

Sharon Leach

MORTALS



The baby's cancer has come back.

Lisa watches the doctor's mouth forming words, which she can no longer hear, although she knows them all too well. Looking at him, it strikes her that it is like watching TV with the volume down. Only, there is sound, a blur of noise surrounding him, the normal sounds of the ward, white noise. Lisa continues watching him, dazed, her mouth slack. As if she's in a dream. But it is no dream. After six months of cautious optimism and finally beginning to breathe again, Lisa feels the familiar old weight settle in the pit of her stomach.

It's a gloriously brilliant March day that makes the eyes hurt. Outside, beneath the ancient *lignum vitae* trees, mounds of raked leaves mixed in with mown grass and general trash and debris stand waiting to be bagged and tossed out. After eleven successive days of rain the sky is clear and blue; the day is just beginning to heat up. The sunlight streaming into the children's ward suddenly seems to dim. The volume seems to be turned up again and she can once again distinguish his words, though not quite clearly. She hears them, without emotion, as if from some distant place outside herself.

"I'm sorry, Mrs Stanton. I know this is the last thing you wanted to hear right now. I mean, we knew the risks with AML. But, I guess one never is fully prepared for a relapse. Of course, we'll do everything to fight back—we'll use a combination of drugs. And there's the clinical trial for that new chemo regimen I spoke to you and your husband about. The hope is for

remission, so an allogeneic stem cell transplant can be performed. The outlook, as we've discussed before, is not the best. Whatever happens, though, you should know, we're in for the long haul."

That's it, then. He is sorry. It's over? Lisa feels slightly confused. What is he saying? She feels like a child, unable to comprehend, though she feels fairly certain she should, and she decides she will not ask him to explain. She feels exhausted. She wants to lie down somewhere, curl up and go to sleep.

No one looking at her could guess how exhausted she is. She is still fairly young (early thirties), still good-looking, despite her increasingly plodding gait that accompanies the ever-increasing weary sighs she finds she emits now, as though she were someone old and not particularly attractive. The fact is, however, Lisa feels hugely unattractive when she looks at herself in the mirror. "Who will love me again?" she sometimes says out loud to her reflection, staring into eyes that are often bloodshot and have dark smudges beneath them. She keeps a tube of concealer in her medicine chest for the express purpose of covering the circles; it's the only make-up she ever uses now. And as she peers some more at the face she hardly recognises now, she makes other unpleasant discoveries: for one, her cheekbones seem too exaggerated, too pronounced for her now gaunt face, as though they belong to someone else. Oh, they would be perfect for some anorexic runway model, but for her, they're too severe, endowing her somehow with the look of a fierce-eyed savage. But even worse was her discovery about her shape. Her post-pregnancy body with its luscious, womanly curves – the boobs, the accentuated hips – with which she'd fallen in love, and with which Steven had first seemed besotted, had all but disappeared. Her hair is brushed back severely into a neat bun, from which not one loose strand of hair had escaped. She is prophylactically dressed. In her high-necked, ruffled pink Victorian blouse, knee-length dun coloured pleated skirt whose waist is now too loose, and sensible tan pumps, she looks not so much like a believer, which she no longer is. Otherwise, she could have been mistaken for an old-fashioned woman dressed for work, at some government office, perhaps. But Lisa no longer works; she quit her job after the baby's sickness reappeared.

She stands looking at the child—her child—almost serenely, and brushes a hand against the baby's feeble arm and offers it a small, placating smile before turning away from the look of simultaneous hope and dismay clouding its eyes, bright with torment.

It's a setback, of course, the doctor continues, staring at the baby's chart, and by so doing,

Lisa realises, avoiding looking at her. Lisa's mind wanders listlessly, then, at how his words sound almost like an admission—though of what, she is uncertain. It can't be of guilt. She's the guilty one; she is convinced that she's the one responsible for passing along the sickness from in the womb.

The doctor is a slightly built, light-skinned man with a slight stoop, sloping shoulders and a smattering of freckles across his nose and cheeks. Lisa thinks it is funny for a black person, regardless of the lightness of hue, to have freckles. Even now, staring at his thinning widow's peak, she has a sudden urge to giggle. We're all going to die, she thinks, and the thought makes her queasy. Beads of sweat erupt on her forehead.

A fat nurse waddles by, in her too-tight uniform, her pudgy, white-stockings'd legs rubbing together noisily with an intense hissing sound that made it seem strangely as though her intent were to start a fire. Overweight, Lisa mentally corrects herself. 'Overweight' is the politically correct term that's used now. Lisa herself has always been slender. She's actually quite skinny now— emaciated really; she's stopped eating again, and losing weight rapidly since the baby has taken a turn for the worse. The nurse gives Lisa a tight, sympathetic smile, her chins wobbling, and Lisa, who is unable to look away from her, feels somehow exposed, diminished by this fat woman who perhaps has perfect – normal – children of her own.

To take her mind off the spiteful feelings brewing within her about the nurse, Lisa focuses her attention on the doctor. He is one of the best paediatric oncologists in the Caribbean. Lisa sees his nameplate through a sudden blur of tears. Dr J Paul Mountbatten. Mountbatten, she thinks inconsequentially, as if it's the first time she's being made aware of it. J Paul Mountbatten. A regal name. Isn't the Queen a descendant of some Mountbattens or other? And what about his Christian name? Is the J for John? No, it wasn't something that common. She's heard a colleague of his, a well-preserved doctor in her late forties, maybe, call him by his first name one day in greeting. Something Spanish? What was it again? *I ought to know my child's doctor's first name*, she thinks angrily.

The doctor is still speaking, flipping through the baby's charts, as if for an answer to some unknown question. Lisa feels inexplicably offended by this action. The tears that had been gathering in her eyes and in the back of her throat a moment ago have evaporated. *Look at me!* she wants to scream at him. *Look at me! Why are you telling me this? Why? Why? Why?*

In a corner of the ward, which is painted in a soothing, neutral light yellow, a

bald-headed baby begins to wail. There is a movement towards the cot by the overweight nurse. Lisa looks at her with contempt.

Lisa's knees feel like rubber. She turns back to face the doctor and is seized by an overwhelming nausea. *Hug me*, she thinks wildly. She imagines herself collapsing helplessly in a sobbing ball at his feet. In a heartbeat, she thinks to herself. She would launch herself at his feet, if that would help, if that action would save her child's life.

His beeper goes off. He retrieves the machine from his waist and frowningly examines it before replacing it. He does not excuse himself, which is a relief for Lisa, who inexplicably feels the need for propinquity with him in that moment. She wants to peel off his skin and burrow inside him. She watches him go over the chart and tries to communicate telepathically. *I'm alone and my baby's dying. Hug me.* But she will not embarrass herself; she will not embarrass him. Her own embarrassment is secondary, unimportant. She knows firsthand about other people's embarrassment, with which she has become intimately acquainted during the past few years the baby's been sick. She is accustomed to the nervous titters of preschoolers, the shifty looks in their parents' eyes when they are out in public, in the waiting room of the doctor's office, for example, and the baby would become seized with nausea and start projectile vomiting. "It's the chemo," Lisa would explain helplessly, compelled to apologise in her *forgive-me-for-all-this* tone of voice, the voice she had often used on her husband before he'd left. And the parents would huddle their children close to themselves, nod uncomfortably, avoiding eye contact. As if somewhere deep inside they, too, thought it was all her fault that her child was sick; dying.

Outside the hospital everything is lush and green, alive; the sun is still shining intensely. Nobody ever tells you how hard it is with a child, especially a sick one, Lisa thinks, wishing she had been raised with faith so that she could pray now. It was as if there was some conspiracy of silence about the difficulty, even with other parents of chronically- and terminally-ill children, in the same way that it was with women who'd had children and were reluctant to tell the truth about the real pain of childbirth or that pregnancy often made a woman horny, endlessly dreaming sex dreams of penises, penises and more penises.

Lisa tries to throw up in a corner of the recently mowed front lawn and then, when she is unable to, goes and sits on a concrete bench under a tree, staring at a bug march up the side of the tree trunk, the dappled mid-morning sun's rays warm against her face. There are many

benches like this one, scattered all across the grounds. To help family members compose their thoughts about the reality of loved ones' health circumstances, she imagines. She notices a man and woman seated on a nearby bench beneath another tree. The man has his hand around the slender slumped shoulders of the woman who is staring blankly into space.

Lisa looks away. Never has she felt so much like an orphan. She can hear the sound of traffic in the street, the world going on without a care for her problems. To take her mind off her isolation in the world, she thinks about her mother, who'd died in the first year she and Steven had been married. This is not a good idea, she soon realises. Her dead mother only serves to remind her that she is alone. Lisa is not in touch with her father, who had been married to someone else when Lisa was born, and had subsequently never taken an active role in his daughter's life. A divinity student from a prominent Westmoreland family, he'd dumped Lisa's mother, the secretary at the Bible College with whom he'd been having an affair for almost two years, after Lisa had been born. His family's lawyers had discreetly arranged for a generous monthly maintenance package for the child, with the stipulated condition that public acknowledgment of the identity of the father of their illegitimate grandchild was never to be. Who was there to tell? Lisa's mother had no other living relatives. She'd found another secretarial job after she had the baby, and had devoted herself to Lisa's welfare and happiness, raising her as though they were sisters. They'd even double-dated a few times, in Lisa's teenage years. Lisa's friends had all been amazed at the unconventionality of their relationship. They spoke openly and honestly about sex with each other. Because of her bad experience with Lisa's father, Lisa's mother had wanted her daughter to give her virginity to a man completely worthy of her. And Lisa had waited until she'd finished high school to have her first sexual encounter.

Lisa feels the familiar dull ache now in her breast as she thinks about how desperately she wishes she could speak to her mother even once more. Her mother, the former festival queen who drew swarms of men buzzing to her wherever she went, who had been so young looking still and so seemingly in good health—her lung cancer diagnosis (she'd never smoked) a week before her death by a sudden stroke that felled her one morning, on her way to do further tests at the National Chest hospital. Her death had been a devastating blow to Lisa, who'd imagined her mother being around to enjoy the arrival of the grandchildren she'd anxiously anticipated from the day she'd walked Lisa down the aisle. Although, in retrospect, Lisa remembered the strange persistent cough that had weakened her mother for weeks, months maybe, before she died.

They'd supposed the cough had been a residual effect of a lingering flu that had developed into a bronchial infection. Lisa had experienced a crippling sense of loss and abandonment that entire first year of her marriage, leaning against Steven, her intelligent and supportive husband, for emotional support. For two weeks after her mother's funeral Lisa had stayed home in bed, too depressed to face the world, beseeching Steven to take time off his job to stay at home with her and hold her.

What comes after, Lisa asks herself now, when emptiness is all that's left? "Let go, and let God," comes the reply inside her head, which is really just the echo of a non-sequitur she'd heard her father using to his well-heeled congregation, several times during his sermon, one Sunday when she had snuck in to a back pew of his church. Lisa had watched him, the man who had fathered but never publicly acknowledged her, studied him in his sober suit, his formal tie, his secret life locked within his breast. "When nothing's left," he had intoned, a forefinger held up in admonition, "Friends, God is there."

She closes her eyes and tries to summon the presence of this god. Failing, she decides to reconstruct an image in her mind of what her life had been before the baby. She cannot remember what her days were like, when she'd gone back to work, had a computer on her desk and wore daring high heels with professional cotton blend suits that her boss and co-workers admired. All she can remember now is life after the baby. She will have to dismantle the baby's room she'd spent so much time readying shortly after it was confirmed she was pregnant. And the furniture would have to be put in storage. Then there are all the cute little clothes to sort: she'll give some to Joan from the office who'd recently had a baby; the others she'll give to goodwill—

She stops herself, horrified to realise that she's already begun to think about the baby as if it's all over.

She pulls out her cell phone and dials her husband—the husband who has left her, left their baby, because he couldn't "stand the smell of sickness".

"Yes, Lisa," Steven answers wearily, on the fourth ring, right before voice mail chips in.

"Steven," she says without preamble. Her throat tightens up. She remembers about focal points from her days at Lamaze classes and pictures Steven holding her hand, there in the delivery room. "It's back."

"What?" She can hear him breathing noisily through his mouth on the other end of the

line. He has adenoids. “What’s back?”

“It’s the baby,” Lisa explains. “It’s back.”

There’s silence. Then: “Oh. Christ.” He expels a long frustrated sigh. “Where are you? Well, look, I’m in the middle of something here,” he says. “I have to call you back. This evening, okay?”

She hangs up before he does, knowing what he’s thinking. He is thinking she is using the baby’s sickness as leverage for him to come back home. There is a hurricane of emotions swirling around inside her, feelings she is unable to express. She gets up and wanders back towards the building but at the sliding glass door, changes her mind. The thought of going back inside there with the sickening hospital smell of antiseptic makes her want to retch again, and so urgent does the need to pee become, that she hurries around the side of the building instead.

The hospital’s grounds are huge. She remembers seeing it first on a brochure someone from her workplace had handed her. She remembers thinking that surely the baby would be cured at an impressive structure such as this. The hospital itself is a magnificent ivory-coloured edifice with sloping green shingled roofs, and built in the capitalist boom of the mid-1980s by the government with assistance from the Jewish businessmen’s league. Lisa’s footfalls are soundless in the high grass around the side of the building.

Lisa vomits again when she finds a suitable spot, near a pile of leaves under a tree. A sound somewhere makes her pause, mid-squat, a Kegel contraction that makes her pubis throb with pleasure. She looks up and sees that she is being observed by the grounds keeper, a stocky deaf-mute she’s seen around the institution. He also works as a custodian on the wards; Lisa remembers seeing him on the children’s ward, the first go-round with the baby, with his mops and other accoutrements. They had on occasion exchanged looks—there was one time Lisa noticed something in his eyes. Steven had noticed it too. They had been on the ward, conferencing to the on-call doctor one night, when he’d come up the hall, noisily dragging his roller bucket with the squeaky wheels, dirty water sloshing out over the sides. The baby had just been diagnosed; they’d been keeping vigil beside her cot every night.

Lisa had looked up, her eyes bloodshot and red-rimmed from crying, and had seen him in the hallway, staring at her, his mouth half-open in his deaf-mute gape. She could tell then, simply by looking at him, that something was wrong developmentally with him. Lisa knew it was impolite to stare but she was unable to drag her eyes away. In light of the tragedy that had

befallen their family, she couldn't help finding something morbidly compelling about sickness and disability. Their eyes held for a few seconds before she felt Steven put a protective arm around her. Then, he'd still had a protective arm for her. "Is it safe to have that guy here, on the ward with the children?" Steven had whispered to the doctor when he'd moved down the hall. "He's kind of creepy."

Lisa looks at the deaf-mute now and realises that she cannot estimate his age—it could be anywhere between late teens and thirties. He is dressed in khaki and water boots and carrying a coiled-up garden hose. His fleshy lips are hanging open, the way they had that night she'd first seen him on the ward. She wonders if he remembers her. Probably not, she thinks. Possibly he's retarded as well. No sooner is the thought out than she feels ashamed for having thought it in the first place. Her mind runs back on the nurse on the ward that she'd judged as fat. When did she become so mean?

She is frightened by a sound he makes in his throat.

'Oh,' Lisa says, and, filled with a reckless daring, empties the rest of her bladder.

He mutters something unintelligible again in his deaf-mute way, and backs away.

Lisa knows the incongruous picture she must have made with her serious hairstyle and dignified clothes, the sensible pleated skirt hiked up above her knees, squatting down above the high, vomit-sprayed grass like a Vietnamese peasant, the seat of her pants pulled aside by her finger, pee splashing against the sides of her sensible tan shoes. But in that instant, she doesn't care. The seat of her pants has gotten partially wet, too, she notices when she is finished. She pulls them down, wads them up and stuffs them into her handbag. He probably hasn't computed any of it, she tells herself. She takes out a square of Kleenex from the mini pack she keeps handy in her purse, dabs at herself before reaching down to dab at the leather of her shoes ruined by urine splash. "God," she says aloud. She tosses away the tissue, looks around. "God," she says again.

When she finds him he is attaching the hose to a standpipe. From where she stands she can smell the rank odour of sweat in his clothes.

She approaches, her heart beating erratically. She feels awkward, as if she is just learning to walk; it has been a while since she has seduced anyone. She must tread carefully, she decides, she cannot spook him. Above, a bird alights from a tree, wings flapping, startling her.

She stops.

He stops dead, too, looks up, slack-jawed. She smiles at him. She has not been with a man in more than a year; her smile is meant to inspire desire despite the awkward surrounding circumstances. She hopes it does. Unable to stop herself now, she hikes her skirt—what *is* she doing?—revealing her crotch with its untamed bush.

She hears the now familiar strangled sound issue again from some hidden part of him, and her eyes boldly travel to the front of his pants, which she sees has formed an appreciative tent. And suddenly she is glad he is unable to speak. Glad that in spite of this, he can nevertheless be made to understand.

It takes less than two minutes before she is down on all fours—her dun pleated skirt bunched up around her waist. He kneels before her. Nothing matters now—not the dead mother, or the child lying inside the sick children’s ward, the goddamned husband who himself had puked the first time he smelt the baby’s puke, and then moved out, not the fact that she has no money left for this go-round of hospital fees and medication and whatnot—except that there is a strange man inside her so that all she can feel inside her is him. In this one little thing, she at least has complete control.

She pushes him down on his back and straddles him, impaling herself on his rigid cock. His shirt is ringed with the sweat stains of one who labours for many hours beneath the sun; she peels it off and flings it as far away from them as she can. He is young, she decides—twenties, maybe—solid. She can see now that what she thought to be flab is actually muscle. His eyes are glazed with excitement and fear, his slack mouth reveals crooked yellowed teeth.

Her face is flushed; an angry vein has appeared in the centre of her forehead and her nostrils are flaring. For a while, all she can hear is the sound of their laboured breathing, and a strange voice interrupting, urging, Faster, faster, faster, faster.

She does not recognise the sound of her own angry voice.

After, she vomits again. Then she adjusts her hair, and examines her knees where the earth has bruised them. She looks at him, the deaf-mute, dazed, his pants bundled around his ankles, and sees it had been a new and not unpleasant experience for him. She imagines him thinking about her later that night in his bed, and knows she will absolutely not want him again.

She re-emerges into the brilliance of the day, a pulse at her throat throbbing like something that’s about to explode. Beneath the fabric of her skirt, her nakedness feels exquisite.

It reminds her of the days when she was desirable, when she had lovers, and she would call them teasing that she was naked beneath her clothes and she was touching herself, thinking of them. She pauses to steady herself, her secret furred deep within her like a prayer. The day has begun to really heat up, she thinks, glancing down at her blouse moist with perspiration.

At the sliding glass entrance, she bumps into the baby's doctor.

"Mrs Stanton," he says, a concerned frown creasing his brow. "We were wondering where you'd got to. Are you all right?"

"Yes. I'm fine, Doctor. I just needed, I needed some fresh air."

"Oh. Well, let's go up to see your daughter." He lightly touches her hand, propels her through the lobby that is bright with crystal sunshine, oversized potted plants and shiny marble floors, to the elevator that will take them up to the children's ward.

As they stand side by side, quietly staring up at the lighted buttons of the lift that is coming down, Lisa suddenly remembers what his first initial stands for, the J, and the recollection of the elusive Christian name brings her more satisfaction than anything else that has happened to her in a long while. Lisa repeats the name in her head like a mantra, feeling her throat tighten inexplicably in relief. She closes her eyes and breathes in deeply, breathing the name softly on her lips. She can feel the doctor standing there beside her. All around her, she is aware of people rushing about, the sick and the un-sick—mortals—their murmured words a blur, rising up like some strange and wonderful force field.

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