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Human Behavior in the Social Environment

Spring 2006-01

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A Little Life & A Large Lifetime Impact:

An analysis of Jude St. Francis’ character and environment

The beloved book, *A Little Life* by Hanya Yanagihara, is a story about trauma and its lasting lifetime impact. Although the novel follows four friends from college to late adulthood, the main storyline is centered around one character, Jude St Francis, and his horrific early life experiences. In this essay, I analyze Jude’s life through several lenses to deepen my understanding of the biopsychosocial approach and their impact on development. In addition to biological influences, I examine Jude’s micro and macro level systems and how these relationships impact his self-perception and long-term development. I then, unpack how his social identity, including his race, gender, family orientation, ability and sexuality affect his interactions within a white cis privileged world and identify what risks or protective factors each posed. In my closing section, I discuss his coping mechanisms, strengths, and sources of resilience that enabled him to rise above stressors such as poverty, homelessness, abuse, and isolation. Lastly, I examine his experiences through the lens of critical race theory and critical disability theory to further unpack the nuances of his life experiences. This extensive examination of Jude’s identity, his circumstances, as well as the society in which he lives and how it interacts with him, has not only deepened my understanding of several theories and how to apply it in clinical practice, but has provided a clear example of the interconnected nature of the biopsychosocial model and life course perspective.

The Client – Jude St. Francis

The reader meets Jude St Francis while he is in college and in many ways, he appears to be the standard college student outside of his walking limp and incredible intelligence. He has three friends, JB, William, and Malcom, who he remains close to throughout his life. However, Jude often fails to reveal himself to them in the same way they open themselves up to Jude. He is portrayed as shy and extremely
private, which is annoying to JB who views his caginess as secrecy. It’s evident to the reader that the
caginess is due to Jude’s mistrust, shame, and depression. As the novel progresses, the reader discovers
that Jude is racially ambiguous and has no biological family connections. His back and legs are covered in
scars from childhood abuse and his arms from self-cutting. When Jude was an orphan, he was taken
advantage of by the adults who were supposed to be caretaking for him, and his childhood was
overwhelmed by a lack of stability or safety. Adult age Jude lives with a disability that was caused by a
car running over him. In his 20s, he starts using a wheelchair periodically when the pain becomes
intolerable. He is embarrassed by his back injury and when he struggles, Jude tries to hide as much as he
can from his loving friends and his adult adopted parents. Despite his attempt to avoid intimacy in
relationships, Jude does find many people to love him in his post high school life, including an older
professor who eventually adopts Jude as an adult and a doctor, turned friend, who cares for him weekly
(free of charge). Jude hardly reveals his horrible history, fearing that those around him will view him
differently or leave. Driven by a desire for security, safety and independence, he secures a high paying
attorney job later in life that provides financial and personal stability. Jude stays at the New York law
firm for the remainder of his life until he, in a period of deep depression and grief, takes his own life.

Biological Influences

Hereditary Factors

Jude St Francis is first introduced to the reader on a very superficial level and as an orphan, little
is known about his biological past or identity. In an initial attempt to understand Jude, the reader
identifies his biological influences. Three visible factors that the reader can identify are his race, ability,
and gender. Although Jude benefits from male privilege in his adult life in his education, career, and
finances, his sex or gender did not protect him from the risks of being orphaned, a person of color, or
poor. Jude is described as ethnically ambiguous and has a physical disability. As a non-white male, he
likely faced discrimination growing up in America, and as an indidual living with a visible disability, he
likely faced prejudice. As an orphan, he was not protected by family or parent figures and as a foster
child, he was subject to abuse and neglect. In such environments, he was likely exposed to toxic stress,
defined as “strong, frequent, and, or prolonged activation of the body’s stress-response systems in the absence of the buffering protection of stable adult support,” (Shonkoff et al. 2020). Risk factors of toxic stress include poverty, recurrent abuse, neglect, and family violence, many of which Jude was exposed to. Toxic stress can disrupt brain architecture and lead to stress related physical and mental illnesses (Keene, 2022).

After birth, Jude had little support to protect, lovingly care, or nurture him. It’s shown that maternal responsiveness can mitigate risks of toxic stress and help buffer the stress children experience while growing up (Sprang, 2009). Unfortunately, Jude had no maternal presence early in life to buffer stress and little is known about his biological family. As an abandoned child, the reader only knows that he was left on the sidewalk. However, it could be possible that Jude’s parents or mother lived in poverty and these stressors lead them to abandon their child. Potentially his mother, may have wished for a better life than she could provide and hoped someone else could do so or her son. She might have had substance abuse issues, fallen into hard times, or given birth out of wedlock. Regardless, , living in poverty creates a lot of stress, which might have forced her to give up Jude. As a fetus, Jude might have been exposed to various substances and developed other health issues that contributed to his poor health later in life. Pregnant mothers exposed to high levels of stress are found to give birth to babies with smaller head circumferences (Straussner & Calnan, 2012). While living in poverty, it’s also possible, he was born malnourished which is also linked to health issues later in life. As Sprang et al. (2009) notes, low birthweight is associated with diabetes and altered stress hormone responsiveness. The American Psychological Association (2017) reports that low birth weight is also associated with mental health problems. They found that adults born underweight reported that they experienced higher levels of shyness, depression, and anxiety which are similar to Jude’s mental health struggles (Mathewson et al. 2017).

**Physical Health Factors**

The minimal background information about Jude leads the reader to speculate and focus more on his physical health and how it deteriorates over time. Without hereditary context, Jude’s story is mostly
defined by his childhood trauma, disability, and sexual abuse - all of which negatively affected his health. In youth, Jude contracts a sexual transmitted infection which affects him both physically and mentally. He feels great amount of shame about his sexual encounters and diagnosis, which the readers assume is HSV and, or HIV. In adolescence, he is run over by a car and lives with physical disabilities that worsen with age. After the car injury, Jude’s spine slowly recovers but he develops reoccurring open sores because of the peripheral nerve damage incurred from the accident. Over time he becomes more reliant on a wheelchair which makes him feel weak, helpless, and ugly. Throughout his life he needs constant medical care to help with his pain, ensure his mobility and keep him safe. Sadly, his legs are amputated after he develops osteomyelitis in his legs due to open sores, his compromised immune system, and likely a decade of abuse.

**Mental Health Factors**

Jude suffered from intense depression, anxiety, and suicidal ideation that was diagnosed and treated with medication from a physician. However, it is important to note that his depression, although classified as a mental illness on a biological level, is deeply linked to his history and developmental environment. His experience is similar to many children who have experienced a lot of traumas and to those in the foster care system, which are social and environmental events. Greenson et al. (2012) highlights that child who experience multiple types of trauma are at greater risk for psychosocial maladjustment and mental health problems. Additionally, at least 83% of youth who report trauma received at least one clinical diagnosis and, like Jude, youth with complex trauma histories are significantly more likely to be residing in foster care (Keene, 2022). Another study observed that victims of child abuse are also at increased risk of suicide. About 80% of the individuals who attempted suicide in the study sample had a history of child abuse (Martin et al. 2016). Sadly, as a victim of child abuse, Jude also attempted suicide several times as an adult. He did not have access to safe homes or mental health care as a child and lived with intense shame and depression until he took his own life. Although many of these physical and mental illnesses and biological factors could have influenced Jude’s ultimate outcome,
it’s just as important to understand how his environment and experiences, like foster care, also affected and likely influenced Jude’s self-perception, motivation, and ultimate dying act.

**Applying the Ecological Model to Jude’s Life Span**

Due to the complexity and depth of Jude’s story, I split his life analysis into three sections: childhood, adolescence, and adulthood. In each period of life, I review micro and macro system factors. Many of the microlevel relationships profoundly impact Jude’s relationships later in life and many of his protective approaches and coping skills stemmed from these early relationship experiences. I then, review Jude’s main stressors and his coping mechanisms that helped him survive to show how Jude utilized these skills as a form of resilience.

**Childhood**

Jude’s microsystem in childhood is very small and he has limited interactions. As an orphan, he has no parents and instead is taken in by a monastery in South Dakota. From almost birth to 8 years old, Jude lives in a relatively closed, isolated environment. At the monastery, he lives with and learns from the brothers. These men in his microsystem create conflicting relationship dynamics for Jude. As a child, he is heavily reliant on their support to survive, eat, sleep, and learn. They are the source of his shelter, food, safety, and education, but they are also the source of his pain. Soon after he’s caught taking something that does not belong to him, the brothers began to beat and molest him. Jude develops deep anger for how he is mistreated. However, he is confused since they care for him and he does not understand how to manage such conflicting feelings. At the age of six, he identifies the feeling of shame and embarrassment; though, it is likely he experienced these emotions at a much younger age. Infants are said to develop the feelings and symptoms of shame closer to six to eight months of age (Keene, 2022).

At this period, he has limited interactions with anyone outside the monastery and his microsystem remains isolated to the four brothers and the staff who live there. It is clear through his studies that he is very intelligent and loves to learn. However, he starts avoiding his teachers and abusers as they begin to punish him more and call him ugly names, likely due to their own shame. At this point Jude’s attachment styles are likely formed, and it appears he developed an avoidant attachment to his caretakers. His
caretakers beat him and often reject him, leaving Jude feeling unloved, rejected, angry and confused, similar to the reactions of insecure-avoidant types (Keene, 2022).

When he is a bit older, it appears that the brothers are frustrated with taking care of Jude. They are tired of feeding, teaching, and providing for him. Potentially outside forces in the macrosystem, like less funding or less finances, are creating more stress for them. Macro level system factors can include “economics, laws, culture, and religion” (Rodgers, 2019 p. 28). For the monastery, circumstances like inflation, economic depression or recession could impact the amount of funding they receive. Maybe, leaders are pressuring them to guard their expenses and now the brothers view Jude as a financial burden and resent him. Additionally in their environment, homosexual relationships, and sex out of wedlock were likely viewed as wrong or immoral in the religious setting. Despite these teachings, it’s possible the brothers blamed Jude for their attraction to him and used sexual acts as a perverse punishment. Due to Jude’s intense separation from broader society, his life is heavily impacted by the brothers’ way of life, teachings, values, and what they say to him. He has little access to other information, cultural perspectives, politics, or social services to help him.

It appears Jude internalizes and believes the brother’s comments because later in life, he views himself as a burden to his loved ones. Jude as an adult continues to avoid relationships, believing he’s too much for others, even those who care about him. When Jude dies, his adopted parents say that Jude “died thinking that he owed us an apology…he died still stubbornly believing everything he was taught about himself,” (Yanagihara, 2015 p.815). Other children who experience similar emotional abuse at a young age also are likely to internalize certain ideologies and behaviors. There are studies that indicate that children abused at young ages can present anxiety and depression (McLer et al. 1994). For adolescent aged kids, if abuse continues, they are even more likely to experience depression (Moylan et al. 2010).

With no other children to compare his experiences to and with no other adults to protect or turn to, Jude did not understand his complex emotions nor how to escape his situation. In thinking he created a better, more trusting relationship with a particular brother, Brother Luke, he willingly and excitedly leaves the monastery with this adult. Brother Luke and Jude run away, creating a another very small
microsystem for Jude. They spend several years driving across the country, living in various hotels and creating a very unstable and insecure life. Brother Luke reveals himself to be an untrustworthy adult. He repeatedly rapes 8-year-old Jude, under the guise that he “loves” Jude. Although Luke is verbally soft and kind to Jude, he takes complete advantage of the child. It’s now clear that he was grooming Jude all along. With nowhere to go, no access to other people or resources, and unable to fully grasp the gravity of Luke’s wrongs, Jude stays with Luke for several years. During this time, Luke prostitutes Jude to other men and praises Jude for it. Within this small microenvironment, Jude has fleeting contact with strangers and different hotels. Through this continuous abuse, Jude develops PTSD and likely Complex Trauma. Complex trauma is defined as “recurrent interpersonal trauma perpetrated by caregivers” (Greenson, 2011). Greenson also notes that complex trauma survivors exhibited higher rates of internalizing problems, posttraumatic stress, and clinical diagnose compared to youth with other types of traumas. Jude, like the study’s trauma survivors, internalizes much of the abuse and shame from this time in his life. While Jude believes the brothers’ horrible comments that he is burden and a bad person, with Luke, he internalizes that he is only useful for sexual exploitation.

As the sole financial provider for both Jude and Brother Luke, Jude began to understand the concept of money and its power. Jude’s awareness of monetary power is observed later when Jude is in college. Even in the smallest of acts, eating food or splitting meals, Jude ensures that he is never indebted to any of his friends by not eating shared meals, or only taking the smallest amount. Likely this fear of unequal power or money inequality is a result of his time with Brother Luke’s controlling financial behavior. In retrospect, it is possible that Brother Luke might have never left the monastery without Jude and if he did, he would have sought other income sources, potentially pimping himself instead of a child. Sadly, Jude was Brother Luke’s money ticket out of the monastery and South Dakota. Jude and Luke fail to escape poverty – they can stay in a hotel and eat, but it’s never enough. Despite various welfare programs that are available to them, Brother Luke did not take advantage of any other these resources. The macrosystem factors that are present such as Medicare or food stamps are never utilized in fear that Luke will get caught. Ironically, laws and governing regulations, other macrosystem factors, prevent Luke
from seeking out these resources. When the police finally find them, Luke kills himself to avoid criminal punishment, indicating he is aware of the harm he inflicted on Jude. After police and government involvement, Jude has no one from his past to help or support him. Everything he once knew is gone and he is placed in foster care in Montana, a completely new state.

Adolescence

When Jude is admitted to the foster care system, he is on the cusp young adolescence and exposed to a completely new world. Both his micro and macro systems expand substantially. At the boys’ home in Montana, he lives with other children for the first time and starts attending public school. Due to Brother Luke’s teachings, Jude skips four grades and he takes classes at the community college. School is an escape and haven from his life at the boy’s home. Since Jude is from such a different background than many of the other children, they view him as different. They think his monastery clothes are strange and his bible and Navajo doll, weird. According to the World Population Review (2022), Montana’s population is 88% white, 6.4% Native American and 3.8% non-white. Jude, as a racially ambiguous boy, likely stands out compared to his peers both in school and at home, who are likely white. Viewing Jude as vulnerable and separated from the other children, the counselors take advantage of him. Again, he is abused by his caretakers and his trust is violated. It appears that his adolescence situation is not much better than his childhood situation.

Like Jude, it is not uncommon for foster children to be put in similar if not worse conditions. Due to policy programs, housing, and lack of funding, too many children are overloading the system and there is not enough supervision to guarantee these placements are safe. According to Cooper et al. (2007), there are many practices that can retraumatize children. Cooper et al. (2007) found that a small portion of children maltreatment is perpetrated by foster parents and residential facility staff. In boot camps, investigators found excessive discipline and a pattern of physical abuse. These camps are also linked to death, injuries, and sexual abuse caused by the staff. In 2004, there was 2,800 reported allegations of sexual violence in youth facilities and 18% of these facilities reported that children needed protection from other youth in the center (Cooper, 2007).
Although systems like foster care and law enforcement are supposed to help and protect people, in execution, it does not always play out that way and often fails. Foster children are frequently misunderstood and judged, labeled as difficult or ungrateful, which only further perpetuates the cycle of harm and confusion (Cournos, 2002). For example, when Jude tries to escape the community home and run from the abusive counselors, he is beaten and then hospitalized. The nurses are told he is a delinquent and that he is the problem. He receives no additional mental health help or support despite his “bad” behavior. Additionally, upon entering the boys’ home, the police and child welfare system know of his prior trauma. Despite knowing of his horribly abusive and traumatizing history, they fail to prevent it from reoccurring, protect him in the home, or provide mental health services to help him deal with the emotional turmoil, loss of his caretaker and pain caused by abuse. Despite Luke, his prior caretaker abusing him, this was the only emotional connection Jude has. He watched Luke hang himself when the police arrived and then, must deal with both the emotional recovery and grief completely on his own. Sadly, Jude’s experience is reflective of our current system. Our system rarely recognizes the trauma and profound loss these children incur. It often neglects to provide proper treatment or support to children who have lost both their innocence and people they called family. Unfortunately, less than 25 percent of youth in welfare programs that are in need receive mental health treatment (Cooper, 2007).

Additionally, our system and society only cater to younger children. Parents often want younger kids, maybe swayed by cultural assumptions that they are easier to manage. Similarly, Jude is almost adopted by a family, but they exchange him for a younger kid. This is not uncommon, as most families want to adopt young children rather than adolescents (US Department of Health and Human Services, 2011). According to adoptive parent surveys only 3% of parents will adopt a child 13 years or older and in 2017, only 12% of parents will adopt a child 6 to 12 years of age (Dave Thomas Foundation for Adoption, 2017). This societal ideal or preference toward younger children has a very adverse effect on Jude and he is heartbroken. The foster care system creates a dynamic where children often feel they have no control, and they often have no autonomy in their home or placement. Cournos (2002) in her own account, acknowledges the pain and hopelessness she felt not being able to make choices within the
system and how that impacts the child as they get older. With no control in the situation, Jude feels very discouraged and despondent, which leads him to run away again. If this family did adopt Jude, it is possible his life would have been very different. If they provided a safe home, he could have learned to nurture healthy relationships and build trust with others earlier in his life. Stronger family ties could have provided protective factors for him as well. Jude might have felt secure in his relationships, safe to open to others, and potentially had the self-confidence to date later in life. And if the family adopted him, he might have stayed in Montana, and in staying, the car injury that caused a lifelong disability never would have happened.

However, Jude does not get adopted and he does decide to run away from the boy’s home. In his escape he is kidnapped by another man who holds him hostage, drugs, and rapes him repeatedly. The kidnapper “frees” him in a field and then proceeds to run Jude over with a car. Miraculously, he survives the car incident and is nursed back to health in the hospital. Here, Jude meets a social worker, Ana, who helps in his recovery and foster placement. Ana is the one of the only positive microsystem relationships Jude has in his adolescent years. She, as a social worker, also symbolizes new macrosystem forces that are more present in Jude’s life and provides a protect resilient presence for him. After running away from Montana, he made it to Philadelphia, where he is placed in a new state foster system. Philadelphia is much more diverse place compared to Montana, as the fourth largest Black community in the United States (World Population Review, 2022). 42% of its residents identify as Black or African American, 40% white, and 7.4% identifying ass Asian (US Census, 2022). It appears that the system is better equipped to help and place children in safe environments and potentially it’s more accepting of children from diverse backgrounds, like Jude. It’s possible that macrosystem forces in Pennsylvania impacted the available resources to Jude and the responsiveness to him. Potentially, Pennsylvania had better policies for childcare, more regulations or training programs for foster parents, and a different family culture, that is accepting of differences. This time around the system, Jude had someone to advocate for him and ensure he was protected. This could also be due to the fact that he was now in a coastal state and busy city
rather than living in rural, central America, a place that appeared to have less accessible resources or support.

In addition to these macrosystem factors that help Jude, Ana, in particular, serves as a major catalyst for his life. She finds a safe and stable home for him to finish school and helps him apply to college. She utilizes his strengths in education to get him out of poverty and the toxic foster care cycle. This relationship is the turning point for his adult life. Without her support and devotion to Jude, it is likely he never would have applied to college or paid the application fees. Also, without her positive relationship, Jude wouldn’t understand how to build trusting and safe relationships.

**Adult**

In college, Jude is more open to relationships after working with Ana and tries to make friends. He develops four close friendships and cultivates trusting relationships with a doctor and a professor. After graduate school he lives with his friends and is adopted by Harold, his old professor. This period proves to be healing for Jude. His microsystem is full of positive relationships and environments, including school and work. At college, he excels and finds positive accepting friendships. At work, he surpasses his peers and is greatly praised and appreciated. With his new adopted family, he is loved, but is unable to let go of his fear that they will abandon him. During the adoption process, he pulls away from his adopted parents, worried that they will change their minds if they learn about his past. Jude believes that Harold and Julie, his adopted parents, couldn’t really love a disabled person like him so he relentlessly hides his pain and deals with his feelings in secrecy. Jude never reveals his past, in fear they will reject him, and he avoids dating because he thinks he is disgusting. After so many adults telling him as a child, that he should be ashamed, that he is a bad child, he has grown into an adult who believes this. With limited positive reinforcement, protective relationships, and safe homes, early in life Jude believes that no one can love him, and he deserves to be alone. Throughout his adult life, he struggles with physical pain, depression, and secretly cut himself to cope with his emotions.

Although he begins to trust people and builds a stable life for himself, he is retraumatized after a relationship in his thirties. After the encouragement by his friends, he starts dating. Jude is not certain that
he is gay or even attracted to men or women. Since the only sexual relationship he knows or understands is with men, Jude appears more comfortable and open to dating men. However, it’s important to note that Jude does not identify as gay and it appears that he has little sexual desire or attraction to men or women. His friends do not understand or even recognize this, but rather think he hasn’t met the right person or even tried to date. So, when he is asked on a date, Jude goes for the sake of trying it out. He somewhat passively falls into a relationship with a man named Caleb. Sadly, Caleb becomes abusive after a few months of dating. He belittles and beats Jude and then blames Jude for making him angry. To Jude, it feels similar to the brothers who abused him as a child and again, he internalizes Caleb’s behaviors and words, believing he is the one to blame. Sadly, this experience causes him to relive some of his childhood memories and then, attempt suicide to escape his pain. Thankfully, at this point in his life, unlike his childhood, Jude has a very positive microsystem filled with a strong support network to help him through this difficult period. However, watching Jude deal with his demons is very painful for all parties involved. His friends, family, and coworkers all are impacted by Jude’s suffering. They have grown to love Jude, fight for his happiness, and support him in darker days. They rally together to get him the healthcare, emotional support, and nutrition he needs. The whole process is emotionally consuming for his family and friends, and they spend a lot of time convincing Jude to seek help. Because they love him, seeing Jude in pain both emotional and physical, is very hard on his parents and friends.

At this point in his life, Jude is living in much different macrosystem environment. First, Jude is no longer in foster care and the programs or policies that affected his care back then are no longer applicable. Second, financial factors like economy have less of an impact on Jude since he is paid well and financially independent. Third, Jude lives in a completely new geographic location. Compared to Montana or even, Philadelphia, New York is a very diverse and accepting city. New York provides many protective factors for Jude. He receives better medical care in Manhattan, and he buys the best treatments he can. New York is also much more accepting of the LGBTIQA+ community and has a very diverse population. As such, Jude does not face the same stigma, racial bias, or attention that he would in Montana or South Dakota. Even with the positives of the macrosystem factors in his adult life, they seem
to affect Jude very little. He still is depressed, despite the amazing medical care access. He still is lonely and stigmatized, despite living in a diverse city. He still is abused, despite knowing how to protect himself and being older. He still feels unworthy and shameful, despite having two parents and many amazing friendships. It appears that no matter what changes or improves in his life (macro or micro), Jude cannot escape his childhood trauma until it swallows him whole. As Berzoff (2021) explains, “Suicide is almost always a response to unbearable anguish and almost always contains both a wish to die and a wish to be rescued, to make visible an unbearable intrapsychic pain.” For Jude, living was painful and dreaming was full of horror. There was no escape from his painful memories or grief over his deceased partner; living was a horrible nightmarish chore for him. In the end, dying was Jude’s escape. However, it’s clear that Jude’s emotional wounds did not just injure him, they hurt all of Jude’s community and when Jude died, his story and pain continued to live within Harold, his adopted father.

**Stressors, Coping Skills, and Resilience**

It is shocking how much Jude endures his lifetime. With so much abuse, rape, verbal assault, and a near death experience, it is a miracle that Jude survived so many stressful experiences. He lived with many abusive adults, faced extreme poverty, isolation, and a kidnapping. He was homeless, drugged, abandon, and malnourished. He saw his caretaker die and almost died himself. Stress, in general, is linked to various health issues. The stressful circumstances Jude lived in, no doubt, affected both his mental and physical health. Low socioeconomic conditions are linked to many adult health outcomes, including mental health issues, inflammatory markers, and cardiovascular disease (Braveman, 2009). Not surprisingly, Jude experienced many symptoms of depression, including self-harm, and had lifelong reoccurring health issues. Jude also faced discrimination and prejudice and although his race is ambiguous, he was likely viewed as nonwhite. Another stressor he faced was the constant uncertainly, instability, and lack of support. As such, it’s likely that he developed an insecure attachment style and developed various other skills to guard himself physically and emotionally from people.

To tolerate the various hardships in childhood and adult life, Jude needed a diverse set of coping mechanisms to protect himself. Specifically, Jude exhibits an avoidant attachment style that developed
from a lack of a constant or consistent figure to bond with (Berzoff, 2021 p173). Another coping mechanism that Jude utilizes is self-harm. Although he is inflicting pain on himself by cutting, this provides him with a way to deal with his intense emotions without having to talk or open up to others. He was taught this skill by Brother Luke as an alternative to Jude’s habit of throwing himself against a wall. After he was abused or punished as a child, Jude did not know how to express his anger or pain. He started throwing himself against the wall to punish himself and numb his emotional pain. When he got older, cutting took the place of throwing himself. After the pleading of his doctor and friends, Jude tried to stop and instead turned to excessive walking and swimming to quiet his mind. Physical activities that either exhausted him or manifested physical pain, distracted his mind from his internal self-hatred and shame. They allowed him to have short lived hiatus from his thoughts and memories. One of Jude’s last and most effective coping mechanisms is his obsession with work. Jude’s job and work as a lawyer overlaps with his one of his most important strengths and resilience factors – education and intellect. Jude, despite his horrible childhood was provided an extensive education for his gifted mind. He was allowed to take classes at the community college and overwhelmed himself with studies. When he was with Luke, Luke tutored him extensively. Jude viewed this time as “safe” because he knew that nothing bad would happen during these hours. In the boy’s home, school was a safe place for him to escape to and he spend as much time as possible there.

Lastly, his education and intelligence served as a resilient factor and provided him freedom. It was his ticket out of poverty and a cycle of prostitution, abuse, and pain. His acceptance to college changed his whole life trajectory from poverty to wealth. In leaving his childhood behind, he dedicated himself to his legal work, drowning himself if papers, projects, and cases to help forget his memories. Here he dealt with his painful memories and depression, a negative risk or threat, by finding productive and fulfilling work, a positive adaptation (Matsen, 2011). In doing so, he created a community at work that cultivated self-esteem, value, and grounding in the world. He learned to feel valued, and, in the courtroom, he felt powerful. Although Jude started out in public works, he transitioned to private law. Much of his ambition was driven by the need to take care of himself and his medical bills. Living with a
disability left him feeling helpless and vulnerable. Jude saw money as a means to protect his independence and wellbeing and again, he identified his risk or threat and found a productive adaptation to mediate the negative effects.

**Critical Theory**

Jude St Francis experienced many hardships in life. However, to minimize his life to just these traumatic events would be to dismiss the importance and power of social influences, such as race and ableism. While Jude undoubtedly struggled with abuse, he likely struggled daily as a racially ambiguous, disabled, asexual man.

**Critical Race Theory**

Critical race theory examines and challenges current racial hierarchies and offers the field of public health a new paradigm for investigating the root cause of health disparities (Ford et al. 2010). The main premises are as follows: racism is ordinary, racial hierarchy serves the interests of the dominant group, and race is a product of social thought. When examining Jude’s life through this lens, he faced more challenges due to his nonwhite appearance. Discrimination and microaggressions likely also contributed to his health and mental health struggles. Studies find that daily microaggressions, as well as discrimination stress damages physical and mental health of individuals from minority groups (Thoits, 2010). In examining his history, his mother or father, a person of color, likely lived with “chronic exposure to seemingly minor insults” in South Dakota, a predominantly white state (Ford et al, 2010). As such, it’s likely that Jude’s parents were exposed to higher levels of stress as well. This chronic and constant stress in the mother likely impacted Jude while he was developing as a fetus.

After Jude was born, he is raised in a predominantly white monastery. The brothers might hold inherited and unconscious biases toward Jude due to his non-white appearance. Although speculative, it's possible that their behavior toward him might have been different if he was white and he would have been raised differently. Again, Jude faces discrimination in the boy’s home in Montana. He looks different than the other children and they penalize him for it by excluding, isolating, and taking advantage of him. Not all the boys in the home were abused by the counselors and it’s likely that Jude’s’ race singled him out.
Potentially, he was not adopted because the family wanted a child who looked like them. Although he was able to overcome those challenges, go to college, graduate as a lawyer and become an outstanding prosecutor, it is clear his superior intelligence gave him a leg up. Without his intelligence, he wouldn’t have the opportunity to go to college and escape poverty or homelessness. After leaving the foster system and graduating school, Jude’s race become less centered, and his disability becomes the focal point.

**Critical Disability Theory**

Critical disability theory builds on ideas from critical race theory and, as such, believes that people with disabilities have a complex experience that is often invisible. Our world is built to support the superior norm of able-bodied people and disability is a construct our society created (Rocco, 2005). As such, our world creates buildings, environments, parks, and jobs for able bodied people only, thus putting the minority at a disadvantage. For Jude, his disability makes it hard to walk for long periods of time and after he has his legs amputated, he needs prosthetics or a wheelchair. His first apartment post college has no elevator, and he struggles to walk up the stairs, often falling and needing help. This is a turning point for Jude’s career since he recognizes that he needs a building that can accommodate him. A building that has accessibility functions is more expensive than his current apartment. Thus, he had to make more money. He decides to take a higher paying job in the private sector, which is a surprise to all his friends. They live completely unaware that his main motivator to change his career is his physical impairment. Since his friends are all healthy, able-bodied individuals, this motive never crosses their minds, and they remain perplexed.

Our world is not set up for those who cannot walk and the health care system is not designed to support them either. Rather, our world, environments, systems are designed for people who are able bodied and often profit off those who are not. Jude recognizes this and chooses to make more money to compensate for his housing. Later in the book, he undergoes expensive surgeries to help his legs and uses special fitting prosthetics. Goodman et al (2020) notes that a household that includes an adult with a disability needs 28 percent more income to maintain the same standard of living as a household that does not have a member with a disability.
In addition to the costs, Jude must deal with the cultural stigma of disabilities. The foundation of stigma is rooted in social inequality and control that devalues and marginalizes stigmatized people (Jackson-Best et al. 2018). As such, Jude lives in perpetual self-awareness and self-consciousness. He is ashamed of his limp and injury since it is unlike those around him, and he needs different accommodations than his peers. Furthermore, he feels completely alone in his experience since no one around him has a physical disability. Instead of thinking to expand his circle of friends or look for support, he hides his disability and tries to assimilate. Jude thinks he’s ugly, broken, and disgusting due to his disability and without anyone to talk to about it or relate with, he fully believes these thoughts.

Lastly, Jude’s unique intersection of race and disability creates an experience that none of his friends can relate to. Although he has several friends who are Black, Asian, and Hispanic, he cannot fully identify with any of them. Since he does not know his history, ethnicity, or upbringing he struggles to identify with one community. Unlike his friends, he cannot tell people about his heritage or family because he knows of none. Although his friends understand the impacts and realness of racism, they do not see or quite fully understand what it means to live with a disability or without a family. Jude lived a lifetime of loss before he was even a year old. His unique positionality provides him with both insight and intense loneliness.

**Conclusion – Looking Forward as a Provider**

As a future clinician, I hope that one day I can help a patient like Jude. However, with the skills and knowledge I have today, I don’t know if I am ready. Jude is a difficult client for many reasons. First, he would be in my office unwillingly. In the novel, he was forced to go to therapy by his friends, physician, and parents and he is not forthcoming with his history or feelings. Jude has only told two people his entire life story and rarely asks for support, so my priority would be to build trust and consistency between our sessions. I don’t need to know his full history. Instead, my goal would be to help him create new relationship patterns in which he learns to ask for help and freely talk about his feelings. Second, I need to learn more about trauma centered approaches. There is a lot of research on how trauma is stored within our bodies and how to mediate its affects. I think this would be an important aspect of
treating Jude, especially if he is unwilling to talk. Focusing on creating a safe space within his body and centering his emotions and anxieties through EFT tapping, meditation, and breathing exercises could help with his anxieties and potentially minimize the need to self-harm. Another area that I need to learn about is self-harm. Since I have no experience with clients in this area, I would consult with providers who specialize in cutting and learn about other resources Jude can turn to. Lastly, I would need to learn more about the loss of parents and racial identity. Overall, there are many skills, I need to develop and research I need to read before working with Jude. After writing an extensive analysis on his life, I see the importance of a interconnected biopsychosocial approach. Each client, like Jude, will have their own multifaceted, nuanced interconnected story to tell, and I hope that through this lens, I will better understand them, their life complexities and how to help them.
References:


Children Adopted From Foster Care: Child and Family Characteristics, Adoption Motivation, and Well-Being. (2011) US Department of Health and Human Services


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John Hopkins Bloomberg School of Public Health. (2014, December 8) *Nearly half of U.S. kids exposed*


## Appendix

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