tragic accident of March 10, 1990, I was unable to concentrate on anything but the physical and emotional trauma of the accident. Although I felt articulating my feelings around pain, suffering, and healing would be helpful in clarifying and understanding my feelings, the task seemed not only overwhelming, but also cruel.

"It has been approximately four weeks since the accident, and time has begun its slow healing process. In addition, I have been helped by Harold Kushner's book, *When Bad Things Happen to Good People*, and, as a result, I feel more able to engage in this undertaking. The dilemma now is knowing where to begin.

"I have experienced a barrage of emotions and am just beginning to be able to organize them. Pain, depending in part on the specific nature of the suffering, may evoke powerful emotions such as loss of control, terror, panic and confusion, anxiety, dread and fear, sadness, guilt, and anger. After being exhausted from feeling all these emotions, it's common to feel empty and numb. In addition, there may be a longing for the seemingly simpler past that existed before the suffering began, and - particularly when the suffering has occurred in the context of a senseless accident - an overwhelming desire to turn back time and change what happened."

The paper goes on to describe how I experienced all of the emotions I just mentioned, one by one, as they related to my seminal event. But I will

discuss only the first few emotions as a means of telling you the story, my story, of what happened on March 10, 1990. I wrote:

“The only way that makes sense for me to discuss the range of emotions that one feels when in pain is to describe my feelings during the accident. The first thing I remember feeling is out of control. As the car swerved on the highway, I thought we were going to hit other vehicles, and I knew there was nothing any of us in the car could do. The situation was way beyond our control, my control. I was caught, immobilized in the midst of an irrevocable disaster.

“With the car’s being so terribly out of control, it was obvious that something horrible was about to happen. And it did. The car headed into the grassy median and began flipping over and over. All I can remember thinking is, ‘Oh my God, we’re going to die! There is no way we’ll ever survive this!’ This feeling is terror, and it is intricately related to feeling out of control, to not know what to expect next. After the car stopped, it landed on its side, with Eric’s (the driver’s) side on the ground, my side in the air. The first thing I did was look in the back seat to see how Laurie was because she had been asleep and did not have her seat belt fastened; we in the front did. But she wasn’t there! She just wasn’t there. I couldn’t imagine where she was. The thought of her having been thrown from the car seemed too outrageous for consideration, but if that weren’t the case, what had happened? Words cannot do justice to the absolute horror I felt at that moment, which seemed hours long.

“Next, I felt panic and confusion. I could not get out of the car. I tried to push out the windows, but, to my surprise, they were all intact. My door was too heavy for me to open; I thought Eric and I were trapped in the car. I was shocked that I was still alive after such an accident, but why be alive if we were only going to die because we were trapped in the car? I started to panic because I was under the impression that cars always exploded after flipping over. Then someone, a stranger who had stopped, opened my door, pulled us out of the car, and placed us on the grass nearby.

“I was anxious as I waited for the ambulance. I was also terrified as to the condition of Laurie; the people at the scene of the accident informed me that she was going to be transported to the hospital via helicopter. Nobody, from the strangers at the scene to the EMTs in the ambulance with me, seemed willing to answer my persistent question: ‘How is my friend who got thrown from the car?’

“While at the hospital Emergency Room, my feelings of dread intensified. I suspected that Laurie was either paralyzed or dead, but I prayed feverishly that she was not seriously injured. In my prayers, I pleaded, I bargained (promising to become a nun, after all), I cried, I begged. And I waited. And I asked questions. But nobody would give me a straight answer.

“Finally, when all my tests were finished, a few doctors and the social worker who had been the very first person I met as I got wheeled into the ER, came to my bed to tell me the news. Before the doctor spoke, I sobbed, ‘Don’t even tell me my friend Laurie is dead. Don’t try to tell me that!’ And with their response, my worst fears were confirmed.

Laurie had died at the scene of the accident. They had tried to revive her at the hospital, but they couldn't. And then, they all left the room - all of them except the social worker. I was utterly despondent; I cried like a baby in the social worker's arms for what had to have been 15 or 20 minutes. Laurie was dead, and there was nothing I could do to change that."

The paper goes on, and I talk theologically and existentially about the nature of suffering, but that is fodder for another sermon. The question that needs to be answered for this sermon is: How, then, do we make meaning from our suffering? And while I can't answer that question for each one of you, I can tell you how I did.

So, how did my seminal event – my tragic car accident – inform my work with my clients; how did I use it to become a healer to others? The answer lies in my experience with the ER social worker. She was the only person out of the entire team of professionals I met at the hospital who was able to tolerate my pain. She was the only one who held me – a complete stranger – and comforted me when I was in shock and at the depth of my despair. I howled, I moaned, I sobbed, and she just held me. I told her about Laurie – that ours was a rare friendship, pure and beautiful. We rejoiced in each other's happiness and cried for each other's pain. We were family.

The social worker listened, and she was able to bear witness to my pain and suffering. That was powerful to me. After 20 years, I still vividly remember her name (Pam), what she looked like (blond with blue eyes), and what she was wearing (a navy suit). She wore a badge that read "Patient Advocate." I did graduate with my MSW later that semester, with the help of an extremely supportive network of family, close friends, and the Boston College social work faculty (who made sure I got free counseling).

And while ultimately my relationship with Eric did not survive the impact of the car accident, we initially shared an intense bond that was forged with our survivor guilt, our anger, our despair, our gratitude – that we dared not speak aloud to others – that I wasn't the one who had died. Only Eric and I were witnesses to how close I had come to sitting in the back seat. You see, I had suggested to Laurie that she should sit in the front seat so she could direct Eric back to her house from the beach, where we had spent the day. She declined, but I kept insisting, because I thought she was just being polite. But she finally convinced me that she was totally content to sit in the back seat and that, in fact, she had wanted to take a nap. So, I gave in. How, then, was I to make sense of this tragedy? How was I going to forgive myself for having been involved in the accident that killed my dearest friend?

Existentialists would say that our suffering does not have intrinsic meaning, rather we impose the meaning on our suffering. Harold Kushner would agree that it is our response to suffering that either helps us grow or cripples us. This is the work of social work: to help others find meaning in their suffering so that they can grow from, rather than be defined by, their pain.

So, I promised Laurie that I would make meaning of her tragic death, that I would have more to show for the accident than the tiny scar I wear on the top of my left wrist. Over the course of the next several months, I discovered the way I needed to make meaning of this tragedy. I said to myself that if I could do for one person what the ER social worker had done for me, then Laurie will not have died in vain.

And so, I abandoned my plan to do private practice mental health work and chose instead to work for the next 19 years in medical social work, as an oncology social worker to be specific. As an oncology social worker, first at Massachusetts General Hospital and later at the Dana-Farber Cancer Institute, I worked with cancer patients and their families to help them cope with illness and death. I helped people heal gaping wounds, like the chasm left behind by Peter, my young osteosarcoma patient, who, after several amputations that went progressively higher up his leg, felt lucky to be alive for his 21st birthday. He glowed as he told me how his father took him and a few of his close friends out for a beer to celebrate this milestone. That was the last birthday Peter lived to see.

And there was Bob, a 44-year-old with cholangiocarcinoma (cancer of the bile duct), which is rare and typically quite advanced when it is discovered. I met him and his wife immediately after he was diagnosed. One day, Bob came to the outpatient clinic via ambulance. He was catatonic, and his wife was understandably frightened. Before the oncologist admitted Bob to the inpatient hospital for a workup of his immobile, silent state, he paged me to see if I could get through to Bob. It took a while, but Bob eventually did respond to me. He had finally absorbed that his disease was terminal, and he had plunged into a severe depressive state. He told me he couldn't bear the thought of leaving his two young children fatherless. By the end of the day, he could get up and move, did not need to get admitted to the hospital, and the real discussions about what his family would do after his death began. His children were the ages mine are now – 4 and 6 – when he died.

Then there was Gail, 40 years my senior, who, after our first meeting, questioned my ability to help her because I looked so young. I was probably 24 at the time. Her daughter called me to ask for an older social worker. So, I went back to Gail, and while I didn't share the story of my accident with her, I did tell her that I had shared this journey with others in situations

that were similar to hers and that I would like the opportunity to accompany her on her journey, if she'd let me. I continued, saying that if, after another session or two, it didn't work out, I would find her an older social worker. As she spent the next three years in and out of the hospital, we shared many moments of sadness and joy together and had an amazing relationship. When she died, her daughter (the same one who had attempted to "fire" me years earlier) told me that she could never thank me enough for the comfort and support I provided her mother.

Finally, there was Lynne, who prior to her diagnosis of colon cancer, appeared to have had it all – beauty, a high-powered career, a doting husband, money, and great jewelry. Soon after Lynne's diagnosis, her husband left her for one of her friends, and while she dealt with her intense anger and hurt, and grieved over the children she would never have, we slowly, painstakingly worked together to rebuild her life – on her terms. She lived three more years, long enough for close friends and family to throw her a lavish 40th birthday party. She died without regret and surrounded by those who loved her.

While I have recently shifted my career from clinical work to research, I *loved* those years in oncology social work. I loved seeing the healing results of empathy and compassion, combined with therapeutic skills. Yes, it was emotionally intense, sometimes even depleting, work. And, no, I didn't make a lot of money doing it. But *every day*, I went home knowing that my work had meaning. My oncology work was at once both profound and humbling, exhausting and exhilarating, seeped in death and life-affirming. I made good on my promise to Laurie: I had not let her death be in vain.

I concluded my paper on Pain and Suffering by quoting the Christopher Cross song, "Think of Laura" that Steve Allerton sang so beautifully earlier. That song helped me gain some perspective on the pain I was still very actively feeling those 20 years ago. The remarkable similarity of the name of my friend and of the person Cross sings about has always been a little eerie to me. Allow me to quote a few lines:

*A friend of a friend
A friend 'till the end
That's the kind of girl she was.
Taken away so young
Taken away without warning.*

*Think of Laura.
But laugh, don't cry.
I know she'd want it that way.*

*Hey, think of Laura.
But laugh, don't cry.
I know she'd want it that way.*

*Hey, Laura, where are you now?
Are you far away from here?
I don't think so,
I think you're here
Taking our tears away.*

Yes, I do believe Laurie has been here with me all along – taking my tears away and helping me take away the tears of others. Recall that I entitled my paper “Pain and Suffering.” While my professor wrote lengthy, heartfelt comments at the end of the paper, he also added the words “And Healing” to the title. So, now it reads, “Pain and Suffering and Healing.” Thank you.