

# FAMILY

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## Witnessing, Wonder, and Hope\*

KATHY WEINGARTEN, Ph.D.†

*This article is based on a keynote address I gave in South Africa at the Eighth International Conference of The South African Association of Marital and Family Therapy. The phenomenon of witnessing is explored in a number of contexts, and a distinction is made between witnessing with and without awareness, and from an empowered or a disempowered position. I propose that the African philosophy of ubuntu—the emphasis of which is on the self in community, in contrast to the Western emphasis on the individual—may be a better fit for my view of hope, which, I propose, is not just a feeling but, rather, something people do.*

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† Associate Clinical Professor of Psychology, Department of Psychiatry, Harvard Medical School and Family Institute of Cambridge. Send correspondence to 82 Homer Street, Newton Centre MA 02459; e-mail: kweing@aol.com.

FOR over a year, in preparation for a trip to South Africa where I was an invited guest of The South African Association of Marital and Family Therapy in Cape Town, and The Institute for Therapeutic Development in Pretoria, I read voraciously about South Africa, drawing on fiction, nonfiction, and poetry to introduce me to the people and the place. I was overwhelmed by my reading: never have I tried to comprehend a social, economic, and political reality of such immensity, extreme contradictions, and paradox. At the same time, I was inspired and excited by the efforts of those remaining in the country to make the New South Africa a country that worked for all of its people.

My relationship to South Africa has always been both political and personal. I worked for divestiture in this country and supported South African boycotts. The South African story of Apartheid was always a part of my Passover seders, both in my parents' home and in my own. At my mother's last seder, in 1976, ill, she nonetheless cobbled together text for our holi-

day table *haggadah* that drew on the stories of those in the struggle for freedom. She didn't say the traditional "Next year in Jerusalem" but, rather, "Next year in South Africa." Twenty-four years later, I was there.

Ten years before that, in 1990, I watched a videotape of a movie set in South Africa, *A World Apart*, based on the life of Ruth First and her family—directed and written by her daughter Shawn Slovo—that utterly changed my relation to my family and my work. I saw the video at the bleakest, loneliest time in my life. I was 43 years old, a practicing, licensed psychologist for over 25 years, and happily married to the man with whom I was raising a 14-year-old son and an 11-year-old daughter. I had just finished one year of treatment for cancer, a treatment the noted surgeon, Dr. Susan Love (1990), refers to as "slash, cut, and burn." My life was bleak and lonely because I lived in silence: certain that no one could bear to hear the feelings and thoughts I had following my year of treatment; unwilling to find out if I was right; certain that I needed to protect people from my experience; and failing in those few times that I tried to put into words the chaos of my emotions and the terror that lived in my flesh.

The film is told from the daughter's point of view, as most movies and books about mothers are. The film records the period of a few months in 1963 after Joe Slovo has left the country and Ruth First, his wife, has been arrested under the Ninety-Day Law. The filmmaker reproduces in us the family's tension and conflict by focusing on the mother's imprisonment and its effects on her eldest daughter, and by focusing on the deteriorating conditions of Apartheid for those who opposed racism.

Watching this video in my bed one freezing Sunday evening in January, 5 months after my cancer treatment had finished, I

was unprepared for the layers of identification and connections I experienced. My parents had been Jewish Communists in the thirties (before hearing about Stalin's murderous practices and, later, renouncing The Party). I too had feared what the police would do to my mother. She went to Washington to testify before a subcommittee of the Senate for hearings parallel to those that became known as the McCarthy Hearings. My mother came home several days later; Ruth First, not for 117 days.

My mother had been able to explain the political circumstances that had led to her temporary seclusion. Informing me posed little or no risk. Ruth First, on the other hand, kept her work secret for fear of exposing her children to the dangers she regularly and willingly assumed. As the movie unfolds, the mother's poignant and paradoxical dilemma is portrayed. In order to protect her children, she must keep her authentic self—her thoughts, feelings, and actions—separate and apart from them; to protect her children, she foregoes any genuine connection, a separation that is depicted as terrifying and painful to her eldest daughter.

In the movie, near the end of the film, there is a climactic scene in which the daughter begs to learn more about her mother. The mother realizes that the daughter is willing to assume risk in exchange for closeness: not actual physical closeness, although she wants that as well, but emotional closeness, intimate connection, the sharing of meaning and purpose (Weingarten, 1991).

Watching this particular aspect of the drama, I felt keenly another layer of resonance. Since my cancer diagnosis and treatment, I too had been protecting my children from my authentic thoughts and feelings. Afraid that I might die, I kept those fears secret from my children. In doing so, I kept myself out of connection

with them. For *my* daughter, the experience of disconnection from me in life was more terrifying even than her fear of separation from me in death. Flooded with her own fear that I might die, she wanted the comfort of sharing that fear with someone whose fear was as intense as hers. I, the perfect companion for her, thought my job as her mother was to keep those very fears from her. Watching Ruth First's daughter, I understood mine. Counterintuitively, I understood that I had to let her join me where I was most vulnerable in order that she and I take courage together (Coll, Surrey, & Weingarten, 1998).

I turned off the film and paced in my room for hours. The problem I faced was just one variation of a more general dilemma. If intimacy develops when people share what they truly care about and find meaningful, and if parents have a responsibility to protect their children from harm, how can a parent be both intimate and protective if what they truly care about would expose their children to harm (Weingarten, 1997)? In the South African context of the early 1960s, Ruth First's opposition to Apartheid placed her in danger. Ending Apartheid was what she cared about, but there was no way of expressing these convictions without also incurring risk of incarceration, exile or death. How then to include her daughter in her life's work, to give her daughter the opportunity to know her mother as others outside her family knew her, without also subjecting her daughter to an unacceptable level of risk?

There are no easy answers, whether the parent is involved in opposition to an oppressive regime, involved in a life and death struggle with cancer cells circulating throughout her body, dealing with the aftermath of sexual, physical, or emotional abuse, dealing with addictions of any sort, or dealing with any of the more

banal but ubiquitous problems that parents—persons—everywhere face.

How to create intimate connection through sharing one's authentic reality in a way that isn't intrusive or overwhelming to the other person? How to thread one's way through the central paradox of voice? If I don't tell you what I really think and feel, I will feel disconnected from you. I will end up withdrawing from you. In silence. But, if I do tell you what I really think and feel, you will withdraw from me. What I have to say is so heinous, horrible, toxic, unacceptable, that you will not be able to stand me.<sup>1</sup>

### Silence, Voice, Witnessing

In the decade since I have watched this film, I have been very fortunate. First and foremost, I have survived those tiny cells, even when they made a comeback a few years ago. Second, I have turned my professional attention to questions that have occupied me personally, making a virtue of necessity, using my personal experience to illustrate theoretical premises.

The themes of my professional work have been the themes of my personal life: silence, voice, witnessing, and hope. For the most part, I have engaged these themes in the domains of trauma, illness and death. However, from talking about these matters to people in other contexts, I found that the lessons I learned have had relevance to them as well.

It was in relation to my own mother's dying that I first grasped how many nuances there were to being a witness and witnessing, experienced the complexity of voice and silence, and understood how important and illusive hope could be. My mother was diagnosed with cancer in the early 1970s, at a time in the United States when patients had few legal rights with

<sup>1</sup> I owe this formulation of the paradox to conversations with Peggy Penn, MSW.

regard to information about their diagnosis and prognosis. The right to informed consent about medical treatment had only been established by the courts 2 years before her diagnosis. Scientific information about cancer was still sufficiently sparse so that, for most families, the diagnosis was assumed to carry a death sentence. This prejudice was encoded in law in the Freedom of Information Act of 1966, in that "treatment for cancer" is the *single exemption* from the statute in which the law mandates disclosure. In this atmosphere, in which cancer is seen as an incurable disease whose course is invariably an "obscene" progression toward death, secrecy seemed the only moral response (Sontag, 1977).

This was my father's belief and that of my mother's doctor, an older physician in his sixties, a careful, cautious, and caring gentleman. In the context of my mother's particular cancer, an aggressive one for which there was no known treatment and no one had survived longer than one year, hope was seen as her only chance, and maintaining the fiction that she could "beat" the cancer was seen as the only way to sustain hope.

Learning that she would die a middle-aged woman, not an old woman, learning that I would never have the pleasure of seeing her pleasure in being a grandparent to my children was utterly devastating. I was plunged into a grief I feel to this day and I couldn't imagine not sharing that grief with her. And yet, that was precisely what was demanded of me. Silence was seen as goodness; speech as selfish. Her hope was cast as requiring ignorance of her fate, and imagined solely in terms of survival. I was to be a witness of my mother's inevitable decline and never to acknowledge the implications of what I saw. I was an unwilling witness to this charade and thwarted from having a

mutual engagement with her about her impending death.

These conditions, and others that tangled me in a web of deception viewed as "love" by family members, propelled me to reckon with questions about voice, witnessing and hope. I learned painfully that I did not agree with prevailing medical practices in relation to illness and death. My mother's doctor convinced my father that my mother knew how to ask questions. Therefore, if she wanted to know the "Truth," she would ask.

I had a different view. My mother was unfailingly considerate. She took great pains to make others comfortable. It seemed clear to me that she would wait for a cue from us that *we* would not be upset if she broached the topic of her dying. Put in more conceptual terms, I saw voice not as an individual's achievement of self-knowledge but, rather, a possibility that depends on the willingness of the listeners that make up the person's community. In this view, voice is contingent on who listens with what attention and attunement. Voice depends on witnessing. This focus turned my attention away from voice itself to the contexts within which voice is produced; it turned my attention to witnessing (Weingarten, 1997; Weingarten & Worthen, 1998).

We are all always witnesses. People speak, we hear, whether we choose to or not. Events explode in front of us, whether we want to see or not. We can turn on television, see people in moments of extremity, and know their fate before they do.

Although the last two decades have seen an explosion in our understanding of trauma, and books and articles abound on the psychology of the victim of trauma, there is still very little written about the psychology of the witness. [This is what my current work focuses on.]

Witnessing takes place in and out of

spoken and written language. Witnessing fractures language in ways that mirror the fracturing of language experienced by those whose experience is witnessed. Judith Herman, a psychiatrist, in her book *Trauma and Recovery* (1992), writes eloquently about the aftermath of violence in situations of domestic abuse, as well as the effect of political terror:

Witnesses as well as victims are subject to the dialectic of trauma. It is difficult for an observer to remain clearheaded and calm, to see more than a few fragments of the picture at one time, to retain all the pieces, and to fit them together. It is even more difficult to find a language that conveys fully and persuasively what one has seen. Those who attempt to describe the atrocities that they have witnessed also risk their own credibility. To speak publicly about one's knowledge of atrocities is to invite the stigma that attaches to victims. [p. 2]

Whether in the context of massive, calculated, large-scale violence or small, unintended violations, witnesses assume risks. First, there is the risk that attends grasping—even for a second—the experience of another. Then, there is the risk of staying with the other, extending the moment of perception until another reality circulates coterminously with one's own. Finally, there is the risk of attempting to share what one has learned from a perspective that is at once one's own and another's.

Precisely because witnesses so frequently encounter problems of representation, witnesses struggle not only with what they have seen, but also with how to render to others what they have seen. Some witnesses give up, lapsing into pregnant silence. Others do their best. Still others take on the task of faithful representation as their life work, shaping words or color or sound until sensation is rendered so vividly that the witness re-witnesses

that which she has opened a way for others to witness as well.

In *Country of My Skull*, the poet and parliamentary editor for South African Broadcasting Company radio, Antjie Krog (1998), who covered the Truth and Reconciliation hearings for the South African Broadcasting Company, eloquently describes the process of becoming and being a witness. Listening to how “the arteries of our past bleed their own peculiar rhythm, tone, and image,” she observes that by the second week of hearings, a mere ten days, she is without language (p. 51). Then a pattern emerges: “Week after week, voice after voice, account after account. It is not so much the deaths, and the names of the dead, but the infinite web of sorrow woven around them. It keeps coming and coming (p. 45).” She begins to understand what she has been called to witness and what witnessing will exact of her. She inhabits witnessing: “I can talk of nothing but the Truth Commission. Yet I don't talk about it at all.” Her very job, the act of rendering what it pierces her to hear, becomes a dilemma: “No poetry should come forth from this. May my hand fall off if I write this. . . . So I sit around. Naturally and unnaturally without words. Stunned by the knowledge of the price people have paid for their words. If I write this, I exploit and betray. If I don't, I die” (p. 66).

And then there is a realization that in capturing a particular memory in words, for victim and witness alike, it can “no longer haunt you, push you around, bewilder you, because you have taken control of it—you can move it wherever you want to” (p. 57). Through words. Finding words. And then words come, like the water that runs through pipes that have temporarily frozen, words rush out. Not any words. Words that come from seeing: “Seeing for ages, filling the head with ash. No air. No tendrils. Now to seeing, speaking is added

and the eye plunges into the mouth” (p. 42).

“The eye plunges into the mouth.” Force propelling language. I know about this from the witnessing I do in the context of domestic trauma, in particular, sexual abuse. I have worked as a clinical director of a sexual abuse evaluation and treatment team for the last decade. In that capacity, I have heard hundreds, perhaps thousands, of stories of sexual violation, all extremely different, all bizarrely the same. In addition to my working with the victims—the survivors—of the abuse, I also supervise the therapists who work with the survivors, young girls and boys, and not-so-young girls and boys.

The therapists I work with are all compassionate witnesses. They are men and women who have made a commitment to listen with open minds and hearts to the stories of those who have been physically, mentally, emotionally, and spiritually assaulted. They have made a commitment to feel in the cells of their bodies what it is like to be touched against one’s will, to be penetrated beyond one’s ability to imagine a way to make it stop. And, they have made a commitment to try to render that experience to others on behalf of their clients.

In supervision, these therapists, my friends and colleagues, encounter the dilemmas of witnessing that Charlotte Delbo, a Frenchwoman who survived the concentration camps of the Holocaust, describes as a problem of two kinds of memory. She distinguishes “external, intellectual memory,” which allows the speaker to use conventional expression to render experience and then “deep memory,” which “preserves sensations . . . [and which] will renew trauma and throttle speech” (Glendinnen, 1999, p. 30).

My supervisees, using the language that flows from external, intellectual memory, can tell me about their clients, but when

they try to speak from deep memory—even though their memory is a memory removed or distanced from the body in which the sensations were felt—their speech is throttled. We often know we have entered the zone of deep memory because we feel quiet in the room, not an uncomfortable stillness, but the sacred stillness that those of us who have dedicated ourselves to working with the victims and survivors of abuse know so well. It is the moment when we know we are struggling to descend into the abyss, to see it, to render it, to share this with another equally dedicated soul, and to emerge in some relation to the effort more sad, more sober, and, yes, more free.

We are determined witnesses willing ourselves to testify about soul-shattering atrocities, experiencing the fracturing of language as surely as those whose stories we witness. Witnesses are one layer away from chaos. Their efforts to “explain the inexplicable” (Delbo, in Glendinnen, 1999, p. 54) are as fragmented as are the experiences of those who suffer. “The narrative of trauma is itself traumatized, and bears witness to extremity by its inability to articulate directly or completely (Forché, 1993, p. 42).”

We rely on the poets among us to, in the words of Audre Lorde, “give names to the nameless so it can be thought.” Here is a poem by Marie Howe (1999) from her collection *The Good Thief*. In it, the poet is an unwilling and an inadvertent witness to her sister’s sexual abuse.

No matter how many times I try I can’t stop  
my father  
from walking into my sister’s room

and I can’t see any better, leaning from here  
to look  
in his eyes. It’s dark in the hall

and everyone’s sleeping. This is the past  
where everything is perfect already and nothing changes,

where the water glass falls to the bathroom  
floor  
and bounces before breaking.

Nothing. Not the small sound my sister  
makes, turning  
over, not the thump of the dog's tail

when he opens one eye to see him stumbling  
back to bed  
still drunk, a little bewildered.

This is exactly as I knew it would be.  
And if I whisper her name, hissing a warn-  
ing,

I've been doing that for years now, and still  
the dog  
startles and growls until he sees

It's our father, and still the door opens, and  
she  
makes that small *oh* turning over.

In Marie Howe's poem, the speaker, having been an unwilling and inadvertent witness in that already perfect past where nothing changes, is now also a determined witness, drawing on "deep memory" to find language for sound, the thump of the dog's tail, the bounce of the bathroom glass; for sight, the darkness of the hall; and for kinesthesia, the leaning from here, for the purpose of turning private pain into public purpose. The poet makes black marks on white paper so that the nameless can be named, so that truth can be told, so that others can be brought into the intimate dramas of lives where brutality exists alongside love.

### A Typology of Witnessing

In preparing for my trip to South Africa, I read whatever accounts I could find of the Apartheid years, the struggle against Apartheid and the post-Apartheid years. That reading, in conjunction with the theoretical work I have done on silence/

voice/witnessing, came together for me one February day, and I drew a two by two grid that I labeled a "Typology of Witnessing." Each square was teeming with stories for me; each geometric box really a time capsule, a map of journeys people had taken. In the original figure, the top caption was "Awareness": the left box was labeled "aware" and the right, "unaware." The side caption was "Empowerment": the top box was labeled "empowered" and the bottom, "disempowered." In my presentation, each box was a different hue,<sup>2</sup> playing on the meanings of the colors of a traffic light: green [white] for aware and empowered; red [right-slanted lines] for unaware and empowered (the most dangerous of the witnessing positions for others, and the position out of which I would most want people to shift); yellow [left-slanted lines] for aware and disempowered; and black, void, for unaware and disempowered (see Figure 1). I reined myself in from working with the South African stories I had come to inhabit, feeling presumptuous to start with stories I did not know first-hand, and instead fit to the little grid the story of witnessing my mother's cancer diagnosis and death.

My mother remained throughout her illness and dying, unaware of her condition and disempowered in relation to knowledge of her own demise. She was kept in ignorance, an oblivious witness to her own death. She was trapped in the black square; we trapped her there. I was in the yellow box, an aware and disempowered witness, helpless to get my father or my mother's doctor to change their views. I believed that my mother had no hope of a cure and, therefore, the one achievable hope she had—we all had—was to stay in authentic connection to each other throughout her illness and death. This

<sup>2</sup> For purposes of the Figures in this article, color or design is denoted in brackets.

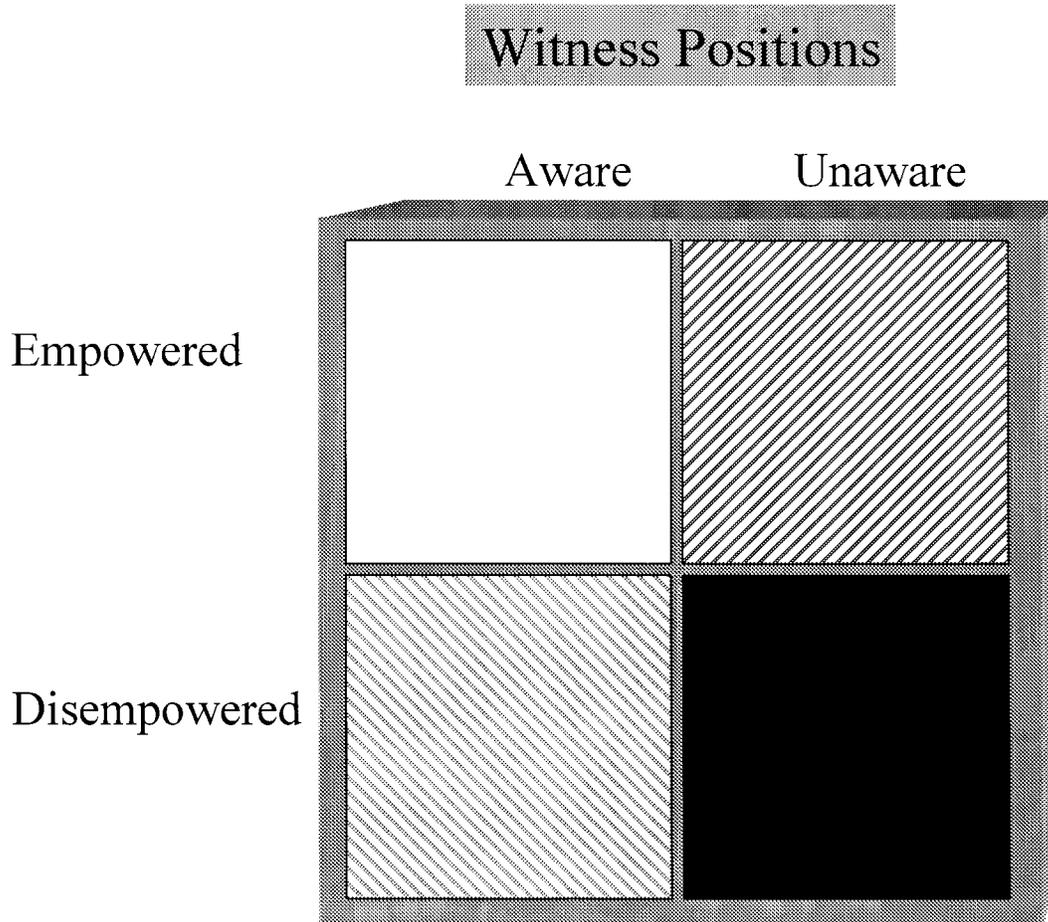


FIG. 1. A typology of witnessing.

required her being an aware and empowered witness to her embodied self. I wanted her to journey out of the black square of the void—out of the darkness—into the green box of awareness and empowerment. She could not be an aware and empowered witness in relation to a cure, but she could be an aware and empowered witness in relation to knowledge of her own demise.

This was not to be the case. My father and her doctor saw themselves as aware and empowered witnesses to my mother's fate. I saw them as empowered and unaware witnesses to my mother's state. But they remained in power, in the red square,

creating the most painful circumstance of my adult life to that point.

I do not for one minute think that the situation I have just described provides an analogue to the conditions within South Africa. Issues of scale fracture any analogy. However, the story does demonstrate how power/knowledge and contested truth claims create and shape differing witnessing positions. In this way, my family's story does provide a bridge to the stories of South Africans and their journeys through differing witness positions.

Although the diagram is two-dimensional, it is essential to grasp the three-dimensional implications of the grid. A

witness is created when there is a victim and a perpetrator, but people can occupy multiple positions in this triangle at any one time, and over time. My mother was both victim and witness. My father was a victim of the doctor's superior knowledge claims, a perpetrator of the doctor's unyielding point of view, and a witness to his wife's ignorance and his daughter's frustrated rage.

Witness positions can change over time (see Figure 2). Every witness position creates consequences for the individual, family, community and society (see Figure 3). Although I will argue that it is desirable to be an aware and empowered wit-

ness, I will also argue that there are risks: again, to the individual, family, community, and society. There are consequences of each witness position at each level of system organization.

Nelson Mandela's autobiography (1994) illustrates many features of this grid. The contours of Mandela's life in relation to Apartheid are well-known to South Africans. His personal journey from the black square to the yellow square of awareness without empowerment to the green square of awareness and empowerment has affected the lives of all South Africans and the lives of many peoples in the world. The consequences of his different witness posi-

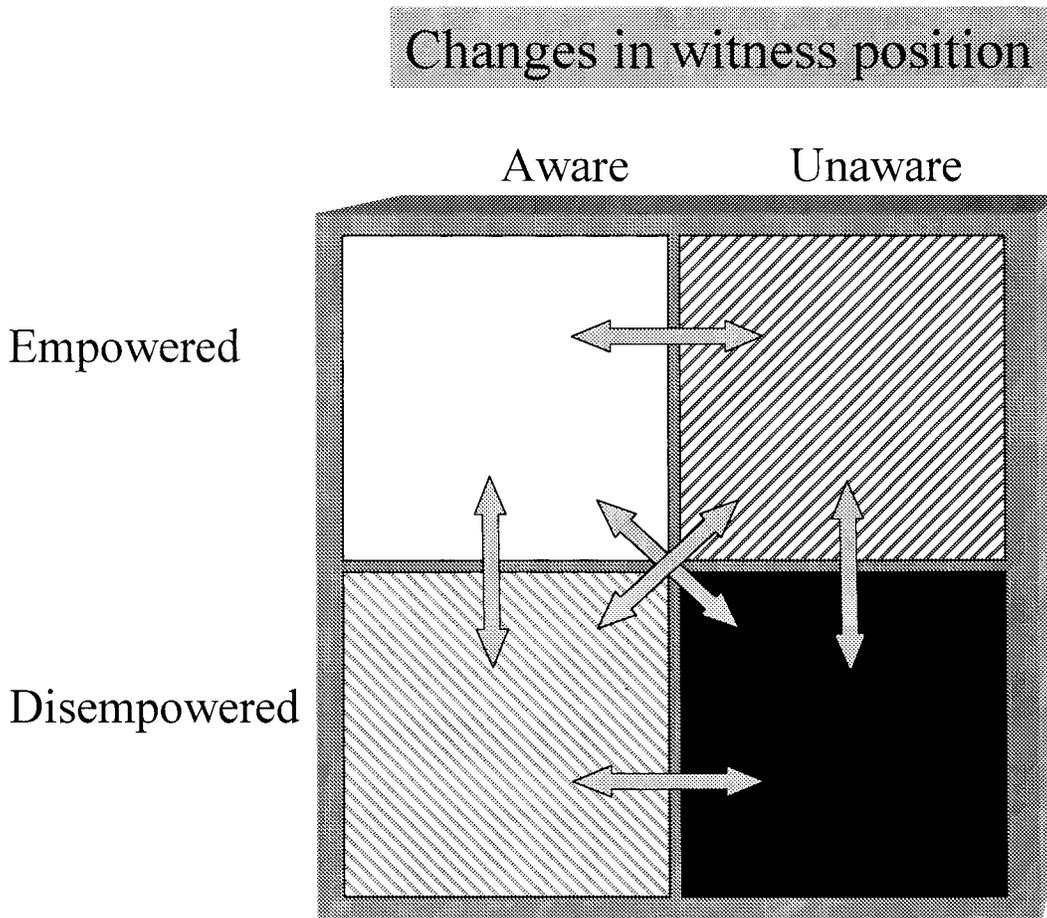


FIG. 2. Witness positions can change over time.

## Each witness position affects:

- Individual

- Family

- Community

- Society

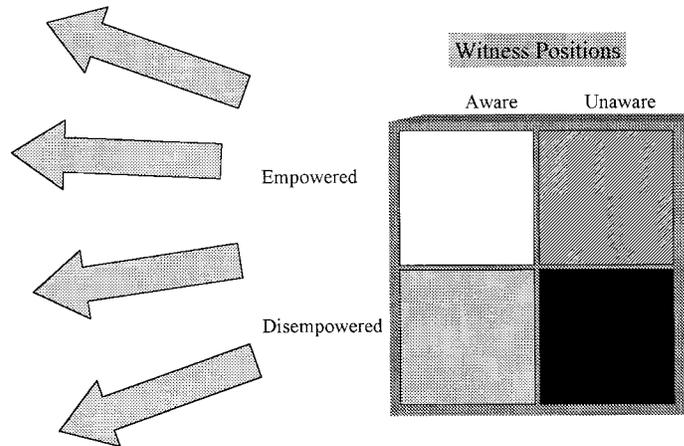


FIG. 3. Each witness position has consequences for the individual, family, community, and society.

tions entailed 27 years of imprisonment for him; his family's loss of their beloved husband, father, and son as well as constant attacks on the lives of family members; and turmoil and freedom for his country. He precipitated many people's journeys out of the dangerous red box of unaware empowerment.

A few illustrations will call to mind many others. While still a young child, Mandela's father defied a white magistrate and in retaliation, the magistrate deprived Mandela's father of his fortune and title. Mandela was an unaware, disempowered witness to this event. He writes: "I was unaware of these events at the time, but I was not unaffected." His family lived in straitened circumstances, and his mother moved to a different village where she could have the support of friends and relatives. This move turned out to provide Mandela with the happiest years of his childhood.

The case of Mandela's guards is also instructive. While on Robben Island, Mandela acted with kindness and compassion toward his guards, several of whom shifted their witness positions due to their observations of this extraordinary man. Starting from positions in the red box, empowered but unaware of the real effects of Apartheid, several of his guards developed an awareness of the Apartheid system that rendered them no longer suitable as guards. Over time, they moved from the red to the yellow box—awareness but disempowerment since they were no longer capable of being faithful enforcers of the Apartheid system.

During the struggle, most activists were in the yellow box, aware and disempowered witnesses in relation to Apartheid. Ruth First was among them. She lost her life in exile, working for the cause of freedom. At the climactic moment of the movie I saw, her daughter, Shawn, pleads

with her mother to release her from being an unaware disempowered witness to her mother's distress and her country's turmoil. Her mother lovingly confides in her, a little, permitting her daughter to be a compassionate witness both to herself and to her country. In the movie's final scene, in a black township, mother and daughter raise their fists in a sign of solidarity with their fellow black South Africans while convoys of the South African Defense Force disturb the early morning convocation.

### Doing Hope

My daughter, Miranda, the same young girl who wanted to be a determined witness to my experiences as a cancer patient, whose appeals to me were fended off as not credible—how could a young child possibly bear her mother's fear and pain?—was begging to be released from her own black box of unaware and disempowered witnessing. She rightly intuited that aware and empowered, and joined with me, in the green box, she could contain the chaos of terror.

We did work out what has become the *modus vivendi* of our relationship. It defies conventional wisdom about parents and children, mothers and daughters, but life circumstances have brought us to this place. Following convention would do violence to the reality of our bond and our situation. Accepting it was a struggle for me. Watching the depiction of Ruth First and her daughter Shawn Slovo helped me understand that, above all else, Miranda wished to stay connected to me and, like Shawn Slovo, she was/is willing to assume the risks of knowing her mother well. To this day, she is a compassionate witness to my life.

Nor is this a fluke. I can see that she is acting on the basis of something that her father and I have taught her. Miranda was born with a rare genetic disorder and it was years before we were confident that she would live. After we were told of her

life-threatening condition, when she was 4-hours-old, my husband and I held each other. We did not weep; we made a plan. He went to the special care nursery where Miranda was lying in a small metal crib and I, still groggy from the anesthesia for the emergency caesarian, started making phone calls to the family and friends who would join us when Miranda was 17-days-old to name her and to celebrate her life. Each phone call I made provided a temporary respite from my fear and created a witness for that moment. Knowing that people would surround us created the image of support that I could then summon to plan a ceremony for a child who might not survive to be present for it.

These very early events, from a time even before Miranda's memory, became some of her earliest remembered stories. They set Miranda's template for matters of life and death, creating the expectation that she would never be alone. Later, it turned out, she expected no less of herself. Matters of life and death are too hard, too onerous, too painful to "do" alone.

I, we, taught her to turn to others. I wanted her never to feel alone. I wanted her to understand that although it was her body that suffered, we were containers into which she could "pour" the stories of her suffering. I wanted her never to feel that anything she thought or felt was too different or weird or difficult to share with us.

She had much to share. Her body was unreliable, often causing her pain and discomfort. Her disorder was so rare that she—we—didn't have the small comfort of understanding what was happening to it. Miranda tried to tell her friends about her medical problems, but their fears more often than not overwhelmed them, and they discouraged her from talking to them.

Researchers who study the interactions of trauma survivors and those to whom they would wish to tell their stories note

that hearing the distress of others may produce one's own psychological distress. This is so much the case that it is a natural impulse for listeners to withdraw from the conversation or to downplay the sufferer's pain. But talking is crucial to recovery. The researchers conclude that the effect on the sufferers is unvarying. Sensing the listener's apprehension, sufferers stop talking (Pennebaker, 1997).

I did not want this to happen to Miranda. In March 1995, Miranda dislocated one hip and both of her shoulders. Her friends found her situation disturbing and upsetting. They asked, "Why did it happen when you were just sitting on the couch?" Miranda had no explanation.

People who study narratives talk about whether they are coherent or not: that is, do they make sense to most people (Weingarten & Worthen, 1997). Unlike my cancer story, Miranda's stories about her disorder rarely make sense. They lack coherence. I couldn't bear that this particular feature of her disorder should contribute to the isolation she already felt. I determined to create a context in which the fact that Miranda's narrative of her condition was often incoherent would not matter. I suggested to her that she and I design a ceremony and invite a group of friends and helpers whom she would trust to share the history of her living with her disorder. Open to anything, Miranda agreed.

The ceremony made vivid for us that our family needed to create forms of being with others that more accurately reflected how we conceptualized our experience. Fervently believing that it was "unjust" for Miranda to bear her pain alone, and disavowing the idea that pain is inherently an individual and personal matter, we expanded the boundaries of our support beyond our family to a community of caring persons (Weingarten & Worthen, 1997).

I understand from the reading I did in preparation for my trip to South Africa that there is an African philosophy that corresponds to the point of view my family adopted. I first encountered this philosophy in Australia, in 1999, when I attended a workshop given by Lizzy Ramantsi, Dirk Kotze and Elmarie Kotze entitled, "Keeping Ubuntu Alive: Caring for People and Community." I then read more about Ubuntu in several books, including in Antjie Krog's book. In it I read a statement made by Archbishop Desmond Tutu: "In the African *Weltanschauung*, a person is not basically an independent, solitary entity. A person is human precisely in being enveloped in the community of other human beings, in being caught up in the bundle of life. To be . . . is to participate (Krog, 1998, p. 143)."

The *Weltanschauung* of Ubuntu—so ironic to place a German word next to the already Anglicized African word—fits me. From the wisdom that sorrow has brought me, I have needed to invent in Boston what is deeply rooted, known, and felt in South Africa. As an outsider to South Africa, it seems to me that Ubuntu creates persons simultaneously as participants and witnesses to everyone else in one's community. What are the dilemmas of witnessing in the context of Ubuntu? Do people who live the spirit of Ubuntu "downplay the trauma sufferers' pain or withdraw from the interaction altogether," as North American researchers claim is "natural?" (Pennebaker & Harber, 1993, p. 129).

Would those who practice Ubuntu find the work I have done on hope "natural" and not strange, as North American audiences do? I certainly arrived at my ideas about hope naturally, that is, as a natural extension of the moral and ethical commitment I have made to be a determined witness to those who suffer. Many who consult me tell me that they are hopeless.

They describe a process of self-assessment undertaken while suffering and they observe that they are bereft of hope. They diagnose a deficiency: they are empty of hope.

This is serious. Hope confers advantages in numerous ways. Higher-hope individuals both feel more positively and have more positive thinking than those with lower hope. Studies with college students show that high-hope individuals think more positively about themselves. In studies done with children, high-hope children are able to associate themselves with positive events in their environments and distance themselves from negative events in their environment. For children, this ability correlates with coping in that it increases their feelings of competence and decreases their feelings of depression. In the realm of problem solving and coping, hope is also a significant factor. Those with higher hope scores are better at problem-focused coping than those with lower hope scores, even when controlling for optimism and negative affect. Finally, hope confers advantages as people cope with illness and disability (see Snyder, Cheavens, & Michael, 1999). Hope is very important.

Yet we in North America are burdened with the legacy of our hope myths. Most North Americans are familiar with one or another version of the myth of Pandora. In one version, Pandora is sent by Zeus to punish Prometheus and his brother Epimetheus for stealing fire from heaven, and to punish man for accepting the gift. Epimetheus eagerly accepts Pandora from Zeus but does a poor job of orienting Pandora to her new surroundings. Before long Pandora begins exploring her new home. In one of the rooms, she finds a jar into which Epimetheus has placed all the noxious items with which he didn't want to burden man. Fascinated by the jar, Pandora removes the lid and out fly all the

miseries now known to man. Horrified by what she sees, Pandora slams the lid back on the jar, in time to keep hope inside.

Another version of the myth is much more direct about asserting the value of hope. In it, not only is hope good, but so is Zeus. He sends Pandora to bless man and provides her with a box into which every god has put a blessing. For reasons that are entirely unclear in this version, she opens the box and all the blessings, except hope, escape, making it the only blessing available to mortals.

Although there are many versions of the myth, in each hope remains in a closed space, contained, whether in a box or a jar. Hope is alone, inside one object. Taking the liberty to analogize, I believe these renditions of the myth—every one I was able to find—construe hope as residing inside one object, and by analogy, one individual. Hope is solitary, solo, alone. This view corresponds with the common Western view of hope as a feeling that is the property or quality of one individual.

Certainly those who consult me think this way. Recently, a 40-year-old mother of two consulted me after learning that her breast cancer had metastasized to her hip and her skull. She was furious and, with tears streaming down her cheeks, she said, "I am hopeless. I have no hope."

I responded to her with words that express the achievement of my lifetime, words forged from years of thinking about my mother's dying; the years I spent thinking over and then rejecting the idea that talking with my mother about her imminent death would have been selfish because it would have taken away her hope. Words forged from years of witnessing Miranda's suffering and committing myself to be a container wide enough and deep enough so that she would never feel alone. Words forged from tears shed in the presence of clients who have shared with me language-fracturing trauma at the

hands of parents who loved them. Words that have turned away from the idea of hope as a feeling that individuals either do or do not have.

"Of course, you feel hopeless." I told her. "It is not your job right now to feel hope. Rather, it is the responsibility of those who love you to *do hope* with you."

Hope is something we do with others.<sup>3</sup> Hope is too important—its effects on body and soul too significant—to be left to individuals alone. Hope must be the responsibility of the community. Where this is so, and when this is so, there will be a sense of wonder, which has been called the abyss where radical amazement occurs. There is an abyss. Often. We can look across or we can look in. We can find ourselves in it or know others who are. When we enter the abyss, when we see it, then radical amazement is ours. Ours. Together. With hope.

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<sup>3</sup> This idea was stimulated by a quote attributed to Katherine Patterson in *The New Beacon Book of Quotations by Women* (Rosalie Maggie, ed). Boston: Beacon Press, 1996, p. 320.

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