

Welcoming Jonah: A Sermon on Mental Illness – Kol Nidrei
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Congregation Emanu-El of Westchester
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While Noah and the Ark ranks at the top of the Bible-themed toys listed on Amazon, Jonah and the Whale, the story we read in tomorrow afternoon's haftarah, does not rank as high but still lists a respectable 91 items. A man on a whale, a man in a whale, a man swimming next to a whale, every combination imaginable featured as stuffed animals, picture books, puzzles and even baby sheets. Noah and Jonah, the toys are cute – until we stop to think about them. For Noah, one does not have to use much imagination to find the darkness: if the animals and Noah are on the ark, what's going on with every other creature who is now under the water? Really disturbing. Don't think about it much. Too unsettling.

What about the darkness in the story of Jonah and the Whale? The situation there is, perhaps, a bit more subtle. We can find throughout the tale Jonah experiencing moments of self-aggrandizement, of incredible activity and productivity and then episodes of depression, self-pity and even suicidal thoughts. While no floods destroy the world in this story, in Jonah perhaps we have something to which we can more easily relate, perhaps we have a biblical portrait of mental illness.

At the beginning of Jonah's story, God calls to him and commands him to go to Israel's enemy Nineveh to demand that the people repent their evil ways. We see possible signs of Jonah's mental illness in his reaction to this call. Jonah tries to run from an omnipresent, omnipotent God. And not just run. According to a Talmudic interpretation, he runs in the most outlandish, over the top way possible. He goes to the coast, to the city of Jaffa, to sail away from God's command. He does not simply buy a ticket on a boat, he charts a whole boat and its crew to sail to the other side of the known world, to a place called Tarshish.¹ This would have cost a fortune. This kind of grand, rash action strongly suggests a manic episode.

We cannot run from mental illness. One in five people suffer from a diagnosable – although not always diagnosed – mental illness at some point in their lives. You or someone you know will contend with mental health issues. Our loved ones and friends, our co-workers and leaders, mental illness can strike anyone, can bring suffering into any family, any social group, any community. And still, we barely speak about mental illness and we rarely speak about those who suffer with it. When we do, it is often with a sense of shame or embarrassment. Because of this shame, those who suffer often do not seek treatment until the condition has progressed to the point of being unbearable. Families trying to support a loved one too often do not get the help and support they need to cope. Why all of the silence? One word: Stigma.

Back to Jonah's saga. As soon as Jonah's chartered boat sets sail for Tarshish a massive storm hits. But while the sailors try to throw cargo overboard in order to survive, Jonah goes to sleep. Apparently the mania has ended and, despite the extreme circumstances, he cannot rouse himself from bed, all he can do is sleep. When the storm will not abate, when it seems the ship will come apart, the sailors try to wake Jonah to help save the ship. He tells the crew, "Heave me

¹ Talmud Bavli, Nedarim 38a

overboard, and the sea will calm down for you for I know that this terrible storm came upon you on my account.”² The statement demonstrates both an unrealistic level of self-importance and perhaps a suicidal intent fed by utter despair. The sailors do not comfort him. They do not confront his suicidal thoughts or counsel him against extreme action. They throw him overboard.

We no longer throw the mentally ill overboard. But too often we shut them out. We sometimes act as if their problems come from a character flaw. We wonder if their condition is, somehow, their own fault. “If only they would try harder,” we’re tempted to say. Science has told us for decades: mental illness is a medical condition³ in need of treatment, not some sort of character weakness. And still, stigma often prevents appropriate treatment. It silences our concern for loved ones who suffer. The result can be deadly. Mental illness kills more people than breast cancer, traffic accidents, and HIV/AIDs. In fact, suicide is currently the 11th leading cause of death in the United States, taking over 40,000 lives a year.

A well-known piece of Jewish law is the prohibition against willfully taking one’s own life. Less well known, and critically important, is that since at least the 11th century, it has been almost impossible to categorize a death as suicide under Jewish law.⁴ Instead, we understand that people who kill themselves have a mental illness⁵ and therefore could not have killed themselves “willfully.” The prohibition against suicide actually amplifies our obligation to do whatever we can to help people who suffer with mental illness to prevent suicide in the first place. By observing all of the death and mourning rituals when a suicide does tragically strike, we demonstrate that stigma and shame around mental illness have no place in the Jewish community.

After the boat, Jonah’s story is not done. Supposedly carried inside a whale, he eventually reaches land. He then accepts his role as a prophet and heads to Nineveh to warn the people to repent or suffer God’s punishment. This is a 180 degree reversal from fleeing his appointed task and running to Tarshish. How can he explain his reversal to his friends and family? He creates the story of the whale. Not only as a means of transport, but as a vessel for communion with God. Surely anyone saved by a whale would go on to deliver a prophecy for God. What an explanation for his erratic behaviors!

Too often, people with mental illness, reflexively create exaggerated stories to cover up their symptomatic behaviors. And too many of us, consciously or unconsciously, accept those stories that could instead serve as warning signs of mental illness. There are other important symptoms to help us recognize someone’s need for help: withdrawal, drop in functioning, problems thinking, increased sensitivity, apathy, nervousness, unusual behavior, sleep or appetite changes, and mood swings. Observing any of these signs is an opportunity to have a conversation, to check-in, to show support, to help connect with treatment.

Clearly, no one sees Jonah’s whale story as a warning sign. And so, he heads to Nineveh and delivers God’s warning. Failure to change their ways, he tells them, will bring God’s judgement.

² Jonah 1:12

³ <https://afsp.org/>

⁴ Mishneh Torah, Hilkhos Aveilim 1:11

⁵ Arukh Hashulkhan 345:5

They do repent. And God spares them. Jonah climbs a hill overlooking the city and sinks, once again, into depression. He is despondent that God did not destroy the Ninevites. In the heat of the day he cries to God, “Please, Lord, take my life, for I would rather die than live.” God responds, “Are you that deeply grieved?” Jonah then makes camp and God provides a plant to shade him from the desert heat. The shade makes Jonah happy. And then God lets the plant wither and die. Again depressed, Jonah says, “I would rather die than live.” And again, God asks, “Are you so deeply grieved about the plant?”

Finally, someone engages with Jonah. We can read God’s questions as a rebuke. Or, we can read it as the first question of a good therapist: “Tell me what is bothering you. Are you sure it is about what has happened here today?” Rather than allowing Jonah to race across the known world, rather than allowing him to go it alone in the stormy waters of the Mediterranean, God seems to say, “I hear you. I see your pain. It seems out of place. It seems disproportionate to the events. Let’s talk about what’s really bothering you.” The remarkable thing, is that this is the end of the book. The Bible does not record any more of Jonah’s story. God’s challenging questions, God’s engagement with Jonah’s pain is the last we hear of our prophet.

Jewish tradition reads this story as a morality tale. Even people as wicked as the Ninevites can repent and be forgiven. For this reason we read it on Yom Kippur. But I read another profound message in this story. Jonah’s book records the prophet’s downward spiral of mental illness, a story that pulls us in with its drama. I believe that Jonah’s story ends with the first step of his treatment – with God’s questions about his pain. Treatment and recovery are not glamorous. They do not make for an exciting biblical epic. They do not involve chartered ships and vast cities and mass repentance. They require the slow work of therapy and care. They require hard work and patience and a caring community.

We are one such caring community. We can pick up where Jonah’s book left off. This congregation can offer an antidote to feelings of shame so often associated with mental illness. Instead of shame, we strive to foster a sense of hope and support for those who choose to engage with us. The stigma that for so long isolated people with mental illness has cracks. Communities like ours can melt that stigma away. More and more, people understand that mental illness is just that, illness. That, like any acute or chronic condition, it can be treated. That those in treatment, benefiting from the support of a caring community, can move into recovery. I’ve seen the vast difference between people with mental illness who have a community rally around them and those who, sadly, do not have that kind of support. The outcomes couldn’t be more different.

If Jonah could have left his mountain side camp and come home to Congregation Emanu-El of Westchester, we could have helped him along the path of treatment and recovery in important ways. Our clergy, our staff, our leadership and all of you, our congregants, play a vital role in creating the kind of community that can make all the difference. If Jonah came to meet with me, I would tell him that my door is always open. I would point him to our congregation’s social worker, a caring professional that we share with several other congregations through Westchester Jewish Community Service’s Partners in Caring Program. This UJA-funded program provides critical support to help people in the first steps of treatment and provides support to caregivers, families, and friends. At the very least, I could tell Jonah about 1-800-273-TALK. This hotline connects people to crisis counselors who know the community resources available. They can

help in a mental health crisis of any kind, including imminent threats of suicide. Again, that number is 1-800-273-TALK.⁶ And if Jonah preferred to text, he could text the word START to 741741. A live, trained crisis counselor would respond quickly to help move him “from a hot moment to a cool moment.”⁷

Once Jonah started treatment, we could be a safe place for him during his journey towards recovery. We call this room a sanctuary. It provides sanctuary from the noise and stress of life, a place for calm and reflection, for acceptance. Isaiah prophesized that, “My house shall be a house of prayer for all peoples.”⁸ This is just such a house, a judgement-free space for our congregants no matter their mental, physical or spiritual health. Outside of worship, we live the values that create the kind of community necessary for recovery. We host a monthly support group for LGBT teens – a group with a disproportionately high suicide attempt rate. Our weekly Monday night teen program addresses many of the issues that impact the mental health of our teens.

We have the kind of open, accepting community that anyone in treatment could benefit from. We begin each of our Friday night worship services by greeting one another, specifically greeting people we do not know. We hold our oneg in the entrance of our sanctuary so that all feel comfortable and welcome. Next Step, L’Chaim, the Women’s Study Group, and the important work of our Social Action Committee provide friendship while helping us find and celebrate the meaning in our lives. Individually, there are specific things that we can do to ensure that people feel welcome, no matter their mental health. We can foster an awareness that when we ask others about their family, there may be a back story that we don’t know. If there is a suicide, we can embrace and offer support to the family who has lost someone, ask the person’s name, ask what they were like, if we knew the person we can share a personal story. We can do something as simple as including the names of people suffering with mental illness on our weekly Mi Sheberach list when we come to Friday night services. We’ve all got stuff going on that isn’t obvious on the outside. We can draw on the compassion that we’d want from other congregants to show kindness and concern to others.⁹

We don’t know what happened to Jonah after God recognizes his pain at the end of the book. Most of us do not expect God to call down from heaven and inquire about our pain. But the spiritual nevertheless can play an important role in our emotional and mental well-being. When we come to the synagogue, whatever the state of our mental health, we carve out the time to recognize the blessings in our lives, to see the ways – however remote or intimate – that the holy weaves through our day, that the Divine might touch our souls. When we gather for worship in community, if we open ourselves to it, we can feel the blessings and goodness and kindness and wisdom of our world, see in those the echo of the Divine, and know that uplift, recovery and healing are possible.

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May this be God’s will.

⁶ <http://suicidepreventionlifeline.org/>

⁷ <http://www.crisistextline.org/how-it-works/>

⁸ Isaiah 56:7

⁹ Joanne Harpel of Rethink The Conversation advised on this section.