

BOOK REVIEW

GOD'S HOTEL: A Doctor, A Hospital, and a Pilgrimage to the Heart of Medicine by Victoria Sweet. Penguin Books, New York, NY, 2012. Reviewed by Rochelle Linzer.

God's Hotel is a wonderful book, both in style and in substance. Victoria Sweet's distinctive, engaging and conversational prose is entirely lacking in artifice. Her language is direct and vivid, whether describing a patient's medical history, reporting on the findings of a physical examination, ironically and incisively dissecting the politics of health care, or explaining the etymology of a word from ancient Latin. The pleasure of reading such a skilled writer is enhanced by the depth and insight she brings to the multiple themes this important book addresses. *God's Hotel* is a loving portrait of San Francisco's Laguna Honda Hospital, one of the last almshouses in the US, and a cautionary tale of how it was changed into a modern health care facility.

Dr. Sweet originally took the job at Laguna Honda because it allowed her to work part-time while she pursued a doctorate in the history of medicine. And we follow her intellectual excitement in discovering the premodern medicine of Hildegard of Bingen.

For years Laguna Honda, which opened in 1867, was "a cathedral for everyone who didn't fit somewhere else—it was a shelter, a farm for the unemployed, a halfway house, and a rehabilitation center, as well as a hospital." The

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develop a point of identification with suffering itself." And she continues to argue in *Frames of War* that the "radical inequality that characterizes the difference between grievable and un-grievable lives is something that we all must struggle to overcome in the name of an interdependent world and within the terms of a more radical and effective form of egalitarianism."

The problem, however, is that it is difficult for any of us to see those different from ourselves as people. Judith Butler writes of how our empathy is restrained by what is not shown to us, such as photographs of our "enemies" mourning for their dead. But she also reveals that the "constraints are not only on content, but on what can be heard, read, seen, felt, and known." Her collection of essays challenges such paralyzing social norms and explores various sites of her tension with precarious life, notably with our government's torturous practice of indefinite detention and the poetry written by the men at Guantánamo. Each collection builds to a final essay on nonviolence. Starting with her understanding with precarious life, Judith Butler describes a growing receptivity to the claim of nonviolence as a site of struggle and responsibility, "especially when it refuses and breaks the frames by which war is wrought time and again."

Judith Butler's work invites us to test out its precepts and discover the innumerable needs for nonviolent intervention. A good extension of her insights is the recent collection of essays by the College Theology Society, entitled *Violence, Transformation, and the Sacred*, edited by South Bend Catholic Worker, Margaret Pfeil, and her academic colleague Tobias Winright (Orbis Books, 2012). This collection explores a wide range of issues such as September 11th and its aftermath, the murder of Osama bin Laden, ecological violence, gender essentialism and the violence against people of different sexual orientation, the fruitful conjunction of deconstructionist philosophy and Catholicism, as well as the response to violence in the lives of Saint Clare and the Desert Fathers. Each essay in this collection expands our own ability to hear, see, feel and come to know the needs of others in our world today.

Of particular interest to me is the essay by a dear friend of our community, artist

patient census was partly determined by an aging population, the decision to close state mental hospitals, lack of funds for community care, increase in homelessness and laws that allowed psychiatric patients to refuse medication and treatment. Set on sixty-two acres, its main building was a large Romanesque structure that housed 1,178 patients in thirty-eight open wards with thirty beds, each supervised by a head nurse. The expansive grounds included an aviary, a greenhouse and a barnyard.

The facility may have been old but for more than forty years it had Miss Lester as the director of nursing, and nursing was the heart of patient care at Laguna Honda. "With so little in the way of modernity, Miss Lester nonetheless provided what was necessary for the best care of the patient—a gentle and reliable staff. The peculiar softness underneath her system—the kindness woven like an invisible thread through the descript fabric of the place—may or may not have been due to her, but it was not hindered by her. It wasn't dismantled, removed, or teased out." Eventually, Miss Lester was replaced by nurse administrators who were more concerned with forms, policies and procedures than with daily tears of the wards or hands-on patient care.

Dr. Sweet celebrates the inefficiencies of Laguna Honda, like the head nurse who hand-knit blankets for all the patients on her ward, the activity therapist who looked after a discharged patient so he could stay at home and the chicken that lived on the AIDS ward, delighting the dying patients. And there was Dr. Curtis, who couldn't understand why a patient was on the rehabilitation ward three months after he was deemed ready to be discharged. The patient explained that his special shoes had not been approved by Medicaid. So Dr. Curtis drove to Walmart, bought a pair

and art historian Gael Mooney, who writes of the transformative paintings of Georges Rouault (1871-1958). During the mid-twentieth century, Georges Rouault created a body of work that, as Gael Mooney explains, "relates the suffering of Christ to 'every aspect of the human condition—the plight of the poor, the disenfranchised, and other oppressed members of society, the despair of the condemned, the anguish of soldiers and victims of war, violence, and neglect, and the 'solitude of the individual.'" Georges Rouault's paintings such as *Suffering in Consolation* to his unflattering portrayals of powerful members of society such as judges, academics and high society women. With this visual interweaving of the sacred and the profane, the rich and the poor, we develop a perspective on social justice as "not merely an ethical category, but as an aesthetic and theological one that is central to the meaning of divine beauty." Gael Mooney shows that the study of Georges Rouault's paintings strengthens the resolve to love over the instinct to kill when faced with the injustice of the world.

The positive way of precarity for Dorothy Day or the cultivated precarious life for Judith Butler is full of risk and opportunity. For it readily makes us, as Judith Butler put it, "vulnerable to violence; but also vulnerable to another range of touch." I have learned extensively from this tension living at the CW. And I also greatly admire folks like the people of Amherst, Mass., who have responded to the US Congress ban on releasing any detained man at Guantánamo into the US by passing a town resolution to welcome and take responsibility for two of the detainees, Ahmed Belbacha from Algeria and Ravil Mingazov from Russia. These two men have been cleared for release for years yet remain detained in the political quagmire. For more information on this community movement: No More Guantánamos, PO Box 618, Whately, MA 01089, (413) 663-1150.

How might we too respond to precarious life, near and far? Possibilities abound if we ask ourselves, as individuals and as communities, how we could live by an open invitation to others? As Rumi once wrote, "Love is pulling us out by the ears to school/Love wants us clean of resentment/and those impulses that misguide our soul."

—Tod Walker



Michele Dick

of running shoes and discharged the patient. That kind of "time-costly" caring was what created the personal relationship between patient and doctor. And that relationship was the secret of healing... the secret in the care of the patient was—inefficiency."

The inefficiencies at Laguna Honda were possible because of the gift of time. Doctors had time to make accurate diagnoses, which often meant that patients could stop taking incorrect, expensive and potentially dangerous medications. There was time to apply the remedies of Dr. Quiet, Dr. Diet and Dr. Merryman. There was time for patients to heal.

I wasn't sure whether all of the hospital's inefficiencies were therapeutic, but I did begin to wonder how it would come out if they were all added up. Correct diagnoses instead of incorrect ones. Visits to the emergency room avoided because doctors had enough time to spend with their patients. Feelings soothed, glasses filled, free avian entertainment. Would the money saved on unnecessary hospital days by a doctor who runs out and buys shoes at Wal-Mart balance out or even pay for injuries like the heat food and drink, massages, fresh flowers, alternative medicine? I began to think that perhaps, in this new day of evidence-based medicine, the Laguna Honda model of inefficient health care deserved a trial.

Dr. Sweet's appreciation of Laguna Honda's strengths is framed in the context of her doctoral studies on Hildegard of Bingen. The premodern medicine that Hildegard practiced was based on gardening, rather than mechanistic metaphors, and Dr. Sweet incorporated some of Hildegard's ideas in her own practice. Hildegard talks about *viriditas*, "the power of plants to put forth leaves, flowers, and fruits; and she also used it for the analogous power of human beings to grow, to give birth and to heal."

One of the most remarkable stories in this book is about Terry Becker, a woman who presented with a terrible bedsores, "huge, enormous, and deep... the skin was completely gone, of course, but so were the fat and the muscles that cover the spine." Dr. Sweet approached Terry's care with the insights of Hildegard: "what she would do, I suddenly saw, was remove obstructions to Terry's *viriditas*, to Terry's natural ability to heal. Because if nothing was in its way, then *viriditas* would heal her wound as surely as a plant will grow green. My first job, therefore, as gardener-doctor, was not to make a brilliant diagnosis or give any magical medication, but to remove obstructions to Terry's own *viriditas*."

"To see what else was needed, I had to start with a vision of Terry whole, complete, and healthy, in a future when all that was missing from her complete health was a pair of glasses. And walk my way back from that. Which I did. I walked past the repair of her teeth, the strengthening of her body, the strengthening of her will, the resolution of her depression, and the healing of her bedsores. I walked all the way back from the perfect future to the imperfect now, and then I organized my strategy forward." Dr. Sweet goes on, "It took a long time. It took two and a half years. But we were in no hurry, and neither was she."

The most painful sections of this beautiful book are those that narrate Laguna Honda's transition from an almshouse into a health care facility. The political, administrative and budgetary manipulations are consistently obtuse and dangerous. It began with the consulting firm of Dee and Tee, Health-Care Efficiency Experts, and wound its way through Department of Justice investigations, court

orders and the building of the new Laguna Honda hospital. It left in its wake a radically different staff, with different goals and priorities.

The new Laguna Honda is physically impressive but it lacks the inefficiencies that made the old one so compelling. It "was beautiful but it wasn't warm. If the old hospital was a decrepit, sprawling farmhouse, then the new facility was a five-star hotel, shiny, sterile, impersonal." She goes on, "When the electronic records came online, the paper charts would go, and with them, the freedom of flipping through pages, recognizing the handwriting of my friends, and writing the real story of a patient. I would spend my time at a computer instead, providing health-care data so that administration could prove that Laguna Honda provided cost-efficient, culturally competent care in a nonstuffy setting, with a focus on short-term rehabilitation and discharge. When would I see my patients, sit on their beds and listen to their stories?"

The personalism of slow medicine stands in stark contrast to the efficiencies of the health care model that we are moving toward. But Dr. Sweet is clear that we don't have to make an either/or approach. As part of her doctoral research she spent a year in Switzerland and saw that it is possible to keep what is good from the past. "So in Swiss hospitals, I discovered, massage and herbs were prescribed at night for sleep, and herbal baths still used... What I was discovering with such effort about health and the body from premodern medicine in general, and from Hildegard in specific, was, in Switzerland, nothing new."



M. Ellen Lester

God's Hotel is an important book about health care and medicine, but it is also an exceptionally fine Catholic book. I hesitate to say this—Dr. Sweet makes no mention of her own religious faith, or practice (if any). But it is impossible to read this book without a sense of the age-old wisdom of Catholicism. Like the faint odor of incense that lingers in an empty church building, this book is radiant with Catholic genius reverence for the human person, an unflinching acceptance of dying and death, humor, irony, an appreciation of the monastic understanding of charity, hospitality and community that was the heart of the hospital. Victoria Sweet knows that Laguna Honda has been a gift, and *God's Hotel* is rich in gratitude, both from the author and from the readers of this wonderful book. ☩