The HATs We Wear
Literally and Figuratively

This editorial is about hats—both literal and figurative ones.
Hopefully, you will be motivated to consider what hats you wear and when. Which ones are literal, and which are figurative? Do you look better in some than in others? Of course, both men and women wear multiple hats; it’s not a “lady’s thing.”

A RABBI SEEKING HELP

More than 25 years ago, I received a phone call from Rabbi A. (pseudonym) who headed a conservative temple in my town. The context in which I knew him was that more than one dozen of the individuals in his congregation had been my clients; most had serious mental illness and Rabbi A. provided support for their families. The phone call was to ask me to provide therapy for one of the members of his congregation; this person was Rachel (pseudonym). He was worried about her because her psychiatrist was trying to convince her to enter a research center at the National Institute of Mental Health (NIMH) in Bethesda, Maryland, as an inpatient. The psychiatrist was sure that Rachel was a perfect candidate for a new approach to treating multiple personalities. Rabbi A. thought she needed to consider alternatives. I agreed to meet her.

This meeting took place in Rabbi A.’s office at the Temple; he, Rachel, and I were together for more than 1 hour. Rabbi A. told Rachel what he knew about the way I worked and invited her to tell me what she had been disclosing to him.

RACHEL’S BACKGROUND

Rachel, who was 30 years old, was the only child of Conservative Jewish parents. Both her paternal and maternal grandparents had been raised and practiced the Orthodox tradition and were very upset when Rachel’s parents decided that the Conservative way was best for them. Rachel began with: “Since both my parents had broken away from their parents’ religious orientation, I thought that they could accept what I was doing differently from what they wanted.” She explained, in detail, that: (a) she did not want the choice of careers they had selected for her; (b) she was considering becoming a Christian; (c) she wanted to move away from their home into her own apartment; and finally (d) she knew she was gay, but feared telling them.

The only in-depth conversations she had had with her parents were about her career choices. When she tried approaching the other topics, she had migraine headaches or panic attacks. To cope, she had compartmentalized the various facets or styles of her life, arranging her personality as she needed. Thus, she was the Gay Rachel with lesbian friends, speaking and acting in sync with them and their values. She dropped out of both law school and medical school, not telling her parents that she now considered herself an artist. She had a separate wardrobe for her artistic pursuits. She sought Christian churches, who accepted gay folks openly.

After ending up in the emergency department after a panic attack, the attending psychiatrist, hearing about her different personality styles (particularly the clothes), told her that she fit the diagnostic category of multiple personality disorder, and could be treated at NIMH.

TREATING RACHEL

After the session in Rabbi A.’s office, Rachel agreed to meet with me weekly in my office at the university.

I started by suggesting that she did not have totally different personalities, but that she played very different roles in different settings. I explained that one way to think of mental illness is that people forget that there is a time and place for everything. When people forget this,
Each hat requires a unique set of competencies, skills, persuasions, and energies.

What triggered this editorial was that she telephoned me a few weeks ago, and asked: “Are you still suggesting hats?” I replied, “Yes”—and told her about Richard Humm.

RICHARD HUMM AND HATS

Richard Humm is a member of the Service Users and Carers Group Advising on Research (SUGAR). In September 2012, the International Network of Psychiatric Nursing Research (NPNR) had its annual conference in Oxford, England, and SUGAR presented a workshop on their work. There was a large basket of hats at the front of the room, and participants were invited to choose one. The presenters then made statements such as: “If this is your first time at NPNR, put on a hat.” Or “If you know someone who has experienced mental illness, put on a hat.” Thus, participants were invited to look around the room and see others who had hats on, as they did. This ice-breaker facilitated discussion about who discloses mental illness and what the consequences are in doing so.

After this workshop, Humm (2014) was inspired to write an illustrated piece, “Hats,” for the Journal of Psychosocial Nursing and Mental Health Services. He used parts of the discussion from the workshop and listened to my story about Rachel. He is an artist, but is also very clever with words. Here are some excerpts from his Commentary (Humm, 2014): “It’s not the only hat I wear. I may be a ‘patient,’ but I’m also a parent, a pedant, a plebe, a piss-poor punk poet,… a peripatetic pilgrim, a philosopher, a pessimist, a polymath, a plumber,…and a procrastinating philanthropist” (p. 5).

Switching to a poetic style, he wrote: “I am an anarchist, the anti-Christ, Sugar and spice and all things nice. Am I overly dramatic? NO! Just emphatically, empathically, Pathetically simpatico.” (p. 5)

Aside from the Editor hat, I wear Mother, Grandmother, Mother-in-Law, Widow, Researcher, Teacher, Chorus Member, Bells Ringer, Gourmet Cook, Author, Workshop Presenter, Traveler, Mentor, and Advocate. The list is not complete. Each hat requires a unique set of competencies, skills, persuasions, and energies. Each hat must be worn at the correct time and place. Imagine the consternation I would cause if I started ringing bells or singing in the middle of a faculty meeting. Hmm—maybe that would be a good idea.

We welcome your hat stories. I will share them with Richard, and also Rachel, when she calls again.

REFERENCE


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Editor

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