Chapter One

“MILDRED, IS IT FUN TO BE A CRIPPLE?”

THE CULTURE OF SUFFERING IN

MID-TWENTIETH CENTURY AMERICAN

CATHOLICISM

A shut-in should let people know he is the same as other people and not from another planet.

Sal Cavallaro, “A Shut-in’s Day”

To be a handicap does not mean that you are sick or mentally retarded. A handicap can have a full, healthy, happy life, just like their fellow human beings. There is no need for them to be put or live in the back room.


ON THE FIRST SATURDAY of every month in the 1960s my uncle Sally, who has cerebral palsy, used to go to a different parish in New York City or its suburbs for Mass and devotions in honor of Our Lady of Fatima and then afterwards to a Communion breakfast sponsored by that month’s host church. These special outings for “shut-ins” and “cripples”¹ were organized by the Blue Army of Mary, an association of men and women dedicated to spreading the messages of apocalyptic anti-Communism and personal repentance delivered by Mary at Fatima in 1917.² My uncle would be waiting for my father and me in the hallway of his mother’s apartment, dressed in a jacket and tie and smoking cigarettes in a long, imitation tortoiseshell holder that my grandmother fitted between the knotted fingers of his left hand. He smoked by holding his forearm stiff on the green leatherette armrest of his wheelchair, then bending his torso forward and bringing his legs up until his lips reached the burning cigarette. He was always afraid that my father wouldn’t show up, and as his anxiety mounted, my uncle clenched again and again over his cigarettes so that by the time we got there—always early—the foyer was dense with smoke.

We laid Sally down on his back on the front seat of the car. My grandmother, in an uncharacteristic moment of hope and trust, had taken my
uncle as a boy to a mysterious doctor on the Lower East Side who said he
could make him walk. Instead, he had locked Sally’s legs at the knees,
sticking straight out in front of him, fusing him into a ninety-degree angle,
and then had vanished. Sally reached back, hooked his right wrist into the
steering wheel, and pulled himself in while we pushed. When he was in
the car up to his legs, my father leaned in over him and drew him up. He
angled my uncle’s stiff limbs under the dashboard and wedged them in.

My father went around the car and dropped in the other side. He
looked over at his brother-in-law, the two of them sweating and panting.
“Okay?” he asked. My uncle nodded back.

We drove to a designated meeting place, usually another church’s park-
ing lot, where members of the Blue Army, wearing sky-blue armbands
printed with an image of the Virgin of Fatima and the legend “Legion of
Mary,” helped us pull my uncle out of the car. Other cripples were arriv-
ing. The members of the Blue Army knew who wanted to sit next to each
other, and they wheeled my uncle’s friends over to him, locking them in
place beside him. He greeted them solemnly, not saying very much. From
here a big yellow school bus would take the cripples out to the church;
we’d follow in the car. My uncle was anxious to get going.

The wheelers teased him in loud voices whenever they brought a
woman over. “Here’s your girlfriend!” they shouted. “I saw her talking to
So-and-So yesterday! Aren’t you jealous?! You’re gonna lose this beautiful
girl! Come on, Sal, wake up.” They pounded my uncle on the back.
“Don’t you know a good thing when you got it?” Their voices and ges-
tures were exaggerated, as if they were speaking to someone who couldn’t
understand their language.

The women rolled their heads back and laughed with bright, moaning
sounds, while their mothers fussed at their open mouths with little em-
brodered handkerchiefs, dabbing at saliva. “Calm down, calm down,”
they admonished their daughters, “don’t get so excited.”

My uncle laughed too, but he always looked over at me and shook
his head.

There was a statue of San Rocco on a side altar of the Franciscan church
of my childhood. The saint’s body was covered with open, purple sores;
tending to the bodies of plague victims, he had been infected himself. A
small dog licked the open sores on his hands. The Franciscans told us that
Saint Francis kissed a leper’s sores. Once he drank the water he had just
used to bathe a leper.

One woman, a regular of the First Saturday outings, came on a stretcher
covered with clean sheets in pale, pastel colors; her body was immobile.
She twisted her eyes up and looked out at us through a mirror fixed to
the side of the stretcher, while her mother tugged at her dress to make
sure it stayed down around her thin ankles.

These were special people, God’s children, chosen by him for a special
destiny. Innocent victims, cheerful sufferers, God’s most beloved—this
was the litany of the handicapped on these First Saturdays. Finding them-

selves in front of an unusual congregation, priests were moved to say from
the pulpit at mass that the prayers of cripples were more powerful than
anyone else’s because God listened most attentively to these, his special
children. Nuns circulated among the cripples, touching their limbs kindly
and reverently, telling them how blessed they were, and how wonderful.
To be standing these mornings in a parking lot or church basement was
to be on ground made holy by the presence of beds and wheelchairs and
twisted bodies.

At breakfast, the mothers of the cripples hovered over them. They held
plastic straws, bent in the middle like my uncle, while their children drank
coffee or juice; they cut Danishes into bite-sized pieces; they cleaned up
spills. Volunteers from the parish and members of the Blue Army brought
out plates of eggs and sausage.

“You have such a big appetite this morning!”

“Can you eat all that? God bless you!”

“If I ate like you I’d be even fatter than I am!”

But why had God done this to his most beloved children? What kind of
love was this? What kind of God?

When he was done with his coffee, my uncle cupped himself around
his cigarette.

Physical distress of all sorts, from conditions like cerebral palsy to the
unexpected agonies of accidents and illness, was understood by American
Catholics in the middle years of the last century as an individual’s main
opportunity for spiritual growth.³ Pain purged and disciplined the ego,
stripping it of pride and self-love; it disclosed the emptiness of the world.
Without it, human beings remained pagans; in physical distress, they
might find their way back to the Church, and to sanctity. “Suffering makes
saints,” one hospital chaplain told his congregation of sick people, “of
many who in health were indifferent to the practices of their holy reli-
gion.”⁴ Pain was a ladder to heaven. The saints were unhappy unless they
were in physical distress of some sort. Catholic nurses were encouraged
to watch for opportunities on their rounds to help lapsed Catholics renew
their faith and even to convert non-Catholics in the promising circum-
stances of physical distress.⁵

Pain was always the thoughtful prescription of the Divine Physician.
The cancer afflicting Thomas Dooley, the handsome young doctor and

missionary to Southeast Asia in the 1950s who completely captured American Catholic hearts, was celebrated in Catholic popular culture as a grace, a mark of divine favor. Dooley himself wrote, “God has been good to me. He has given me the most hideous, painful cancer at an extremely young age.” So central was pain to the American Catholic ethos that devotional writers sometimes went as far as to equate it with life itself—“The good days are a respite,” declared a laywoman writing in a devotional magazine in 1950, “granted to us so that we can endure the bad days.”

Catholics thrilled to describe the body in pain. Devotional prose was generally overwrought, but on this subject it exceeded itself. There was an excess of a certain kind of sensuous detail in Catholic accounts of pain and suffering, a delicious lingering over and savoring of other people’s pain. A dying man is presented in a story in a 1937 issue of the devotional magazine *Ave Maria* as having “lain [for twenty-one years] on the broad of his back, suffering from arthritis . . . his hands and fingers so distorted that he could not raise them more than an inch . . . his teeth set . . . so physically handicapped that in summer he could not brush away a fly or mosquito from his face because of his condition.” It was never enough in this aesthetic to say simply “cancer,” stark as that word is. Instead, it had to be the “cancer that is all pain.” Wounds always “throbbed,” suffering was always “untold,” pain invariably took its victims to the very limits of endurance.

The body-in-pain was thrilling. Flushed, feverish, and beautiful—“The sick room is rather a unique beauty shop,” one priest mused, where “pain has worked more wonders than cosmetics”—it awaited its lover. A woman visiting a Catholic hospital in 1929 came upon a little Protestant girl who was dying and reported:

> He has set His mark upon her. Somehow you guess; those frail little shoulders are shaped for a cross, those eyes are amber chalices deep enough for pain, that grave little courteous heart is big enough to hold Him! He will yet be her tremendous lover, drawing her gently into His white embrace, bestowing on her the sparkling, priceless pledge of His love—suffering.

Pain had the character of a sacrament, offering the sufferer a uniquely immediate and intimate experience of Jesus’ presence. Walking amid the “couches of pain” laid out for the sunset service at Lourdes, an American visitor suddenly sensed that “he is here now. . . . Almost I can hear him speak,—almost I can reach out and touch his garment.” Another writer reported that she knew “a very holy nun who is herself one of God’s chosen ones” (meaning that she is afflicted with the most severe pain), “and one day she said something to me that I have never forgotten. She said, ‘Sometimes God’s hand seems to rest so heavily upon our shoulder,
and we try to squirm away, and we cry, Oh, let me be! And then we begin
to realize how tender as well as how heavy is His hand, and we want it
there.’”

This was a darkly erotic aesthetic of pain, one expression of the wider
romanticism of American Catholicism in this period. But for all this
culture’s fascination with physical distress, the sensual pleasure it took in
feverish descriptions of suffering, it was also deeply resentful and suspi-
cious of sick persons. A nasty edge of retribution and revenge is evident
in these accounts. In one priest’s typical cautionary tale of pain, “a young
woman of Dallas, Texas, a scandal to her friends for having given up her
faith because it interfered with her sinful life, was severely burned in an
explosion. Before her death, through the grace of God, she returned to the
Church.” According to a nursing sister, writing in the leading American
Catholic journal for hospital professionals, Hospital Progress, in 1952:
“Physical disability wears off the veneer of sophistication and forces the
acceptance of reality. It is difficult for a patient imprisoned for weeks in
a traction apparatus to live in a state of illusion.” Pain gives people their
comeuppance. It serves as chastisement and judgment.

The Catholic tradition was ambivalent about the moral status of the
sick. Despite constant injunctions to the contrary, a persistent identifica-
tion was made between sickness and sin—not only sin in general or Origi-
nal Sin, but the specific sinfulness of the person in pain—and the suspicion
of all physical suffering as merited was never completely absent from de-
votional culture. “You may complain and moan about a single tooth-
ache,” Father Boniface Buckley chided the readers of Sign in 1945, but
be “woefully forgetful of the fact that this particular pain may be due in
justice for some sin of that very day.” God always has a reason for send-
ing pain. Theology’s restraint is evident here in Father Buckley’s use of
the conditional. More commonly, devotional writers threw such cautions
to the winds in order to score some moral points with pain. Learn to take
your pain the way a man takes his hangover, another priest scolded, and
admit that “you asked for it.”

The association between physical sickness and moral corruption was
reinforced throughout American Catholic popular literature by the persist-
tent use of metaphors of illness to describe threats to the social fabric and
sources of political and moral decay. As the editor of Ave Maria put it,
aphoristically, in 1932, “Error is due to thought germs,” against which
only mental and moral hygiene is an effective prophylactic. Another
writer even suggested that to visit the sick was to “stand by the bedside
of our soul-sick world.” The persistent metaphorical use of leprosy to
excoriate various moral dangers was so egregious in the Catholic press
that missionaries among sufferers of Hansen’s disease regularly com-
plained of the effect this usage was having on the people in their care.
This was not an unusual rhetorical device, of course, but it achieved its own peculiar, disorienting resonance in Catholic devotionalism, where images of the body-in-pain were used to suggest both the depths of corruption and the highest reaches of spiritual glory. In the case of the leper, the two discrepant usages converged: the leper was at once physically—and morally—scrofulous and (potentially) sacred.\(^\text{22}\)

As American Catholics interpreted an ancient tradition in their contemporary circumstances, the idea that sickness was punishment for something the sufferer had done took deeper hold. The more sentimental view of sickness as the training ground for saintliness was commonly reserved for people with genetic or birth trauma conditions, such as Sal and his friends. Their suffering, at least, could not be attributed to any moral failure since they were born this way. The innocence of people born with disabilities made them central to the elaboration of the gothic romance of suffering; because they were “innocent,” unalloyed spiritual pleasure could be taken in the brokenness of their bodies. There was a cult of the “shut-in” among American Catholics in the middle years of the twentieth century, a fascination with “cripples” and a desire to be in some relation to them, which was thought to carry spiritual advantages. In the summer of 1939, Catholic Women’s World, one of the most modern and upbeat of the Catholic magazines, set up a pen-pal system so that readers going away on vacation could write to shut-ins about their trips. The project was so popular that “many readers have written to us requesting that we put them in touch not only with one, but as many as three or four shut-ins.”\(^\text{23}\)

There were a number of organizations dedicated to harnessing the spiritual power of shut-ins and putting it to work for the rest of the church, such as the Catholic Union of the Sick in America (CUSA), which formed small cells of isolated handicapped persons who communicated through a round-robin letter and whose assignment was to direct their petitions, more powerful by virtue of their pain, toward some specific social good.\(^\text{24}\) The spiritual pleasure taken by the volunteers on the First Saturdays in their proximity to the handicapped was a reflection of this cult as well.

But the mistrust of the sick, the suspicion that their physical distress was the manifestation of a moral failing, lurked just below the surface of even the fantasy of the holy cripple. The eleventh-century “cripple” Hermann, who composed the Marian hymn “Salve Regina,” is described in one article as having been “pleasant, friendly, always laughing, never criticizing, so that everybody loved him.” Concluding, “What a record for a cripple!” the author implies that just the opposite could have been expected from a man like this.\(^\text{25}\) The subtext here is that if Hermann had not been so delightful, he would not have deserved love—there was nothing unconditional about this culture’s affection for cripples.
Apart from these “fortunate unfortunates,” a favorite Catholic term for people with disabilities, however ambivalently construed, sick people were guilty people, and, not surprisingly, they behaved as such. Sick people were generally depicted as malingering, whining, selfish, overly preoccupied with their own problems, indolent, maladjusted, and self-destructive. They exaggerated the extent of their distress. They were quick to yield to despair and loneliness. Wake up to the fact that life is a vale of tears, one priest scolded the ill, and get rid of your “Pollyanna attitude,” by which he meant stop hoping for relief. Above all, the sick could not be trusted. Without the astringent of religion, for example, lepers—even beloved lepers—would be “spiteful, cynical, and debauched,” according to one visitor to Molokai, and this was maintained as generally true of all sick people. As late as 1965, a Dominican priest writing in *Ave Maria* derided a sick person as a “spoiled child” and warned against “the tendency to remain in our suffering, to exaggerate the injustice, to pout.”

But what exactly constituted complaint? Were devotional teachers warning in these passages against the sometimes dark and self-defeating human impulse to protest the will of God or to rebel against the facts of life?

One Saturday the bus didn’t come. Something had happened somewhere along its route. The hot summer’s morning dragged on; the sidewalk around Sal’s chair was littered with cigarette butts; and the garbled messages—there’d been a crash, no, it was just a flat tire, he’ll be here any minute, he’s upstate—from the people in charge of the outing, meant to be reassuring, just made the confusion and anxiety worse.

A man I didn’t recognize, not one of the Blue Army regulars, strolled over to the back of Sal’s chair and gripped its rubber handles as if he were going to push my uncle off someplace. He winked at me and my father. Maybe Sal knew him from someplace. “So, Sal,” he boomed at the back of my uncle’s head, sounding pleased with his own cheerfulness, “looks like you’re gonna have to spend the night in this parking lot, hunh?”

My uncle gave an angry wave of dismissal, but the man behind him, comfortably resting his weight on his chair, went on. “Hey, Sal, you hear what I said? You’re gonna have to spend the night out here in the parking lot! I hope you got your blankets! Maybe we can get the girls over there to sing you a lullaby.”

My uncle rocked himself from side to side in his seat, as if he wanted to dislodge the man’s grip on his chair and move him out from behind his back. Bored with the game, the man let go. “Jesus, I hope we get the hell out of here soon,” he said to my father, and walked away.

Sal smacked the brakes off his chair with his hard, calloused hands and began to spin himself around in circles. My father tried to calm him down.
“Sally,” he said, “the bus’ll be here any minute, I know it. It’s probably just a flat tire. Come on, don’t get like this, you’re gonna make yourself sick.” But my uncle went on spinning. “Ahhhhhh,” he roared, “ahhhhh.”

Everyone teased the cripples, joked with them, and needlel them almost all the time. This may have been what the man behind Sally’s chair was doing, but I don’t think so. He was sweaty and angry. Maybe he was only there that morning because of his wife’s devotion to Our Lady of Fatima; maybe he hated cripples and the stories they told about the human body, of all that could and did go wrong with it. He had bent forward, over the back of Sally’s head and stared down at his bald crown and coarse gray hair. Maybe he hated the way the cripples drooled when they sucked up their coffee and juice on these Saturday mornings or the mess they made of Communion breakfast.

My uncle began to push himself along the parking lot’s chain-link fence, hitting the wheels of his chair with hard shoves. When he got to the end of the fence, where it connected with the church, he spun himself around and began pounding his way back.

Maybe the man found it hard to sustain the idea that Sal and his friends were holier than he was, closer to heaven, when they sprayed him with saliva and bits of egg.

My uncle wheeled around again and started back along the fence.

“This is the only guy I know,” my father said to me, “who can pace in a wheelchair.”

Someone came over and demanded that Sal stop. “Control yourself! These things happen, Sal,” she yelled at him, bending to lock his chair in place, but my uncle pushed her hand away and kept moving.

The morning wore on, and the fortunate unfortunates, disappointed and upset, got on everybody’s nerves.

“Complaint” meant any sound that the sick might make, any use of their voices, whether it was to ask for a glass of water in the middle of the night, to question a doctor’s decisions, to express a spiritual doubt, or to request that their bodies be shifted in bed. Hospitalized sick people who complained of physical discomfort were referred to in the *Voice of Saint Jude*, a periodical published at the Chicago shrine of the patron saint of hopeless causes, as “c.t.m.p.’s” (“cantankerous, tempestuous, maladjusted patients”). There was only one officially sanctioned way to suffer even the most excruciating distress: with bright, upbeat, uncomplaining, submissive endurance. A woman dying horribly of an unspecified cancer was commended by *Ave Maria* for having written “cheerful, newsy notes” home from the hospital, with “only casual references to her illness.”
the spirit of a fashion editor, one devotional writer counseled the chronically ill to “learn to wear [your] sickness becomingly. It can be done. It has been done. Put a blue ribbon bow on your bedjacket and smile.”

Visitors were instructed to urge their sick friends and kin to make the best use of their time; the sick should be happily busy and productive even in the most extreme pain. “Only two percent of the various types of pain are permanent and continual,” wrote Mary O’Connor in an *Ave Maria* article for the sick in 1951. She was onto their games. She knew they were likely to “wallow in the muck of self-pity or sympathy”; “If the sieges of pain let up a little now and then, take up an interesting hobby and throw yourself into it with all you’ve got. You’ll be delighted to find that your pain is lessening as a result.” Her own experience was exemplary in this regard: since the onset of her pain a decade earlier, she had written over two thousand poems, articles, and stories.

If such pitiless badgering failed to arouse the sick, against their sinful inclinations, to saintliness, there was always the scourge of the suffering of Jesus and Mary: no matter how severe your suffering, the sick were told, Jesus’ and Mary’s were worse, and they never complained. What is a migraine compared to the crown of thorns? Who could ever suffer a loss like Mary’s? Jesus’ suffering served the same purpose as Mary’s virtue in devotional culture: to diminish the integrity and meaning of ordinary persons’ difficulties and experiences. Indeed, there was a hierarchy of scorn for sick people: just as Jesus’ suffering outweighed all human pain, so truly awful pain was used to diminish anything less, and all physical distress was greater than any psychological trouble, in a pyramid of suffering with Jesus, all bloody, and Mary, modestly sorrowing, at its top. Leprosy, in particular, functioned in this ethos as a means of denying other forms of physical distress, which partially accounts for its ubiquity. The message to sick people was: someone else is always suffering more than you are—look at the lepers!—and besides, Jesus suffered most of all, so be quiet!

In this way, the priests, nuns, and laypeople writing for the many devotional magazines and diocesan newspapers that made up the popular literary culture of American Catholicism waged a campaign against men and women in physical or emotional distress. The saint offered as patron to the sick in this century was Gemma Galgani, who used violence against herself when she was ill, adding self-inflicted pain to the distress of disease so that she might “subdue even the faintest suggestion of rebellion on the part of the flesh against the spirit”; and if sick people would not subdue their own flesh as Saint Gemma had done hers, if they could not bedeck their own pain in ribbons, it would be done for them. (I will return to Saint Gemma Galgani in chapter 4.) The language used against people in pain was harsh and cruel, devoid of compassion or understanding, and
dismissive of their experience. As one priest demanded, if a child spends “seven or nine years” in an iron lung, “what of it?” There was only scorn, never sympathy, for the sick who failed to become saintly through pain. Bending the idioms and images of popular religion against them so that even the suffering of Christ emerged as a reproach, devotional writers crafted a rhetoric of mortification and denial for the sick. This was particularly cruel since they were doing so in the language and venues of popular devotionalism, to which sick people customarily turned for spiritual and emotional comfort.

The consequence of this rhetoric was that pain itself—the awful, frightening reality of something going wrong in the body—disappeared. It was hidden behind the insistence that the sick be cheerful, productive, orderly; it was masked by the condescending assurances offered to the shut-in handicapped, offered by those who were not, that it was better to be a cripple; it was occluded by the shimmering, overheated prose, the excited fascination with physical torment, and the scorn and contempt for the sick. There is not nearly as much suffering in the world as people complain of, chided a writer in the pages of *Ave Maria*—two years after the end of the First World War. “I enjoyed my week with the lepers of Molokai,” a traveler exclaimed as if he had not been sojourning among people he had just described as looking “more like corpses than human beings.” Chronic illness brought families together in special joy and intimacy, according to these writers. Even Jesus’ pain could be denied: lest they find in his Passion an expression of the reality of their own experience, the sick were occasionally reminded that, since he had been conceived without Original Sin, Jesus himself was never sick—the risk of Docetism apparently less troubling than that of compassion. It was in this spirit that William P. McCahill, executive secretary of the President’s Committee on National Employ the Physically Handicapped Week, could report with approval a child’s question to a handicapped person, “Mildred, is it fun to be a cripple?” Yes, it is! McCahill assured his readers.

Physical distress that had been thus purged of its everyday messiness, of the limits it imposed on the body, and of the dreariness of its persistence could be transmuted into its opposite. “Pain” became a “harvest” ripe for the gathering, a spiritual “powerhouse” that could light the church, a vein of gold to be mined, minted, and spent. “It isn’t suffering that’s the tragedy,” one of CUSA’s mottoes proclaims, “only wasted suffering.” In a 1953 meditation that mixed several of these transformative metaphors, Florence Waters urged the readers of *Ave Maria* to “travel the length and breadth of the country and add them up—the cardiacs, and arthritics, the cerebral palsied, the paraplegics, the amputees, the blind, the congenitally malformed, and the victims of countless other ills that tie human bodies to beds, wheelchairs, crutches, to one room or one house.” What
does all this add up to?—“A vast storehouse of spiritual power.” In “stark, unadorned pain, mental and physical,” Waters concluded, there is “a subtle but true coin that may be exchanged for spiritual goods for ourselves.”

So pain was alienable: coined from the bodies of the (untrustworthy) sick, it could be taken away and applied to the welfare of the healthy in a redistributive economy of distress. God apparently sent pain to some people so that others might be edified, making the bodies of the sick conduits of communications and benefits from heaven to earth. But, again, actual sick people, the real persons suffering from specific illnesses in precise ways, got lost in this process.

Since all pain was God-sent and good, and since it was never in any case as bitter as weak, whining sick people made it out to be, there was no need to account for its place in the universe, to respond to the spiritual and intellectual distress it might have occasioned. Protestants required this, perhaps, but not Catholics, who knew that God sent pain always for a purpose; and priests, who might have been expected to sympathize most compassionately with the spiritual and physical dilemmas of the sick, were said to be always cheerful in the presence of suffering because, unlike their counterparts in other faiths, they knew that the problem of pain had been “solved.” In any case, as American devotional writers reminded the sick, comprehensible suffering was not real suffering. Catholics were said to prefer to suffer humbly and submissively, in recognition of their own guilt, rather than attempting to lessen the sting of it through understanding. Only spoiled children required such reassurance.

The crew of Italian, Irish, Puerto Rican, and West Indian janitors, kitchen workers, handymen, and gardeners who hid out from their supervisors in the boiler room of the House of the Holy Comforter (a residence on the Grand Concourse in the Bronx to which my uncle moved in the mid-1960s) had a lot to say about the sexuality of the cripples in the rooms above them. A soft-voiced Italian American man named Aldo usually started these conversations. “Hey, I was up there the other night, they had them in the showers—Jesus Christ, have you ever seen Jimmy’s dick? It’s like this . . .” He opened his hands about a foot wide. “They all got big dicks,” someone else affirmed knowledgeably, and then the men would speculate about whether or not having such huge organs was another consequence of their being cripples, as if nature compensated there for the ravages elsewhere. Aldo was always kind and extremely attentive to the men with cerebral palsy who lived at the “home,” stopping on his rounds through the floors to talk with them, bringing them things to eat from the kitchen between meals, but in the boiler room he returned again and again to the subject of cripples and sex. I was shocked, when I went
to work at the House of the Holy Comforter in the summer after my first year of college, to encounter this other Aldo, so different from the one I knew upstairs, and he didn’t spare me his fantasies of my uncle’s sex life.

Often Aldo, less frequently one of the other men, sat next to Sally on the long back porch of the home and commented on the women walking past them along the garden walkways below. Leaning into Sally, he’d murmur, “Look at that one, Sal. What would you like to do with her?” He made a cupping motion with his hands. “Just one night, hah, Sally, what we couldn’t do. Jesus, Mary, and Saint Anthony.” My uncle seemed comfortable and happy during these conversations, apparently delighted with Aldo’s company and enjoying their salacious bond, although I’m not sure of this.

The men in the boiler room claimed that in the early hours of the morning, the cripples crawled out of bed and wheeled themselves into the shadows for blow jobs from the few women with cerebral palsy living at the home. This was absolutely impossible, of course, if only for practical reasons: none of the residents could get out of their criblike beds by themselves, and there were no deep shadows in the well-lit building and no times when there were not nurses and orderlies everywhere. But none of the men in the boiler room, who were cynical and skeptical about everything else, ever questioned Aldo’s tales of the cripples’ nocturnal sexual carnival.

Devotional writers did not shrink from the hard God implied by their celebrations of pain; indeed, they delighted in him. In the winter of 1949, Jerry Filan, a man with cerebral palsy who was slightly younger than Sally, was badly burned in a fire at his home in Brooklyn. Filan had made two arduous trips to Lourdes in the hope of a miracle sometime before this, capturing the imaginations of devotional writers so that, by the time of the fire, Jerry Filan was a well-known “shut-in,” admired and loved in the culture (in the way that shut-ins were admired and loved). The young man died after two months of excruciating pain. In their stories of his last days, Jerry Filan’s admirers calmly affirmed, with the pride that American Catholics took in making such hard statements, that the fire was God’s will. God’s burning to death a young man in a wheelchair never seems to have occasioned any doubt or grief.50

This God reflected all the anger, resentment, scorn, and denial of the Catholic ethos of suffering and pain. A paralyzed woman, bedridden since she was seventeen, admonished herself to remember that “it is God who sends such things as cold toast.”51 Writing about a nun dying slowly of cancer, a priest concluded that God “had planned to fill her last days on earth with pain so that she might have greater glory in heaven.”52 The family of a little girl stricken with polio was told to marvel that God loved
them (not necessarily her) so much as to send them this gift. If anyone dared to register dismay at the handiwork of a deity who was mean-spirited and petty enough to chill a sick woman's toast, he or she would have met with derision from devotional writers, and with even harsher injunctions to silence. American Catholic religious teachers practiced an especially rough theodicy in which a cheerful, compliant silence was deemed the only appropriate response to human sorrow.

But what was it like to believe that this mean God wanted you to suffer like this? Or to hear from the mouths of the ambulatory and the healthy calm affirmations of your distress, to receive from them the word that you were better off bedridden, poor, and alone?

“They hid us away,” my uncle shouted at me one afternoon on the back porch of the home, long after my days there as a summertime janitor. He lifted himself off his chair by his elbows and rasped at me, “You don’t know what it was like!”

We were in the middle of a conversation—an “interview,” I was calling it—about Sal’s favorite saints for a new project of mine when he began telling me how the families of his friends, ashamed of them, hid them away in the back rooms so that their neighbors wouldn’t see them. “We talk to each other about these things,” Sal said over and over to me. “You don’t know what I know.”

My grandmother never hid Sal away. Before the operation on his knees, he used to crawl out of the apartment and slide down the building’s steps on his rear end, then sit on the stoop watching over First Avenue. Later on, his brothers carried him downstairs or he would lean sideways out his bedroom window on a pillow. But not all the neighbors were comfortable with the sight of him. One crazy woman taunted my grandmother constantly about Sal. She called him “a diseased piece of meat.” “May the doors of Calvary”—a cemetery in Queens, New York—“close behind you,” she screamed at my grandmother on the street, announcing to the stoops and sidewalks that Sally was a judgment on his family.

“They left them alone all day in dark rooms. I know these things—they told me about them—you don’t know.”

Sal has always had many friends, male and female, all over the city, and he’s had a number of extended, monogamous, romantic engagements over time, as have most of his acquaintances. Sal’s closest friends belong to the United Cerebral Palsy Federation, which has a large, modern building on Twenty-third Street between Lexington and Park Avenues where Sal and the others go for classes and social events. This is where Sal said he’d heard stories of people being abandoned in back rooms, left all day without even water to drink.
The UCP has been Sal’s special domain for many years, his place away, like his younger brothers’ offices and social haunts. A couple of times a week he dresses up in his good clothes and wheels himself out to the curb to wait for the van that takes him to his downtown world. Whenever I visited him at the House of the Holy Comforter, I heard stories about the UCP, about the pretty girls volunteering there, whose pictures Sal sometimes put up on his dresser, about a discussion of abortion he had with his friends in psychology class or some hilarious tale of woe involving one or the other of his more maladroit or flamboyant friends.

“You know Irving, right?” Sally’d start, wheezing with laughter, his eyes tearing. “The other night, down at the UCP…”

He’s asked me to come and visit him there, but I’ve never gone; for some reason, I feel uncomfortable about dropping in on him at that place. Recently, I passed by there on a wet summer night, very late in the evening. A solitary figure was sitting under the blue fluorescent lights of the building’s entryway, waiting to go home. I thought I recognized the silhouette, and I stopped, standing just off to the side. The man didn’t move; he stared ahead, gently nodding his head in response to some inner thought. His face was smooth, his forehead uncreased. He seemed to be supremely at peace.

I did know him, actually, or I think I did—he looked like Jimmy, from the old House of the Holy Comforter. When the home closed some years ago, the men and women with cerebral palsy had moved to other residences across the city. My uncle still saw them all at the UCP, but I didn’t anymore. Jimmy was a man of astounding self-confidence. For all of the many years that I knew him, he was working on an autobiography, a book that combined—he told me once—his understanding of things, his life’s philosophy, with stories about what it was like growing up with cerebral palsy. Whenever he was not at the UCP or visiting in the garden of the home with his girlfriend, whose parents brought her every week from another residence across the city, Jimmy was in his room, working on his autobiography.

A West Indian orderly would come in after breakfast and fix a tight elastic band around Jimmy’s head; his forehead was permanently grooved at this spot, like a trumpeter’s lips. Affixed to this band so that it stuck out from the middle of Jimmy’s forehead was a long, thin rod with a round, cushioned button at the tip. Jimmy was now ready to work. Bending forward again and again over his electric typewriter, he touched the tip of the rod to the keys. The last time I checked with Jimmy, his manuscript was more than eight hundred pages long.

At a time when several American industries were dedicated to the desperate work of helping people avoid or deny pain, which was increasingly
understood as an obstacle to performance, achievement, and consumption in a culture that has treated physical distress as a source of embarrassment and shame as well as a sign of personal failure, the Catholic ethos posed (as Catholics themselves recognized) a powerful alternative. Catholics offered a storehouse for what everyone else was disposing of: the notion of sickness as a source of spiritual energy for the whole church recast the uselessness and isolation of sickness into participation and belonging. Organizations like the Catholic Union of the Sick in America assigned the physically distressed a privileged place in the spiritual economy and offered them a way to reconnect themselves to the world around them literally through, not despite, their illnesses.54

American Catholics in these years were enraptured and enthralled by physical distress. They presented themselves to the rest of the nation as a people experienced in pain. This was what set Catholics apart and above others: in such an elitism of pain, rebelling against illness, whining, and complaining were seen as characteristically Protestant responses, while Catholics were stronger, better able to endure, better prepared to suffer. “It’s how I react to cancer” that is important, Dooley wrote, not the suffering itself, because “people will see how I react” and draw spiritual lessons from it.55 This was one of the things that Catholics could teach American Protestants and, beyond them, the world.56 There was a specular quality about the way in which Catholics understood their suffering. The devotional press severely and coldly admonished Catholics to suffer well in the sight of others, particularly Protestants, as if everyone were taking note of how they handled their distress. Pain served in this way as both a test of Catholic presence in the United States and a guarantee of it.

But there is an irony here: these romantic evocations of pain without analgesia and of the spiritual glories of leprosy were appearing just when the children and grandchildren of Catholic immigrants were beginning to leave the old ethnic neighborhoods of the Northeast and Midwest for the middle-class suburbs and American way of life beyond, just when the fantasy that scientific medicine could cure almost anything was becoming pervasive and Catholics themselves were developing a sophisticated network of up-to-date hospitals. The ethos of pain was being elaborated in Catholic magazines alongside tips for arranging new furniture, recipes, beauty hints, and ways to throw successful birthday parties for children, all written in the upbeat prose of women’s magazines.

Elaborated in a particular way, physical distress was regularly counterposed in devotional culture to middle-class achievement. What good is success, money, power, or fame in this vale of tears? Catholic writers asked, over and over again—in the same periodicals that regularly celebrated the success, money, power, and fame of Catholic film stars, business tycoons, and athletes. One historian has suggested that the pervasive
preoccupation with pain in American Catholic culture of this time was a way for the children of immigrants to articulate and respond to their uneasiness with their success in the United States.\textsuperscript{57} Young American Catholics with southern European or eastern European or Irish parents and grandparents were caught in a terrible double bind after the First World War. American culture, as they encountered it in advertising, films, school, and the workplace, proclaimed that ambition was good, that material achievement and consumption were worthy goals. But this generation had grown up in cultures, religious and ethnic, that advocated self-control and self-denial, sacrifice and delayed gratification. These were the values of the Catholic family economy taught by parish priests and nuns, expressed in the stories of the saints and the old countries told to children, and evident in the iconography surrounding them in church. They may have begun to “disdain” the culture of the enclaves, as Fisher writes, but the immigrants’ children could not free themselves of it. This clash of moral sensibilities was exacerbated, furthermore, by the fact that the immigrants’ children were trying to make it—and were by then succeeding—in a society that had not welcomed their parents and in which they were uncertain of their own places. These were the roots of the anger, resentment, and self-recrimination that found expression in the discourse of pain and the broken body, and of its ambivalence.

In other words, the modern American Catholic cult of pain and suffering cannot simply be attributed to the European heritage, although it certainly had an ancient resonance. This was not peasant fatalism reborn in the industrial working class: the parents and grandparents of the people writing about how wonderful it was to suffer cancer without recourse to painkillers had come to America to escape pain, after all, not to make a fetish of it. American Catholics of the second and third generation improvised an ethic of suffering and pain out of elements available in their tradition, in conscious and unconscious response to their contemporary circumstances. What they made lent an aura of spiritual heroism to the frustrations and setbacks they experienced in moving, with guilt and uncertainty, out of the ethnic enclaves, and it assured them of their moral superiority over the culture they were ambivalently striving toward. The constant refrain that pain mocked the pretensions of the world transformed their resentment of the people who appeared to be more successful than they were (among whom they were not sure of finding the place they desired) into a satisfying reaffirmation of traditional Catholic values.

The discourse of pain was similar in this regard to that of ethnicity in American Catholic communities of the 1930s (and later).\textsuperscript{58} Both were made here, not inherited; both were produced through the constitution of necessary others—racial or cultural, in one case, the depraved, malingerer sick person in the other—against which one’s own identity and
that of the community could be secured and affirmed. Finally, both ethnic
nostalgia and the ethos of suffering and pain articulated the complex and
ambivalent feelings that erupted out of the changing social circumstances
of American Catholics in these years, when the immigrants’ children
found themselves pulled in different directions by memory and desire,
parents and spouses, Catholic and American values. Denial and displace-
ment gave to each discourse its rigidity and harshness.

“You can get up and go get yourself a glass of water,” Sally was saying
to me in a tense, hoarse voice, “whenever you want. You can get up and
walk out of here today, but I can’t!” He waved his arm in the direction
of the front door.

First the stories of friends hidden in back rooms, and now this. Sally
had never been so angry with me before. In between his accusations and
challenges my uncle took deep breaths and held himself rigidly against
the back of his chair with his long arms, looking away from me, shaking
his head.

A new holy figure had recently entered Sal’s customary pantheon of
saints: Blessed Margaret of Castello. Sal kept an image of her propped
up on his messy, cluttered desk alongside holy cards of Saint Francis and
Saint Anthony and pictures of his girlfriend, his nieces and nephews, and
himself with various camp counselors and UCP staff. I’d never heard of
her before or seen her image anywhere else. The holy card showed a small,
bent figure leaning on a rough, wooden staff. Her eyes were closed and her
feet were turned in. A pamphlet from Margaret’s shrine in Philadelphia
describes her as “A PATRON OF THE UNWANTED... A SAINT FOR OUR TIMES
... BLIND... CRIPPLED... HUNCHBACKED... DWARF.”

Sal had heard about Margaret at one of the First Saturday gatherings
he still attended occasionally; a Dominican priest talked to the group
about her. “If she’d been born today,” Sally said to me, “she’d’a been an
abortion.” Margaret’s father was Captain of the People of the Umbrian
city-state of Metola. His thirteenth-century victory over the neighboring
Republic of Gubbio had brought him great fame and wealth. The captain
hoped that his first child would be a son to carry on the family’s name
and increase its glory, but his wife had given birth instead to a tiny girl,
blind and horribly misshapen, in 1287. The bitterly disappointed couple
hid the infant away in the castle, refusing even to give her a name. A
gentle servingwoman called the baby “Margarita.” The child was not
only blind, she had a twisted foot and a hunchback. She was also a dwarf.

Sally interrupted himself. “She wouldn’t have been born today,” he said
again, “she would have been an abortion.” I didn’t quite understand what
Sally meant by this, but later I learned that Margaret’s devout say that
modern technology would have allowed her wealthy parents to discover
her congenital conditions in the womb and that legalized abortion would have permitted them to kill her. For this reason “little Margaret,” as her devout call her, has been proposed as the patron saint of the unborn and unwanted and of the antiabortion movement.60 Sally was starting to get agitated, and the mood of the conversation was growing darker.

When Margaret was six years old, her father, terrified that the lively child would wander out of the castle's shadows and be seen by someone, to the disgrace of his name, had her walled up in a room. The girl was fed through a small window. She remained in this cell for seven years, and it was here that Margaret, cheerful and forgiving even in these circumstances, according to her biographers, began experiencing Jesus' presence in an unusually vivid way. She fasted continually from the age of seven on and mortified her flesh by wearing a hairshirt to increase her discomfort in the cell, which was hot in the summer and freezing in the winter. (It was also here that Margaret, as an adolescent, began struggling with tempta-
tions against her purity, as most popular biographies of her say. Sally must have known about this, although he didn’t mention it to me.)

Sal paused again, this time to tell me about his friends who’d been hidden in the back rooms of their families’ apartments. “May the gates of Calvary close behind you!” the crazy old woman had screamed at my grandmother.

When she was thirteen years old, Margaret was taken by her mother to the nearby town of Città di Castello and abandoned there in a church. Her devout vividly imagine the little girl groping her way along the cold walls of the sanctuary, calling out for her mother, with the church bells marking the hours of the day’s passing as she gradually realizes what has happened to her. Margaret lived on the streets for a while, begging for her food, until the townspeople became aware of her sanctity and took her into their homes. She eventually entered a Dominican order of laywomen and died in 1320, when she was thirty-three years old.

“You know what I like about her?” my uncle asked me at the end of the story. “I like it that there’s somebody up there”—he glanced heavenward—“like us.” He was smiling, and the way he rolled his eyes up reminded me of the looks he’d given me when Aldo was teasing him about girls.

“Don’t you think,” I asked him, trusting the calm that seemed to have returned between us, “that Saint Francis and Saint Anthony can know what you feel, since they’re saints?”

This was when Salvatore began shouting about water and the front door. I’d never know—nor would Saint Francis or Saint Anthony—what it was like to be crippled.

One of the pictures on his desk showed Sally with a beautiful young woman from the South Bronx named Silvia, a counselor at the UCP summer camp whom my uncle was crazy about. Sometimes Silvia came by the home to visit him in the winter. He said that once, when Silvia’s little sister had been hit by a car, he and Silvia had prayed together to Blessed Margaret to heal the girl. She did.

“But I never asked her to make me walk,” he snapped.

Finally, I had to leave. I got up, kissed my uncle on the top of his head like I always did, and then—just as he said I would—I walked out. The last thing my uncle said about Blessed Margaret was, “She has a little bit of all the things we have.”

Margaret’s case for canonization has been unaccountably stalled for decades. She has performed all the necessary miracles, there is evidence of a continuous cult, and she has a skilled advocate from the Dominican
order who appears to be sincerely interested in seeing her made patroness of “the handicapped.” But six hundred years after her death, Margaret has still not been elevated to the ranks of the saints. Perhaps not everyone is happy with the idea of “someone like us” in heaven.

The devotional ethos of suffering and pain failed actual sick people. It deepened the silence already threatening persons in pain with its constant injunctions to be quiet, denying them even the dignity of crying out in distress or unhappiness. It intensified the isolation and claustrophobia of the sick. Devotional writers castigated sick people for asking to be positioned more comfortably on beds that such writers liked to see as miniature calvaries rather than as the lumpy, lonely places of human suffering they actually were. The ethos confronted the sick with an image of the suffering Christ and then, in a perverse inverted Christology, told them that this image mocked any suffering of theirs: Did Jesus ask for a pillow on the Cross? Furthermore, by making pain a challenge, or test, of spiritual capacity, devotional culture added a layer of guilt and recrimination to the experience of bodily disease, as it proclaimed that most humans would fail this test. The ethos denied the social, communal, and psychological consequences of illness.

Not surprisingly, given all this, few priests undertook ministry among the sick as their main work, and even visiting hospitals was not always a high priority among parish clergy, as the periodic admonitions in clerical journals suggest. The parish clergy of the time held hospital chaplains in contempt (many still do), as the chaplains were well aware. In a typical lament, a former chaplain complained in 1937 that most parish priests “seem to have the foolish idea that a chaplain is a kind of second-rater, and that the very fact that he is stationed in the hospital is enough to guarantee that he has some failing which labels him ‘unfit for real work.’ ” Often enough, these suspicions were well founded. The Catholic hospital chaplaincy has been a scandal until relatively recently, having been the place to assign—and to hide—priests with emotional or physical troubles of their own, particularly alcoholism, and the dumping ground for men who could not make it in the high-pressure, big-business, hearty male world of the American parish. As late as 1965, when the National Association of Catholic Chaplains was founded, men (and women, although their spiritual work in the hospitals was generally accorded more respect from the first) who had chosen the hospital ministry as their vocation were complaining that they were forced by local church authorities to accept “a semi-invalid or problem personality” on their increasingly professional staffs.

The rapid shift and reorganization of health care from the home to the hospital in the first three decades of the last century posed a daunting
challenge to an already overburdened church, and the inadequacy of spiritual care for the sick can be at least partly attributed to this broader development. But American Catholics succeeded in building a network of modern, technologically sophisticated hospitals of their own; Catholic doctors and nurses were trained well in denominational schools; Catholic hospital professionals in the United States were up-to-date and well informed on matters ranging from the latest surgical equipment to the best cafeteria designs, as the publications of the American Catholic Hospital Association show. The church was also capable of providing—and of treating as heroes—military chaplains in several wars. All of this contrasts sharply with the dismal level of pastoral care for the sick and suggests that the latter reflected the impact of the ambivalent ethos of suffering and pain rather than simply the economic or social state of the community.

The ethos also shaped the culture’s stance toward religious healing. Healings had taken place at American shrines before the twentieth century, and charismatic healers, usually members of religious orders who scrupulously muted their own place in the thaumaturgic event in deference to ecclesiastical authority, were not unknown in the community before the widely publicized revival of faith healing among Catholics in the 1970s. But Catholic culture was cautious and suspicious of popular healing of all sorts. The traditional curative arts of Irish and of southern European and eastern European women were mostly lost within a generation of their immigration to this country, under the combined pressures of their children’s assimilation to the world of modern medicine and the clergy’s denunciations of “superstition” and “magic.” After the revival of faith healing among American Protestants in the early part of the century, and its subsequent association with flamboyant and disreputable characters, many American Catholics sought to distance themselves from what they saw as an example of Protestantism’s tendency toward excess and anarchy. Insecure enough in their middle-class status, Catholics had no desire to get out on anyone else’s margin, and faith healing was definitely out on the American margins.

But it was the romance of pain itself that made it so complicated for Catholics to hope for healings of any sort. Their yearnings were supposed to be pointed in the opposite direction, toward a deeper, sustained engagement with the promise and loveliness of “pain” (as opposed to the distress and loneliness of pain). Devotional culture taught that to alleviate pain was to deny the Cross; to seek relief was understandable, perhaps, but still an instance of human selfishness, a denial of the soul’s superiority to the body and a rejection of the opportunity for saintliness. In a meditation published in Catholic World in 1929, a very sick woman warned others in similar distress that to be healed meant that “you might lose the shining thread of Him” in a misplaced quest for happiness, “only to discover
that you had it once when you were bedridden, poor, and alone.”

Some Catholics opposed painkillers and anesthetics even for the most extreme distress on the grounds that they interfered with an experience intended by God for the good of the afflicted person and intruded upon the intimacy with him available only to those in pain. Father Jerome Dukette celebrated a man, “quite crippled with arthritis,” who, after traveling all the way to the Shrine of Saint Anne de Beaupré in hopes of a cure, decided—on the very steps of the shrine—that his suffering was a grace after all and turned away. Thirteen years later, according to Father Dukette, this man (still deformed) came back to the shrine to tell Saint Anne that he was “grateful [to her] for not curing me” because “healthy, I stood a chance of damning myself, [whereas] I prefer to crawl up to Heaven on hands and knees than to run off to Hell on two good legs.”

The Dominican theologian Bede Jarrett told a story with a similar theme:

I remember a woman once in a parish where I worked, down in terribly poor streets. I remember her dying of cancer—a terrible cancer, that type of cancer that is all pain. One day she said to me, “Need I take morphia? The doctor wants me to. Need I?” “No,” said I, “there’s no need to; but why not?” “I think it would be better for me not to. You remember my boy?” Yes, I knew and remembered all about her boy. “It would be better for me not to because then I could offer all my sufferings for him. I’d love to make an offering of them. I can, can’t I? That is the teaching of our faith?” What could I answer except that this was indeed our faith. She died in very great agony but wonderfully happy. The worse her pains grew, the happier she became.

What other answer, indeed? Healing would shut off the spiritual dynamo of pain, squandering its exploitable energy. It would be like turning off Niagara Falls.

Everyone agreed that Joey was a saint. Joey was one of Sal’s roommates at the home, a short, stocky Italian American man from the Bronx, with a tonsure of wooly brown hair ringing his huge head. His plump thighs strained the cloth of his pants and his wide hips filled the wheelchair, and he always rested his thick arms snugly at his sides. The nurses teased him about his weight, pinching his cheeks and kissing his head (how my uncle would have loved this, for reasons other than Joey did); the orderlies giggled and poked him while they shaved him in the early mornings. No one could resist touching Joey, stroking his hair, patting his round belly. Joey was a devout Yankees fan. On hot summer afternoons and evenings, he sat in front of the enormous window in his room, watching the cars stream by on the Concourse below, nestling his ear against the small transistor radio he held tightly in his hand. There’d almost always be one or two orderlies sitting on the bed beside him, bending close to hear the play-
by-play or just staring out the window at the pigeons on the adjacent rooftops while Joey sat rapt in the game. When he wasn’t listening to the Yankees or visiting with his mother, who came to the home almost every day, bringing food in foil-covered Pyrex dishes, Joey stared at the clock on his bureau. He was mesmerized by the sweeping second hand. Everyone who came into the room teased him about this.

During one of the summers I worked at the home, I was sunk in a terrible depression because I was having trouble taking my leave of the old neighborhood to go away to college. Unfamiliar with these feelings, I was terrified that I was going crazy; as I went about my chores on the floors or in the garden of the home, my skin prickled with anxiety. Occasionally, the terror was so intense that I raced in panic down the hallways—or so it seemed to me—or hid away in the darkest corners of the boiler room.

My green janitor’s uniform was always damp with sweat or rain. It never stopped raining that summer. The northern blocks of the Grand Concourse dissolved in the steady drizzle and in the gray steam rising from the hot, wet concrete. My supervisor ran out of jobs for me to do, so we avoided each other on those long wet days. I hid out in Sal’s room, listened to the pecking of Jimmy’s typing, or watched the clock with Joey.

Sometimes Joey rested his head on my shoulder, and I held his strong hand. He seemed content to have me sitting next to him, and I needed the comfort he provided me. I never told Joey my problems (although I imagined that he knew them anyway). I’d ask how the Yanks were doing or tease him about the clock, but Joey never said much to me. When I came into the room (terror-stricken and forlorn, as I imagine now), he’d smile and pat the arm of his chair, inviting me to sit next to him. I was always on the edge of tears there beside Joey in the cool, humid room, with the smells of the wet streets coming in the windows. Joey patted my hand. My uncle, working at the edge of his bed on a heap of papers or coming in from sitting on the porch with his girlfriend, shook his head sarcastically at me and, pointing to Joey, twirled a bony finger at his temple, letting me know what he thought of Joey, his clock, and me.

Sally will be eighty years old soon. About ten years ago, something obscure and terrible happened to his digestive system, and now his diet is limited almost completely to liquids. He weighs about seventy pounds. He smokes a pack of cigarettes a day, down from his former three. He keeps a leather bag tucked into his chair at his hip, filled with matches, coins, cigarettes, and the chewed and broken stumps of countless cigarette holders. Joey has been dead for a long time.

My uncle was born in the early years of the twentieth century at the beginning of a period of intense devotional creativity and improvisation in American Catholic culture, when the community was working to
transform European spiritual idioms into forms that addressed and reflected the experiences, needs, and fears of the second and third generations in their American lives. The ethos of suffering and pain was central to this work, for reasons I have already discussed, and Sal—along with people afflicted by cancer, migraines, pneumonia, and other physical troubles—had no choice but to live within it and contend with it, making what they could of the ethos and of themselves within it.

The discourse of pain generally, and of the holy cripple specifically, offers historians a lens on some inner dimensions of American Catholic culture in the middle of the twentieth century, if the crafting of that discourse is understood as a practice situated in the social circumstances of the various communities at the time and not simply as a reflection of perennial Catholic theology. The children of immigrants, in transition from one way of life to another, constructed for themselves an ethos that proclaimed pain (not hard work, ambition, or a desire for success) as a road to the greatest achievement (which was sanctity, not a bigger apartment, a new car, or a good job). They clung to an image of themselves as sufferers while their circumstances steadily improved, which in turn allowed them to transform their envy and uneasiness into judgment on the social world they aspired to when those circumstances did not improve quickly enough. The elaboration of the ethos in the last century gave suburban Catholic culture a distinct tone.

Living within this story, however, had many consequences for the everyday experience of the sick and handicapped, who were pivotal to its construction. These consequences were not all bad, as Sal’s history shows: because others said his body made him special, closer to heaven than they were, those who could walk out the door paid more attention to him than they might have otherwise and did nice things for him. They organized outings for him, visited him, made sure that some of his needs were met. The handicapped had a distinct place in American Catholic imaginations and public life. Because of this story, the world of Catholic devotionalism was seen as Sal’s natural domain. He has always been a devout man (what else could he be in this culture?). He says the rosary daily, surrounds himself with images of the saints, and plans to be buried in the robes of the Third Order of St. Francis. Sal made a home (and a future grave) for himself in these idioms; through them, he could find comfort, consolation, and meaning for himself. In the prayer books tightly wrapped with rubber bands and jammed into a duffel bag fixed to the back of his chair, Sal had access to an intimate language for discovering, making, and naming his desires, fears, and hopes, and a language in which to address them to powerful figures who, he was told, would be listening closely to him. Devotionalism also gave Sal a set of practices—making the sign of the cross, fingering his beads, touching holy water, and so on—through which
he could embody the prayers he was saying. It was in this world that he found Margaret of Castello.

But Sal also had to contend with the covert and unacknowledged implications and consequences of the discourse of the holy cripple. This spiritual fantasy was elaborated out of a disjuncture. Ambulatory Catholics expected the handicapped to respond to the circumstances of their lives in ways that they knew they would not be capable of themselves were they trapped in a chair, strapped to a bed, unable to eat by themselves or get themselves a drink of water. Cripples were “better,” which really meant that the cripples were not like us—so the discourse of the holy cripple turned people like Sal, Jimmy, and Joey into inhuman others whose inner lives were radically unlike everyone else’s, and ultimately unrecognizable. First it made them into others—and then devotional culture celebrated them for this otherness and difference, which was called holiness.

But in its insistence on the innocence, nearness to heaven, purity of heart, and resilient cheerfulness of handicapped people, the fantasy drained away the lived reality of their days. It was the spiritual equivalent of the back rooms into which Sal’s friends were tucked. It obscured the anger and resentment of handicapped persons, their struggles to overcome the physical limitations that mattered to them and their frustrations when they could not. It denied them the full range of human desires and hopes, including those for love, mastery, and independence. It hid their dismay at the condescension and good intentions of the volunteers who spoke to them in loud voices and simple words. Holiness ensured the absence of the other. As Sal put it, it created the impression that the handicapped person came from “another planet.”

The discourse of the holy cripple accomplished this, furthermore, because it obscured the unequal relationships between those who could walk out the door and those who could not. The pretense of the discourse was that the latter were better than the rest of us—holier, more noble, more cheerful, better spirited. As Margaret Lehr concluded in *Ave Maria,* “Many of us [who can walk] are moral failures, while you almost invariably hear it said of the handicapped, ‘My, isn’t he wonderful! Always cheerful—always overcoming obstacles and surprising people with his achievements.’” But the power of those of us who could walk out the door over those who could not was evident in the fact that *we* were the ones defining—and limiting—*their* inner lives for them. Their holiness was the practice of our power, and woe to the cripples who would not conform to our prescription. Then “many of us” would taunt them like the man who came up behind Sally on that morning the bus was late, or tell them to shut up, or write them off as complainers and stop taking their distress seriously.
Thus emptied of all but their holiness and innocence, cripples became blank slates for the articulation and vicarious experience of desire. Holiness became the space into which all kinds of unacknowledged needs and impulses could be driven, an exercise of fantasy that was unimpeded by the resistant facts of the other’s actual experience, since this did not exist. Holiness became a compelling and productive psychic zone for everyone but the “cripples” it was defining. Aldo’s fantasies emerged ineluctably from within the narrative of holiness: once the emptiness of the holy cripple had been opened up, the cripple-with-the-big-penis was sure to fill it. Aldo’s were not the only fantasies, though, nor were all the desires articulated through the handicapped sexual. “The physically sound,” according to Lehr, “often turn to the afflicted for strength—for moral courage,” and so they—we—did.

The cruelty of the discourse of the holy cripple is fully evident in a 1950 “Letter to Shut-Ins” by Thomas A. Lahey, C.S.C., in *Ave Maria*. “This letter is written to you as one of God’s favorite children,” Lahey begins. He assures his “dear suffering shut-in” and his “dear fortunate shut-in” that he understands what their lives are like. “The music of the theater, the laughter of the banquet table, the natural and normal consolations which come from human relationships—all these are denied you. No matter how helpful those around you try to be, the inevitable fact confronts you that during most of your life you will have to put up with the four walls of your room and the somewhat impersonal companionship which your books and radio can furnish.” This will not be easy, Father Lahey concedes. “I do not have to tell you how slowly the clock will tick under such circumstances, and how agonizing will be some of the hours that follow.” He attributes such distress, though, to “your own natural weaknesses,” not to the awful loneliness of life within those four walls; if his shut-ins are miserable, Lahey wants them to know that it is a sign of their corruption.

But “suffering would not be suffering” if it were not so miserable and painful. So Lahey urges his shut-ins not to try to relieve their distress, since “it is the very fact of your suffering which has marked you out as one of the favorite children of God.” Are there any consolations? Of course: “Sealed up as he is from the direct sense-appeals of various earthly attractions,” the shut-in is freer of temptation, more likely to look to heaven for satisfaction. Lahey closes by warning the fortunate unfortunates not to squander their time on earth. Join the Franciscans’ Apostolate of the Way of the Cross, he encourages them, through which they will receive “free and without any obligation” a crucifix “so indulgenced” that by holding it and saying certain prayers the shut-in can release an untold number of souls from purgatory. Stuck within their own rooms, cripples get to be the liberators of the dead. “Since those indulgences can be re-
ceived over and over almost without end, you can spend your wakeful hours in helping to deliver not only hundreds but thousands of those poor souls who are pining for release . . . a wonderful missionary project you will admit.”

Father Lahey’s “Letter to Shut-Ins” was not idiosyncratic; letters like this were a popular feature of American Catholic devotional discourse. Under the guise of compassion and understanding, their authors defined what they imagined and wanted the cripples’ lives to be. Their accounts were prescriptive, pretending to be descriptive. While Sally and his girlfriends were in fact dancing and eating together, holding hands and kissing, and hearing the music of the theater at UCP, the devotional press was telling us and them that they did not laugh or enjoy uproarious company and did not feel any human bond, let alone engage in sex, romance, dancing. But Father Lahey and the others did not want their beloved shut-ins to live like the rest of us, to enjoy what we enjoy (and the sound of his satisfaction can be heard in the prose), “the music of the theater, the laughter of the banquet table.” Rather, they wanted them to be holy. When you get to heaven, Father Lahey assured his readers in conclusion, you will find millions of souls freed from purgatory by your prayers waiting to thank you.

I hope that when Sally gets to the heaven he imagines he finds Blessed Margaret waiting to wheel him quickly away from these grateful souls—who think that their heaven was secured by his (and her) isolation and denial on earth—to a place where there are others like him.

Sal discovered Margaret in the devotional world, and he prayed to her and other saints in the idioms of devotionalism, which is just what Father Lahey told him to do with himself. But Father Lahey did not understand that there were enough ruptures, fissures, and contradictions in this world for my uncle and the others to find ways within it of living against it. Catholic devotionalism offered a complex field of expression and experience, polysemous and internally contradictory. These were flexible idioms, subject to improvisation. This world afforded many guises and voices, some of them (at least) at odds with the narrative of the holy cripple promulgated elsewhere in the same devotional culture.

I cannot say much about Sal’s relationship with Margaret of Castello, since we had only the one, difficult (for me) conversation about her, but I do know that in this conversation, Margaret served as the “articulatory pivot” through which Sal was able to express his emotions. She permitted Sally to uncover the fact of hiddenness: the details of her story created a context in which he could rage against his own sense of isolation and abandonment. The refrain “She would have been an abortion” may have echoed his own anger and anxiety. I do not fully understand how satisfying and empowering it can be to discover oneself reflected in heaven—to see
someone up there like me, to see not simply my actual experience embodied in the narrative of a person understood to be close to God now, but my hidden fears and anger as well, or to see my sense of myself as a special, noteworthy person reflected in the adulation given to someone like me. We will have to take Sal’s word for this. But as Sally told me, while he was talking about Margaret, there was a lot I did not understand about his experience.

Through the crippled saint, Sally momentarily breached the otherness constituted for him by the same devotional culture that gave him Margaret. He asked—demanded—through her that I imagine myself in his place—did I know what it was like to be unable to walk out the door?—and that I think about his experience as he lived it, not as I fantasized it. By his work of appropriation within a tradition complex enough to allow for such discrepancies, Sal inverted the meaning of holiness: Margaret’s holiness became a sign of his own presence. If there were someone up in heaven like him, Sal taught me, then people like him could be recognized on earth. In heaven and on earth, Margaret subverts the narrative of the holy cripple, and this may be why she will not be admitted into the ranks of the saints.

Holiness itself turns out to be a peculiarly unstable cultural construction. Because it emerged out of desire and denial, it seemed to mutate almost organically into its opposite, as Aldo’s relentless fantasizing shows. Even though they were themselves a reflex of the emptying discourse of holiness, Aldo’s fantasies exposed, through the endlessly, compulsively reiterated image of the large phallus, precisely what holiness was meant to deny: that Sal, like the rest of us, was motivated and inspired by powerful, fully human needs, desires, and hopes. They certainly affirmed that he was a person, present, not absent, and that he would in fact seek the “natural and normal consolations which come from human relationships” that Father Lahey wanted to deny him. Thankfully, Sal, Jimmy, and the others had their own ways of doing so and ultimately did not need Aldo’s obsessions to live against Father Lahey’s denials.

My uncle is desire and will incarnated now. His flesh has shrunk back to the bone; he looks like a dark, knotted piece of leather. He sits in his chair breathing smoke, the cigarette holder clamped in his teeth. Many times in the last ten years my mother and father have been summoned to the residence late at night with the word that Sal was close to death, and each time Sal has fought his way back. Saint Francis’s shroud may be waiting for him, but Sal is not slipping easily into it; holding onto his rosary, he is still fighting the story that was written for him out of the needs of ambulatory Catholics. He is not cheerful, compliant, or uncomplaining. He resists what others want from him, perversely (as everyone else sees it) putting up obstacles to what others want to do for (or, as he
sees it, to) him. He is not offering up his suffering for anyone. Jerry Filan’s God is not going to get him.

Joey died at just the age when men of his generation with cerebral palsy were expected to die.

A terrible storm hit New York on a recent summer’s night when Sal was scheduled to go down to the UCP. The trees outside on Moshulu Parkway were bent to the ground by the wind, and rain poured from a black sky. My father happened to be at the residence that night on some errand and, thinking that my uncle would be frightened by the storm, went looking for him. Sal wasn’t in his room or the corridors of his floor, not in the chapel or the lounge. My father finally found him waiting at the front door, all dressed up to go out, a wide, colorful tie completely covering his thin chest. An old black raincoat was crushed between his stiff legs.

“It’s the middle of a hurricane,” my father yelled at Sally. “What are you doing? You don’t really think you’re going out in this tonight, do you?”

An iron table was blown off one of the upper porches and came crashing into the street outside.

“Ahhhh,” my uncle said, “it’s not that bad.”

“The highway’s closed,” my father said, laughing in his fury at Sal’s stubbornness. “Are you kidding? No one’s gonna drive in this!”

“Go see when the bus is coming,” Sally commanded. Then he turned back to face the front door, ready to go out.