My Disability Story Isn’t For Your Catharsis

by Katie Rose Guest Pryal

We expect stories of disability to reveal suffering and redemption. But it doesn’t always happen like that.

When I was in college—an experience I barely survived—a desperate friend gave me a book to read. It was the now-ubiquitous *An Unquiet Mind* by Kay Redfield Jamison, a memoir of a psychologist’s life with bipolar disorder and how she struggled with diagnosis and treatment. I enjoyed reading about someone who was so very, very much like me.
Jamison's book is the reason I sought treatment for mental illness. And since becoming a disability activist, and someone who studies disability memoirs, I’ve read thousands of words on message boards that say Jamison's book, or another psychiatric illness memoir, gave a person the courage to seek help.

The friend who gave me Jamison’s book later told me that his secret motive was for me to have just such an epiphany. I didn't mind his interference at the time. I was, after all, in desperate need of an epiphany. Before getting treatment for bipolar disorder, I wouldn’t sleep for weeks at a time. I’d make reckless decisions without thinking of the consequences. Then, without warning, the reverse would kick in: I’d be unable to get out of bed; I’d miss days or weeks of classes; I couldn’t concentrate or care about homework. It was, in retrospect, not an easy way to succeed in college, or even to survive.

So I was grateful for the book, for the help I got, for the medication that I still take, now, years later.

I’ve never stopped wondering about the disability memoirs that come out each year and what they mean to us, as disabled readers. I also wonder what the memoirs mean to nondisabled readers, whose motives might not be so kind.

When I became a rhetoric professor, I published an article, “The Genre of the Mood Memoir and the Ethos of Psychiatric Disability,” about psychiatric disability memoirs (the kind of article that no one reads, in a journal that no one has heard of). I argued that people with psychiatric disabilities were able to reclaim their authority as speakers, and as members of society, using what I called the “mood memoir” genre.

Mood memoirs provided a way of saying, “I still have control over my own story.” Even, “I still have control over my own life.”

In studying mood memoirs, though, I discovered that the genre has certain limitations. Authors must meet specific reader expectations: readers expect to be inspired, to read about overcoming disability, and to read coherent, truthful narratives. Memoirs that don’t conform to these
conventions of inspiration, overcoming, coherence, and truthfulness are often rejected by readers. They either don’t make it to the bookshelves in the first place due to publisher gatekeeping, or when readers don’t find what they’re looking for, they rake authors over the coals.

In the past, in order to rebuild credibility in a normate-dominated world, disabled memoirists sought hyper-verisimilitude. After all, if our disability supposedly damaged our perception of reality, what better way to prove our doubters wrong than by hewing to the doubters’ own standard of truth?

But today, disabled writers are pushing back. Today, we’re recognizing that the normate memoir genre doesn’t fit disability stories. And not only when it comes to truth, but when it comes to everything.

Memoirs of disability are often studies in suffering. But what I’ve found in my research is that normate readers don’t actually want to read stories of suffering—not by itself, at least. They want suffering-plus. They want some form of Aristotelian catharsis—a release.

Aristotle, in the *Poetics*, defines tragedy as “a representation of an action which is serious, complete, and of a certain magnitude…and through the arousal of pity and fear [effects] the [catharsis] of such emotions.” It’s not enough to read a story that arouses pity and fear—a tragedy (such as a disability memoir) must also provide the catharsis of these emotions in the reader, or the story has failed. At least by normate standards.

Normate readers who read disability memoirs want to cleanse themselves of their feelings of pity for and fear of disabled people.

But the normate reader’s demand for catharsis leaves disabled authors in a bind. To hew to the demand for normate truthfulness, a story might not have any redeeming qualities except for the disabled writer’s ability to tell the story in the first place. A suicide survivor who is alive and writing has already overcome a lot, but for this genre, which requires catharsis for the reader, mere survival is not enough. To meet the
normate reader’s demands, there has to be more. There has to be redemption. The author has to “get better.” The sine curve must come all the way up again.

But what if there isn’t any redemption? What if, after the suffering, all the person makes out with is her life? Those stories are too depressing, aren’t they? No one will want to read those, will they?

Or will they?

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In 2015, I published a long-form essay about motherhood and suicide. My essay was a little dark, sure, but so is everything else I write. I pointed to a massive, multi-year study of parental suicide attempts and their effects on children published in the Journal of the American Medical Association (JAMA). “Its findings show that having a parent who attempted suicide, even controlling for other factors, ‘conveys a nearly 5-fold increased odds of suicide attempt in offspring,’” I wrote, and added, “You might not see it if you aren’t looking for it, but one of the subtexts of this study is motherhood, along with its favorite hobgoblin, guilt.”

Motherhood and guilt? Yes.

In the study, the researchers addressed some weaknesses in their research, including that their “probands are mostly female,” but they didn’t get into why mothers might try to kill themselves more than fathers. The point was, this study actually had a lot to say about gender and parenting. So, I wrote about my own suicide attempt and my own family, my own disability and my own fears. And it provided no catharsis.

Readers’ responses to my essay were strong, mostly positive.

The few negative responses, though, policed the piece in familiar ways:
“i don't know. i mean, obviously i'm glad my mother chose to have children, or i wouldn't exist! but i think you're kidding yourself if you think living with someone who oozes unhappiness doesn't have an impact.”

“You have nothing to feel guilty about if you do not use your suicidal [sic] as a threat to your children, but some parents do.”

“But I would gently suggest that you talk to your kids about your depression and suicide attempts only after consulting with a good therapist who specializes in working with kids.”

“It's hard to have a parent that, through no deliberate fault of their own, isn't a [sic] one hundred percent available support for coping with the trauma you have. It gets so much more complicated when they're the source of all that [shit.]”

I knew, objectively, that these commenters weren’t talking about me, Katie, the person who wrote the piece, because they do not know me. I wasn't the source of all that shit. The parents of the commenters were. Why were they so angry at me?

Because I'd broken the genre rules, and they were punishing me for it.

Let’s go back to Aristotle, to his triangle of rhetorical aims.

My intended audience was others like me, who'd considered or attempted suicide, and who might also have been parents or considered becoming parents. I also knew I'd be reaching others beyond that group.

My intended purpose was to reveal my darkest fear, and by doing so, help others who shared that same fear: that I'd harmed my children when I'd considered suicide.

So far, so good.
My writerly persona, though—that's where I failed.

The normate expectations for the mood memoir include redemption. The writer must suffer, and then find redemption. It's the path of Aristotelian tragedy. But I didn't apologize for nearly dying of suicide, or for the risks the JAMA study says I now pose to my children. I was not sorry. In fact, I was angry. I was furious that maternal suicide disproportionately affects our children. Maternal *everything* disproportionately affects our children. The burden on mothers is way too high—from what we can eat when we're pregnant to how we parent our infants and toddlers. Everything we do is monitored, studied, checked, and regulated.

And then the researchers dared to throw up their hands: *Why do more moms try to kill themselves than dads? It's beyond us.*

I had a deadly illness. It nearly killed me, but I survived. I refused to apologize for it.

The result? Some readers were mad I hadn’t been sorry. I hadn’t been remorseful for the harm my suicide might cause my children. They told me to get therapy, that I would hurt my kids, *that I should feel guilty.*

Repentance is what readers expect of disability memoirs. Repentance brings redemption. Redemption brings catharsis. For readers.

But my disability story isn’t for your catharsis.

*The writer must suffer, and then find redemption. It’s the path of Aristotelian tragedy.*

I’m merely part of a trend of disabled writers dismantling normate genres.

Karrie Higgins took on normate veracity with her essay “*Strange Flowers,*” when she took to task doctors and teachers and more, all of whom let her down, doubted her and mis-treated her. An angry reader, “Coco,” attacked the truth of Karrie’s story. “This work is more like magical realism inspired by some real events but woven into a *fictional*
Magical realism inspired by some real events but woven into a fictional and surreal landscape,” Coco wrote. “So my mixed feelings come from using the shock value of a supposedly true first person narrative.”

In her essay, Karrie tackles truth as she struggled to put in order the evidence of her brother’s sexual abuse of her: “I walked the galactic paper trail like a labyrinth, but the sequence felt wrong, even though I obeyed the strict chronology dictated by the documents. I didn’t remember my life in that order. I was not even sure things happened in that order, even though the documents said so. Maybe the order people discover things is the order they really happen.” In attacking “truth,” Coco merely reinforced Karrie’s project of questioning truth-telling itself.

Porochista Khakpour, in her new book Sick, also challenges normate memoir rules, as the New Yorker notes: “Sick’ is a strange book, one that resists the clean narrative lines of many illness memoirs—in which order gives way to chaos, which is then resolved, with lessons learned and pain transcended along the way.” As the review points out, there is a disability memoir genre that normates expect, one with a clean storyline and transcendence. Khakpour has kicked the genre to the curb.

Kay Redfield Jamison wrote an important, groundbreaking book that created the space we needed. In the decades since then, we’ve been changing the rules of disability memoirs. Some readers have resisted this change. They’ve gotten angry.

But disabled writers are not here for your genre expectations, not anymore.