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and

Crystal Hurdle, last here in 2004 returns with a non-fiction piece, Tales of the body . . . . pg 13

Also returning are authors and poets Greg Button, Darrel Downton, Jocelyne Dubois, Matthew Drummond and Gloria Morin

. . . and of course we have a number of new (to us) writers that we are sure you’ll enjoy
TRANSITION

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4. Reprints and simultaneous submissions (to several magazines) are not considered.
5. Turnaround time is normally one issue or 6 months: do not send a second submission before the first has been reviewed.
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Writing for your life

BY TED DYCK

For the past several years, I’ve had the privilege of working with a group of writers in Moose Jaw who have been directly impacted by mental health issues, either as clients or as supporters of the local CMHA branch. This experience has helped me understand writing from a new perspective.

A notion current among writers is that one writes because one “must,” because one is somehow “driven” to write. I agree, for that has been my experience too, yet the writers I worked with in the CMHA (MJ) Writers Group brought a new and vital meaning to that adage.

These writers were literally writing for their lives. They were writing because they wanted to take ownership of and responsibility for those lives, because they needed to express their experiences in an environment where they could “let it all hang out” without fear of recrimination, because they needed to say what was always unsayable in public.

In the environment of this writing group (we met every two weeks), a remarkable thing happened: as we shared our writing about our experiences, we naturally became interested in how we shaped those experiences on the page. Were we getting our points across to our hearers and readers? Did our work fully engage our audience? Was our writing persuasive? Was it good writing?

In short, our interest expanded from expressing the content of our experiences to the forms in which we articulated our experiences. As we did so, though we never lost our need to do the writing therapy, we began to understand that such therapy included our development as writers, and that it might also include our presentation of our work to the larger public. Our collective gaze lifted from our collective navel to the world about us, a world that just might need to hear what we had to say.

With this experience behind me, I approached our Executive Director David Nelson about the possibility of extending the writing therapy experience to other branches. His positive response led to a successful CMHA(SK) application to the Saskatchewan Arts Board’s “Partnership Explorations Program” for funds to run a pilot project in the fall of 2009 (September through December). This project is described in our application, summarized below.

Project Statement: It is proposed that the current editor of Transition serve as an itinerant writer-in-residence to establish and develop local writing groups of clients and supporters in three southern branches of CMHA. An itinerary for the writer’s visits (September through December) will be drawn up in cooperation with the branches which are voluntarily involved in the project.

1. The immediate community of the project is the clients and supporters of these three branches. This community is as diverse as the general population (for mental illness is no respecter of persons). The larger community includes all individuals who have been impacted by mental health issues, whether they are clients and supporters of the local branch or not. Eventually, the full community would be the whole population within the purview of each local branch.

2. The lead partner, CMHA (SK Division, Regina), will work together with its partners, the local branches and the writer to: (a) identify the three southern branches of the project; (b) draw up a working itinerary for the writer’s visits; and (c) serve as liaison between them and the writer. Major contributions of the local branches would be to provide working space for the writer and suitable venues for the writing groups, to assist the writer in establishing local writing groups during visits as well as supporting them from a distance (email). Most importantly, branches will be integral participants in the ongoing evaluation of the project (see #6, below).

3. The community of clients and supporters of CMHA has rather specific cultural needs. That mental health is a major aspect of a good quality of life is today widely understood. Most would also admit that persons affected by mental health issues may need to voice their experiences without fear in a supportive environment. That writing groups can provide such a supportive venue of expression is not usually considered. Yet writing groups can do that and more: they can also provide opportunities for individual growth through the development of writing and reading skills, through participation in public reading to a select audience, and through the preparation of writings for possible publication to a wider audience in Transition.

4. In other words, the project proposes that therapy through writing happens when an individual’s primary interest
Another exciting season has flown by, with the Association participating in what we hope will be a truly meaningful improvement to the lives of those with psychiatric disabilities. What I am referring to is the Disability Income Support Task Team process mandated by the Minister of Social Services. This Task Team has been meeting regularly every two weeks since January and is tasked with designing a new and separate income support program for those with significant and enduring disabilities, including cognitive and psychiatric disabilities.

The writer has been involved as a Task Team member, and the process has been a good one, with a truly collaborative tone to the meetings.

We encourage government to ensure an adequate amount to make a real difference to those with significant mental health and other disabilities in our Province.

We should make note of Jayne Whyte’s project (supported by funding from the SPRA) that will begin the compilation of the history of mental health in Saskatchewan. She “chose to focus on recreation, occupational therapy and social interactions that directly affected the lives and living conditions of persons who lived with mental illness in the Weyburn Hospital.” We are hoping that this will not only raise public awareness in this critical area, but also keep Public Policy informed of long-term history and the importance of recreation in psychosocial health and recovery.

All has been going well in the Association, with the busy schedule continuing of supporting those in our community who require our help.

One dark spot on our year has been the loss of funding for our Friends for Life program from the Ministry of Learning. We are searching for other sources of funding as we continue to push for the need for this valuable mental health and suicide prevention education program.

We look forward to a great summer, and wish you all the same.
The notion that anxiety was a brain disorder would have mystified my Scottish ancestors, who sought protection from ghosts and ghouls from God. There was no awareness of anxiety as a category of illness — as opposed to the normal state of affairs — prior to the rise of office-based psychiatry in the twentieth century. In Greek mythology, according to the Athens psychiatrist Yiannis Papakostas, gods were the embodiment of madness. Hecate, a lunar goddess, was believed to cause epileptic insanity, Dionysus triggered elation, Diana stirred hysteria, and Pan created fear. This accepted idea was carried through into Christianity via the notion that various distresses were caused by sin or a crowd of saints and Devils.

“The Lord shall smite thee with madness, and blindness, and astonishment of heart.” King David, who famously fought Goliath about 3,525 years ago, was abundantly troubled in his old age; he is reported in the Bible as saying that his “soul was alarmed,” and that “fearfulness and trembling are come upon me.” Recently, a pair of psychiatrists undertook a retroactive analysis of David, much like the one done on Abraham Lincoln a few years ago, and concluded that he was likely suffering from clinical depression. But David wouldn’t have construed it that way, and arguably the way that he did construe it — my soul is alarmed — was more meaningful, both to him and to us.

By the tenth century, Christendom had a patron saint for those suffering from “la panique” and “les frayeurs,” a certain St. Gilles of France. This suggests that people were seeking relief specifically from the grip of fear. But whether the fear they wanted eased was proportionate to the hazard of their lives, or more diffuse and irrational, is impossible to guess.

By the eighteenth century, psychiatrists (or alienists, as they were then known) presided over the major mental illnesses in remote asylums, while everybody else just carried on with the business of plague, war, dying in childbirth, starving, and so on without consulting an expert. If you were awash in nameless dread, you might avail yourself of opium — which many people did, popping a few grains at bedtime the way we now consume the sleeping pill Ambien — or they might swallow a tablet of chloral hydrate, some bromine, maybe drink ale or port, or engage in fervent prayer.

In the asylums, the alienists tended to neurosyphilis, schizophrenia, psychosis, paranoia, and manic depression, although they wouldn’t have recognized those labels, and mostly had no idea what they were doing beyond warehousing the unmanageably insane. Until the German clinician Emil Kraepelin came up with the classifications we still use, in his carefully systematized files at the end of the nineteenth century, the mentally ill were assigned a rather poetic hodgepodge of diagnoses: “mas-turbatory insanity,” “moon madness,” “wedding-night psychosis,” “old maid’s insanity,” to name a few cited by Edward Shorter in his superb A History of Psychiatry.

The first medical description of anxiety (that I’ve been able to find, at any rate) appears in a 1733 book penned by the physician George Cheyne, called The English Malady: or a treatise of nervous disorders of all kinds, as spleen, vapours, lowness of spirits, hypochondrial and hysterical distempers, etc. Cheyne blamed this apparently new phenomenon squarely on England itself, citing:

The moisture of our air, the variableness of our weather, the rankness and fertility of our soil, the richness and heaviness of our food, the wealth and abundance of the inhabitants, the inactivity and sedentary occupations of the better sort (among whom this Evil mostly rages) and the Humour of living in great, populous and consequently unhealthy Towns, which have brought forth a class and set of distempers, with atrocious and frightful symptoms, scarce known to our Ancestors, and never rising to such fatal heights, nor afflicting such numbers in any other known nation. These nervous Disorders being computed to make almost one third of the complaints of the people of condition in England.

Feel free to reinterpret the data. Anxiety next appeared during the French Revolution, and in the subsequent two hundred years was rediscovered and labeled as, variously: soldier’s heart, cardiac neurosis, nervous exhaustion, neurocirculatory asthenia, neurasthenia, hysteria, and effort syndrome. Soldiers seem to have been prime candidates for such diagnoses, perhaps because they were expected to be stout and brave: when they weren’t, they must be ill. Women, on the other hand, could faint and hyperventilate and shriek at will, and no one would think there was anything wrong, just the typical feminine delicacy. Post-traumatic stress disorder was almost certainly one of the earliest variants of anxiety to be noticed — but in soldiers, not in raped and beaten women, whose traumas went unrecognized.

Nobody who was merely anxious or depressed (or however they might have constructed their experience) would go near the asylums — which were the only secular venues for treatment of psychological pain — because of the stigma. Interestingly, the alienists themselves inadvertently created this stigma, by inventing a nonsensical but hugely influential theory called “degeneration.” In 1857, the French doctor Benedict-Augustin Morel announced to the world that madness was passed from one generation to the next, and that it grew steadily worse. If a grandfather were alcoholic, then his son would be, let us say, a “cretin,” and the grandson would be an alcoholic cretin with delusions of grandeur. Once an insufficiency of character was discovered in a family, the genetic line would...
steadily erode in character until that family was doomed.

Amazingly, this theory spread all over Europe and North America as if it were plausible. One result — not including that really big result that had to do with justifying the Holocaust — was that families began concealing their mentally ill relatives, in order to protect their children’s marriage prospects. Thus, the tradition of the mad aunt in the attic was born. Ironically, the excitedly imagined theory of degeneration plunged the care of the acutely mentally ill back into the disturbing days prior to asylums, when families were entirely responsible for their insane kin and kept them chained to barn walls, to fences, or — in rural Ireland — in pits. (The English disowned demented relatives and drove them away, condemning them to wandering vagrancy, whence comes the image of the village idiot.)

Another result of the wariness people felt about the asylums, once the theory of degeneration was in wide circulation, was that the locus of minor mental illness shifted, by popular necessity, from the mind to the nerves. If you could be said to have a “nervous illness,” you could confidently explain that your condition was physical, and completely distinct from a “mental illness”; therefore it wouldn’t lead to familial degeneration. It was more like getting the flu. Once this idea was floated by a handful of influential neurologists, people began speaking openly again about relatives who suffered from melancholy or panic or another variant of emotional distress, for it could all be safely subsumed under the title of “nerves.”

What suffering from nerves actually meant depended upon the self-appointed expert you consulted. In the United States, the neurologist George Beard called the condition “neurasthenia,” and further characterized it as a culture-bound trait that he dubbed “American nervousness.” Beard felt that it had to do with unique American pressures to succeed, besetting those “in the higher walks of business life, who are in deadly earnest in the race for place and power.” Women were particularly vulnerable to neurasthenia, because they weren’t used to challenging their brains and swiftly grew exhausted. As the historian Elaine Showalter notes, “an elaborate system of cures, including nerve tonics, galvanic belts, electric faradization, health spas, and retreats catered to the prosperous neurasthenic seeking help for his (or her) sexual problems or nervous exhaustion.”

Meanwhile in Europe, Jean-Martin Charcot, chief physician at the Salpetriere hospice in Paris, was busy homing in on the condition of “hysteria.” Unlike neurasthenia, which was entirely modern, the term hysteria had been around since Aristotle and had tended to refer to a physical condition associated with the womb, but in a magnificently vague manner, as in “the wandering womb,” so that women availed themselves of sips of “hysteria water” to treat everything from menstrual cramps to rage.

Charcot recast hysteria as an affliction that specifically involved changes in nerve tissue. He devised the “iron laws of hysteria” as a diagnostic guide for physicians confronted with ailments ranging from headache to paralysis, and then trotted out women — at his weekly Paris lectures — who had fled to his hospital as victims of brutality and rape, to act as his unwitting cases in point. Some of these women even gained celebrity, as if they were hapless guests on the Jerry Springer Show. These iron laws of hysteria were as manifestly ridiculous as the theory of degeneration, but the idea of hysteria (as a catchphrase or signifier for what we now call anxiety disorders) took flight in Europe through Charcot’s showmanship. Not only did the diagnosis fend off the declarative doom of degeneration, but it also played into the Victorian ideal of female frailty. Hysteria’s symptoms, such as dizziness, upset stomach, and headache, enabled women who were anxious, depressed, or who just didn’t feel like going out with a boring suitor on a given evening, to suffer from attacks and collapse on their settees.

Eventually, this conflation of the word hysteria with weak femininity caused the term to be tossed out, and the proverbial baby went out with the bathwater. Recently, neuropsychiatrists have been able to confirm through brain imaging that such fascinating phenomena as hysterical paralysis actually do exist. Somatic symptoms are very real; the mind has a powerful effect on the body. But in the nineteenth century, the contributions of mind, body, soul, culture, and gender to the experience of anxiety were poorly understood and often very prejudicially
assumed. (I can’t say with any confidence that the twentieth century improved on this mix, as my own experience will attest, but there have certainly been some valuable insights gleaned.)

By the middle of the nineteenth century, the idea of biologically driven bad moods was proving keenly attractive to medical entrepreneurs. With hysteria, neurasthenia, and melancholy construed as physical illnesses, physical treatments could be dreamed up and sold to the populace. The measurable standard of success with medicine was much higher with the major mental illnesses: if someone is psychotic, and you feed them a dandelion, and they’re still psychotic, you know. If they are merely depressed, and you spray them with a hose, they may cheer up, and it may have nothing whatever to do with your hose, but who knows? Water cures at health spas exploded in popularity in Victorian England. The pseudoscientific language surrounding these cures was wonderfully detailed. What spa you went to depended upon what that spa’s particular spring water was “indicated” for—with one water deemed best for melancholy, while another cured hysteria. Darwin regularly tried to wrest free of hypochondria by getting sprayed while he stood dutifully naked at a spa in Malvern. Jane Welsh Carlyle, the wife of Thomas Carlyle, wrote wryly to her husband from that same resort: “Admired the fine air and country; found by degrees water, taken as a medicine, to be the most destructive drug I had ever tried—and thus paid my tax to contemporary stupor, and had done with water cure.”

Climate came into play for a while in the formulation of correct destinations for treatment; it was argued that the best spas for treating neurasthenic patients were in the hot and humid Italian Riviera, whereas melancholics were better served by the crisp, alpine air of Switzerland. (The great T. S. Eliot went to recover from his depression on the shores of Lake Geneva.) At some point, diet entered the regimen as well, and neurasthenic patients opted for a specially formulated blend of enforced isolation with milk feeding that had been popularized by the best-selling American book Fat and Blood by physician Silas Mitchell. As Shorter notes, these “supposed indications were nothing short of a triumph of public relations.” Plus ça change.

The ultimate effect of the newfangled treatments for the physical problem of nerves was to bring minor mental illness into everyday conversation. Americans, in particular, got wholly swept up in the idea of “healthy mindedness.” As the Harvard psychologist William James observed at the turn of that century, “The mind-cure principles are beginning so to pervade the air that one catches their spirit at second-hand. One hears of the ‘Gospel of Relaxation’ and the ‘Don’t Worry Movement,’ of people who repeat to themselves ‘Youth! Health! Vigour!’ when dressing in the morning, as their motto for the day.”

In this exciting new endeavor of engaging in mental hygiene, another discovery was made. The neurologists who were treating nervous conditions through spa and diet and the like began to notice that their patients were benefiting as much from the doctor-patient relationship itself as from the treatment. Being able to confide to a listener without fear of opprobrium—that seemed to be working an unexpected kind of magic. Perhaps what people really wanted was to talk, and to be heard—not as sinners in the confessional, but as individuals. Maybe they wanted their experience acknowledged—to have someone bear witness, say “Yes, indeed, your life is on fire.” Just as this realization was dawning, along came a neurologist named Sigmund Freud, who had studied hysterics with Charcot in Paris and returned to establish a patient base in Vienna that included a large number of very bright young Jewish women, to whom nobody had ever listened. Whether or not these women—articulate, frustrated and undervalued—specifically benefited from being held up as case studies of hysterics with penis envy has become a matter of bitter dispute. But it was through their encounters with the ambitious and curious neurologist that office-based talk therapy as a medical rather than spiritual approach to emotional turmoil arrived on the scene.

If the German alienist Emil Kraepelin took charge of naming and classifying the major mental illnesses, it was Freud who stamped his foot and cried out for semantic order amongst the minor ones. In place of hysteria, neurasthenia, and so on, Freud established the term “anxiety neurosis,” which remained the dominant diagnosis for what I found myself suffering in Chicago some eighty years later. The 1968 Diagnostic and Statistical Manual of Mental Disorders (DSM) described anxiety neurosis as “characterized by anxious over-concern extending to panic, and frequently associated with somatic symptoms.”

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BY DORIS BIRCHAM

1) March 2000

Don was a chestnut gelding with a white blaze from brow to muzzle. He was gentle and about fourteen hands tall, just right for a medium-sized woman born in the first half of the last century. I had him on trial, had ridden him daily and was ready to buy. Then, on a routine jaunt in from our pasture one March afternoon, Don exploded. I stayed with him for the first jump and the second; my rump came down hard on top of the saddle cantle on the third lunge, and lunge four I was off. Don stood as though nothing had happened while I slowly picked myself up. I’d landed on my back, with my head inches from a large jagged rock, yet my worst injury was my battered pride.

A cow and calf had streaked out of the coulee bottom to our right. This, I suspected, was the cause of Don’s sun fishing tactics. Cautiously, I climbed back into the saddle and rode home. “Just an isolated incident,” I told myself.

Two days later I was riding with my husband, Ralph, when Don spooked again. He didn’t go into orbit this time, just bolted forward like he’d been shot from a cannon. After coaxing him to a halt, I told my husband, “I just changed my mind about buying this horse.”

2) April 2000

Ralph’s birthday arrived on April 13th with ankle-deep fresh snow and the temperature around freezing. It was calving time in the Cypress Hills of southwest Saskatchewan and we were busy with chores. I was driving our 1978 Dodge 4x4 pulling a trailer loaded with eight large round hay bales. The bales each weighed approximately 1500 pounds. Ralph had loaded the bales with a front-end loader tractor and he routinely drove behind me to the cattle feeders where he unloaded the feed.

We left the stackyard and headed out on a rutted prairie trail. I had a hill to climb so made sure I was in low range 4-wheel drive, then slammed ‘old Bessie’ to the floor. Three quarters of the way up the hill the Dodge spun out. I pushed on the brake for all I was worth but we started to skid backwards. “Just hold her straight,” I told myself. All went well until the turn near the bottom of the hill. The trailer jackknifed and my truck did an instant 90 degrees. Ralph watched in horror as the trailer veered towards a thirty-foot drop. Fortunately my truck wheels caught enough of a rut to bring us to a halt.

Four of the six wheels on my trailer were hanging out into space. The remaining two clung to the edge of the steep bank and kept me from plummeting into a ravine. It was so precarious we went back home and called our son to bring a bigger tractor to pull the truck and loaded trailer away from the cliff. As the tractor inched its way forward, my husband casually mentioned he could do without that kind of birthday excitement.

3) June 2000

One summer afternoon, when there was a bluebird sky overhead, Ralph and I were riding in a neighbor’s pasture in search of our wayward Angus bull. Our neighbor’s heifers, soliciting along the fence line, had led him astray. Our son, Wayne, and daughter-in-law Erin, stayed back to repair broken fence while we searched for our bull.

Ralph said if he found the bull he would ride to the top of a ridge and wave his hat. I agreed to do the same. I was riding Scooter, my son’s sorrel horse, as we meandered across coulees, through poplars and past occasional spruce trees. We...
It seems to me that introspection gets lost in this materialistic, middle-class world. Those we call successful are usually outwardly prosperous, with no attention paid to their inner situation. Career and houses and bank accounts take the place of wisdom and serenity and character, to the detriment of an entire society. In the end, the boy with the most toys wins.

Contrast this with the world in which I belong, the world of the schizophrenic. To most, he does nothing, has nothing, and is nothing. But talk to a more articulate schizophrenic and you'll discover what most of society does not have: a talent for introspection, for thinking about the great issues, for philosophizing on the eternal.

For the great questions, "Who am I?" and "Who are we?", need more consideration. Society to the largest degree ignores these questions, but to the schizophrenic they are ruminated on almost constantly. The schizophrenic, to quote Walter Frankl, is the true existentialist, involved in soul-searching at all times.

A material world, he is holy.

Ancient cultures recognized this talent of the schizophrenic. In Aboriginal societies, he was regarded as a shaman, a mad medicine man, a leader of the tribe's religious life. Today, there is no need of an alternative view of life, and so schizophrenics are dismissed onto the street or warehoused in asylums.

Hopefully, schizophrenics will regain some position in society. An alternative view of life, more relaxed and inner-seeking, is needed in these times of headlong and hurried racing. A gentle approach to existence could save us from the usual rat-race approach to living.
On Monday I visited Dr. Lindenbaum. To my horror, he refused to renew my placycl prescription. And he ordered me to go off it! Immediately. Cold turkey. When I protested addiction he smiled tolerantly. It was scientifically proven that placycl was non-addictive. I protested more. Then his measured voice turned paternal and he dismissed me with a card containing his phone number.

By Thursday, fine purple worms were writhing in the white porcelain of my bathtub. By Friday my fingertips sent out violet rays of light. The wood in my furniture began to come alive. Glowing specks of jostling energy moved in patterns along the grain. Some of the energy particles went flying off into the air like dust. When I touched the table, sparks of energy flowed into my hand.

By Saturday I felt weak and sweaty. I moved about the house with increasing agitation. I could not sit. I could not read. My body cried out for placycl. My spirit too began to yearn for the slow fall into velvet oblivion.

That Sunday morning it was still dark when I struggled out of sleep, troubled by a vague fear. Nina, my roommate, had left three days previously to visit family. I pulled the covers over my head to hide from that invisible thing I knew was stalking me. I tried to go back to sleep, but I sensed the thing was seeping into the house and it was touching me even under my covers.

I lectured myself sharply. There was nothing to fear. My body was having endorphin problems. The drug had destroyed something that my body had not yet begun to produce again on its own. Stabilization was a matter of time. Patience.

Then the reactions escalated. The walls began pulsating with colours and heavy breathing. Out of the corner of my eye I detected a Presence. I turned my head quickly, but it evaded me, remaining just on the periphery of my vision.

The rational part of me chided the trembling sweat-drenched part. I was hallucinating. There really was nothing to fear. I should get up calmly and take a long bath. That and some food would help. So I ran a bath, poured scented oil into the water, and eased myself into the tub.

What was that?

Sounds of someone moving around. Was it upstairs? No, Nina was gone. The shufflings and murmurings were barely audible. The house was locked, and only I and Nina had keys. Stop acting like a child.

There was someone moving around. Maybe Nina had returned, but why hadn’t she called to me? Was she playing a trick? Was her nose still out of joint because I had made her do her share and take out the garbage? As I dressed, my fingers seemed to become wet noodles. I could hardly manage the buttons.

I recalled the warning of old Dr. Brown, our long-time family doctor in the town of Haley. I had briefly visited him before moving to the big city to attend the College of Law. He had advised that my planned withdrawal from placycl be gradual and under supervision in a hospital. Though Dr. Brown was a general practitioner, he was also an anaesthetist. He did know something about drugs, I reasoned. And my pharmacist had suggested getting a second opinion. He had mentioned the support of Phenobarbital. Yet Dr. Lindenbaum was the specialist. And he had prescribed going off placycl cold turkey. These thoughts churned about in my mind, and I became more and more distraught.

Finally, I phoned Dr. Lindenbaum and described my symptoms and fears. I told him why I thought I needed to be in a hospital. He in turn asked why I would be concerned with the opinions of persons who were not specialists. He told me to stop playing the hysterical female. He assured me that my symptoms would soon pass if I had patience. He told me to eat a good breakfast and then go for a walk.

So I dutifully made some toast and coffee and took it to the dining room.

Then I heard it again. Louder. There was someone in the house. I distinctly heard voices upstairs. Perhaps Nina had brought a friend. Surely those were two voices gigging. My temper flared. I raced upstairs to give a piece of my mind to those nerds who would not answer, except to snicker.

I looked about. No one in the hallway. The bathroom. . . empty. I caught a glimpse of a tall figure with a large hat lurking behind Nina’s partially open bedroom door. I looked more closely. Yes. The shadowed figure was outlined in the crack and over the top of the door. My vague fears became unbounded terror. Had someone hurt Nina? Was it my turn next? I stumbled and fell and scrambled down the stairs and raced into the kitchen. I grabbed a butcher knife to defend myself and Nina.

Hush, listen, hold your breath. They are whispering. They are hissing.

A Presence was cackling my name and a lower-toned voice echoed it. From the foot of the stairs, I called a warning:
“You won’t get away with it. Get out of my house.” More mocking laughter . . . more whispering. I raced up the stairs. The menacing figure was still behind Nina’s door. I ran the knife swiftly through the crack and caught soft material. The figure seemed to crumble. I pushed open the door. Horrified, I saw lying on the floor a new outfit Nina had sewn and hung on a hanger behind her door. The dress was slashed. Her large sun-hat was still on the hook. The knife slid from my hand and fell to the floor with a thud. I heard a crescendo of voices . . . many pitches . . . many timbres. They whispered . . . and sighed . . . and moaned . . . and laughed. Now they seemed to be in the living room downstairs.

I used the upstairs extension phone to dial my doctor again. He was not in. I begged his answering service to reach him. The matter was urgent I said. The voices seemed gentler now. I began to recognize some of the speakers. My family! Perhaps they had come to visit. They would stay with me and help.

The auditory hallucinations became overpowering. And so did my desperation. I phoned the Community Clinic for help and was told no doctor worked on Sunday. I rang the Mental Health Clinic. No answer. So I attended the nearest Church and was told no doctor worked on Sunday. I rang the Mental Health Clinic. No answer. So I attended the nearest Church service and felt momentarily safer with a group of people in a large space.

When I entered my house afterwards, the Presences were so dense, I could scarcely breathe. I phoned my aunt and asked her if I might come for supper. Luckily, cousin Krista was home and would come for me immediately. I sat on my doorstep waiting. Waiting. Waiting for what seemed interminable hours.

I could wait no longer. I would get myself there in my own vehicle. As I shifted my car into gear, I heard a voice gasp and groan: "Do you want to kill us?" I stopped the car.

"Where are you?"

"You know where we are."

"Don’t play games," I said and began to drive again. An anguished moan came from the motor. I slowed to a crawl. More groans and then consultation among a number of occupants . . . under the hood, in the trunk, under my seat. I stopped the car. “Get out now.” I waited. No action. "OK. If that’s how you want to play it." I drove on, ignoring desperate pleas and fervent promises. One part of me said I didn’t want to hurt anyone. Another part asked everyone to get the hell out. “I can’t,” a voice whispered. “I’m stuck.” Another begged, “It was just a joke. You don’t have to kill someone for a joke.” A police car was coming. I stopped and stood in the middle of the road to wave it down.

After a quick interrogation and a trip to what I believed was the police station, the head nurse in the “station” brusquely put me in a room to “sit it out.” I was kept waiting there for hours. Periodically I would come out and ask, “Where am I and am I charged with an indictable offense? I want to phone a lawyer.” And then the desk nurse would point her finger and bark, “Git in there and sit.”

The room was small and oppressive. A man’s voice began speaking out of the empty bed in the room. He warned me to move out of the way of the Spray. I soon knew what he meant. A fine jet of liquid struck my forehead and trickled down my face. It was urine. But no matter where I moved in that room, the Spray found me. I kept dodging around in vain. The man then said, “You must lie on this bed. And you will be safe.” I answered, “I cannot lie on you.” Then the Spray hit me again.

I heard a familiar voice outside in the hall. It was Dr. Saye, the general practitioner who had first prescribed placeydl when I told him about my bouts of depression. He had increased the dosage again and again until I fugued. At which point he had referred me to Dr. Lindenbaum. What was Dr. Saye doing in a police station, and why was he saying he did not want to see me himself?

It was 10 o’clock PM when Krista discovered me hopping about in the small room. I learned she had arrived at my house only to discover me gone. After hours of searching, she had finally called the police. They told her where I had been deposited.

The two of us walked out past the desk where two nurses chatted. One of them looked up momentarily. Then the phone rang. Krista and I slipped away into the semi-dark parking lot unchallenged. And there . . .

I wondered whether Krista saw and heard it all, too.

Across the dark sky, and brighter than any star, swept the glowing green tail of a comet. And with that cue, a chorus of voices rose out of the houses of the city as they lay there, black hunched shapes with many eyes. Operatic voices chanted in four part harmony, “Doris, Doris, come and join our chorus.”

Had I done a wrong of such magnitude that it required a universe to issue a reprimand? I regretted that Krista must be embarrassed on my account. When the car doors closed, a blessed silence ensued, though the tail of the comet continued to glow pale green along the horizon. Krista radiated a comforting warm golden aura.

At my aunt’s house some visitors were being served drinks. She wrongly assumed I had eaten at the hospital and offered me wine. I requested milk instead. My mouth was parched, but when I tried to lift the glass, my fingers trembled so much I spilled milk on the sofa. I used both hands to bring the glass to my lips.

Then I became aware of them again. The Presences. They were hovering in the shadows. I hated to impose on the goodness of my aunt by remaining amongst her guests while spilling milk. But I knew I must be surrounded by persons of goodness if I wished to escape the menace of the Presences. I could not bring myself to ask someone to lift the glass for me, so I said I was not thirsty after all.

Outside the house an Alleluia Choir had formed on the lawn. The chanting came through the screen of the TV monitor. And figures on the screen were urinating at me. I apologized to my aunt because her walls and drapes were being ruined. Then my whole body was seized by uncontrollable convulsions.

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Now I find myself in Krista’s bed. She holds some of the fear in check when she gives me her hands to cling to. But the choristers have invaded my uncle’s house. He is ordering them out. My father has arrived. I hear him insist that the group cease chanting. I am both grateful and embarrassed. I fervently hope my father will come in to see me.

My aunt says they cannot wait until morning to return me. I wonder why I must be returned to prison before the night is up. Krista says, “Don’t worry about prison. We are going to take you to the hospital and Mark won’t let anyone hurt you.” Mark is my cousin who is a hefty ex-cop newly turned seminarian.

The car stops at a many tiered building. I ask what it is. Mark speaks gently as he opens the door, “This is University Hospital.” I find myself unable to move. Mark carries me easily. Krista gives me her hand. I say to Mark, “Please stay while I sign myself in. I want witnesses.” The presence of Mark is powerful. The other Presences dare not lurk near enough to spray me. But now there are crowds gathering on the grounds outside the hospital. Who gave the word? I hear my aunt berating my father. I hear her say; “Whatever you have done, you can redeem yourself by saving her. Whatever she has done, she is your daughter.” I wonder where my mother is. No one has mentioned her tonight.

Then a nurse undresses me and tells me to get into bed. But I hear heavy breathing coming from under the mattress. I say, “There’s a man under the mattress.”

The nurse pulls back the covers.

“See, no one there.”

“Not under the covers, under the mattress,” I say. Can’t she hear the loud breathing?

“Move gently,” says the man. “You cannot hurt me.”

The nurse injects me and tells me to go to sleep and everything will be fine. She sits there reading an Agatha Christie novel. Blood forms on the lip of a page and stretches away slowly like thick gelatine.

The voices have discovered which window is mine. A large group of lawyers is declaiming outside. They are advising me to take action before the statute of limitations takes effect. My door is a black iron grate behind which a red fire glows without movement like steel in a smelting furnace. A face peers through the bars at me and I hear the dread voice of the head nurse. “Be sure to sedate her properly! I don’t want a ruckus at this hour.”

I recognize my enemy. When she draws near, my terror mounts. But I am determined to survive this night and to escape her power. She wants to take my jewel from me. She will be cunning, but I shall beat her at her own game.

In one corner of the room is a strange machine. From it four rivulets begin to move across the wall in peristaltic waves. The four run parallel to my bed. The man’s voice says, “Take my seed.” I refuse. The man breathes stentoriously and makes obscene comments. Outside my window the sky is lit up with twenty nights of northern lights. Somehow the city has become a hill.

The bishop of the diocese moves forward and shakes his crosier. “I’ve tried to direct you, but you won’t listen. Now I leave you to your own devices.” He moves away slowly. The bar society is dwindling, too. So are my friends. But one person remains there: Marj. All 200 pounds of her. She is a former student and a lawyer. She is clad in judge’s robes.

I realize I am standing up and two nurses are struggling with me. One of them shouts, “John, John, come here – quick.” The fires behind the grate are still glowing. The four patterns of liquids are still moving. A voice commands me to take some and then cry out. I refuse. The room grows sooty and hotter. I can hardly breathe at all. Marj stands there at the top of the hill beckoning.

“John, for God’s sake, come quickly.”

“But didn’t you sedate her?” John asks.

“We did. But she was too agitated. It wore off.”

He stretches out his hands to me. There are black whorls of hair on each knuckle. I shiver. The head nurse will use those whorls against me. I take the hands and twirl a finger around each whorl. The hair is silky. The fire behind the door is dying down. John puts me back into bed. The four rivulets are coming forward again.

The voice under the mattress pleads, “Take just a little and it will all be over.”
I use my index finger to take a droplet of the clear liquid off the wall and to smear the liquid on myself. Then I feel great shame. Marj cries out, “You have given up. You must save yourself. No one else can save you.”

I am standing at a window that opens outward. I see that I am slight enough to pass through the opening of that window. I can slide down the wall. I can slide into the northern lights. It will be so easy. I feel myself reach up for the sill and then my legs are moving through John’s hands like melting butter. He is shouting, “Damn it, someone come help. I can’t hang on to her by myself.” Hands put me back into bed. I hear my father’s voice calling for me.

I answer, “Here I am, Daddy.”

The nurse says, “Hey you, don’t shout. You’re waking everyone.”

The words Cry Out write themselves in flames on the door. I obey with what strength is left in me.

A nurse shakes me vigorously. “Why do you have to make all that noise?”

“They told me to.” She doesn’t seem to realize how tired I am. How I can no longer refuse them.

My father calls, “Where are you daughter?”

“Here I am, Daddy.”

John is holding me beside him on a couch in another room large enough to breathe in. It is a lounge of sorts. He lets me cling to his hands. The fire is gone. The head nurse looks in on me with venomous eyes. I fear her greatly still.

Then somehow it is morning and the room is washed in light. Someone says, “Well, I think we can get some blood from her now.” A nurse takes several vials of blood from my arm. I fear the head nurse will use it for her nefarious purposes, but I am too weary to refuse.

Later that day I was awakened from a deep sleep. I looked up and there was Dr. Lindenbaum leaning over and peering down at me. He silently fingered his chin. Our eyes met. He hurried out without saying so much as a hi. I asked for him repeatedly after that. But he never revisited me the whole time I was hospitalized.

The next day a sweet-faced nurse gave me a tub-bath. Her touch and voice and presence validated and healed me more than any medications could.

By the third day, when I still hadn’t seen Dr. Lindenbaum, I asked to speak to the head nurse. I had the vague notion she would be a colossus. To my surprise she turned out to be a short rather dumpy woman with a tentative smile. There was nothing intimidating about her. “I’m through with Dr. Lindenbaum,” I said. “He didn’t help me when I needed him and he doesn’t come to check on me now. I want to go home to get a different doctor.” The head nurse stared at me. Then she pursed her mouth, lifted her chin, and stomped out. Without a word. The eyes looked familiar, I thought.

That afternoon my mother took the bus from Haley and came to visit me in a hospital room I shared with no one. I had been advised to avoid communication with other patients in the lounge. To stay put in my room for their sake and mine. My mother hugged me.

“IT’ll all be fine in the end, you’ll see. It’s for the best.”

“What do you mean?” I asked my gentle little mother.

“I’m fine now. I am well enough to leave here today. Please take me with you to the farm.”

She shifted her eyes and bit her lips. When I pressed for an answer, she hurried out of my room in tears. She did not return, but later a nurse showed me a document that my mother had signed. It committed me to the psychiatric ward on the third floor.

On the fourth day of my hospitalization, the sun shone brightly enough outside. But inside, my room felt gloomy as my bed was stripped. I knew I would be eating my evening meal in the psychiatric ward.

I was toying with my noon lunch when my father arrived. He hugged me and looked me over carefully.

“Hey, you look on the road to recovery as far as I can see. I was upset with your mother. But she darn near had her arm twisted off to sign that paper. Beats everything they needed it so fast.”

I told my father how I had signed myself into the hospital so that I would be free to leave when I wanted to. Krista and Mark had been witnesses, I said. Then I told my father the whole story of misplaced trust. And he believed me. And took action.

Later that afternoon he reappeared with Cousin Mark, ex-cop turned seminarian, who helped me walk out of the hospital. Dr. Lindenbaum could not be reached.

I walked out free but not unscathed. I had tremors and cognitive difficulties to overcome. However, I also had gained gifts of insight and determination that changed my career and the course of my life.

Ahead of me still lay the long haul of reclaiming my physical health, my emotional stability, and my mental and creative talents.

To a large extent I have succeeded.
I'm almost over my three-week cold in time to attend and participate in a reading, the launch of *Body Breakdowns*, edited by Janis Harper and published by Anvil Press.

Days before the launch, I receive my complimentary copies in the mail. The cover shows the title in white, opaque against a rectangle of translucent red, the colour of passion, the colour of blood. Beneath the red is an upside-down bag of an unidentified solution.

The space past "Expiry Date" is conveniently, eerily blank. The bag seems suspended, not attached to anything, or anyone. A surgical instrument tray lies at the bottom of the page. The lighting is reminiscent of the fade to white on my favourite television show, *Six Feet Under*. I am mistress of the macabre, so it appeals.

The book's subtitle is Tales of Illness and Recovery. I am one of the recovered, even though today my minor complaint of post-nasal drip could, I think, save a mid-sized village from the ravages of drought. Three years ago, I suffered a mysterious, undiagnosed illness. It was thought to be Cat Scratch Fever, usually caught by children, specifically little boys. Fever and inertia. The inability to walk two blocks to post a letter to a very much desired other country, Wellness, its twin counties Mental Health and Physical Health. The border between them is the most permeable of lines, the residents of both emigrating. My body is my house, mad woman in my own attic. She rakes her long crimson fingernails along the inside of my skull, forcing me to staying prone to quiet the unnerving noises.

Used to college teaching and the requisite clownishness, I decide to use props. But what? And how silly can I be when others have perhaps survived terrifying illnesses? I know that the editor suffered removal of her entire colon. Will the other readers be pale spectres, wraiths? Led in and out on hospital gurneys?

It is a good crowd at the Cottage Bistro in downtown Vancouver. The manic owner runs around with order pad and pen, and manages to get everything right.

We shove tables together, so that everyone can get a good seat, can meet and chat.

The publisher comes up first, reading jacket blurbs from former poet laureate George Bowering and Dr. Helen K. Mussallem, “Canada's most decorated nurse.” Janis reads next, a poignant excerpt from her essay "Finding an Ending."

Jane Silcott recalls knee surgery and her later epiphany: while making a meal, she severed pork from the bone and recognized the same joint. Yes, even as different species, we are sisters under the skin. Her comments on conversion to vegetarianism make me guffaw as I nibble on my cheese and vegetable quesadilla, thankfully devoid of kindred joints.

My turn is next. I've brought my two boxing puppets, a rakish boxer (the original) and Margaret Thatcher. She is the patient, draped in a blanket that looks rather like a generic superhero's cape. The boxer, complete with beret and patched eye, is the Disability Insurance Adjuster, to whom I have written a sequence of letters, thanking him for his requests, ever more absurd. Even Margaret Thatcher gets sick. Schisms in the brain. Muscle tears. A strange circuitry of emigrating blood cells and hobo neurones. One small lapse and then the fall. The boxer mows her down. Sickness is an equal opportunity employer, seducer, and none escapes, or not for long.

In "Diagnosis: Square One," Alan Girling tells of a quasi-escape from a cancer diagnosis, the hard thoughts during the time he thought he had it. He pokes fun at his hypochondriacal tendencies, his on-line searches for diseases he does not have. I can relate. When I was sick, desperate for diagnosis, I wrote at the end of a poem: "Password for The BC Health Guide On-Line is a local postal code. Maybe I'll have to forget mine — (oh, shit! memory loss? early onset Dementia/Alzheimer's?) — in order to get well."

Melody Hessing tells of a ski accident, the sad slow shuffle from one hospital to another, the belated diagnosis of a hip fracture. Our bodies are fragile, and we are vulnerable as children in the face of the medical profession.

Telling the stories is cathartic, fun, rousing. Dare I say, . . . healing.

Ruth Murdoch needs help getting to the stage. When she clutches her sheaf of papers, not the anthology, I see she has only one hand. Her story, read like golden honey, is of health plights from infancy when the doctors warned her mother that she was not perfect.

What means perfection? I look at the shining faces around me. I feel lucky, lucky.

Both Ruth and the next reader, Emma Kivisild, are younger than I. Sobering. Emma, her cane resting against the stool on which she sits, gives a gutsy account of living with MS. I want to cheer, but it seems inappropriate amidst the applause.

The reading's over. I pack up my puppets. The boxer's left forearm bends unnaturally from the elbow. This is from over-use (read: repetitive stress injury) or confinement in my bag. He thwacks himself a hard blow. Margaret Thatcher beats him in a thrice. So it goes in an amateur puppet show. In the real world, one needs more.

I look around at all my friends and fellow readers, at the series of bistro tables snaking together like a demented centipede. Courage, luck, faith, trust, and support lead to the country of health, making sickness itself only a memoir. A good right hook doesn't hurt either. And right now, the band is about to begin.
Do you think there should be a limit on how many therapists one person should see in a lifetime? I’ve been to a lot. I’ve told my story dozens of times, in compacted fifty-minute sessions elaborated with tears, excuses, fears, and, occasionally punctuated by a hundred dollar an hour gem of wisdom. I’ve paid with my own money, when I didn’t have it, spent your tax dollars, and owe my life for it. I’ve driven thousands of kilometers and sat for hundreds of hours in vinyl armchairs, leather couches and once, a taupe settee. Even with low self-esteem, I thought my story was interesting (it fascinated me); the therapists had their own responses. A couple were rather spectacularly bored, one was exhausted, perhaps more concerned with her own health problems (turns out justifiably so), others were keen with the ambitions of recent graduation. A few were professionally interested but over-confident in their own opinions, waiting mostly for the opportunity to use their training and consequent advice to full advantage. Some were insightful, and had good decorating sense. One was hooked on meditation, and thought I should be too.

I have been helped along the way, of that there is no doubt – each therapist showed me a piece of myself in a clearer light – held up the self-portrait I painted for them and made me look at the image, no matter how garish, grandiose or grotesque the picture was at the time. I thank them all, and am grateful for the access I had to their help.

But a therapist-patient relationship is a one-way conversation. You spill your guts and they listen. Period. They don’t tell you that they too, wonder how men and women are supposed to live under one roof, or that they swear in front of their kids, or that they get unreasonably anxious over small things, or have father issues. After years of therapy, I have finally given it all up. Partly because I’ve done a lot of work, and have made some ground, mostly because I’ve met the best therapist. And now, really, there’s no going back.

Turns out, the best therapist is a woman. Is many women. The female friends in my life who walk with me, literally, have enabled me to say good-bye to the professionals. No sitting on couches for these girls. They’ve shown me how to walk, amble, stride, hike, and climb around the mountain town that I settled into some twenty-five years ago. (A move that triggered a major depressive episode, but that’s another story.) And more than that, they turned it into therapy.

These are women who knocked on my door and let themselves in when I was too tired to answer. Who bundled me up and got me out when walking was the last thing I wanted to do. Who logged miles and miles and miles with me, sighed with me, listened to my lament, and showed me they understood by revealing their own nakedness, by telling me about their mothers, their nightmares, their unborn children.

They climbed in front of me and took me higher than I would have thought myself capable, often because I was enthralled by something they were saying, and didn’t want to miss anything. Sometimes we sat, high on a ridge overlooking a trail we had just sweated up, and said thank you to the world that we were still alive, remembering the ones who weren’t. Yes, we cried together. Sometimes we wrote in our journals beside the river, and then took turns reading our words back to one another, just to prove how precious and not precious our own thoughts were. Unraveling the golden threads of our stories in each other’s presence.

Therapists have rules – I’ve learned them all. There are time rules and fee rules and twenty-four hour cancellation policies and hospital privileges and confidentiality boundaries. My women friends have taught me to throw out the rules – and invent new ones. Women who walk together talk back and forth, interrupt each other, don’t have to make eye contact to hold up mirrors for one and other. With women, I think we learn there is no Other. There just is. We just are. We learn that our struggles ebb and flow, within the noise and the silence, the listening and the speaking that a walk allows. The listening becomes part of the therapy, as we learn to put ourselves away for a while in order to hear another’s pain. Warmed by the colours of inclusion, by the realization that we are connected, in hurt and in health, in sickness and in hope, we paint a new self-portrait; a self that stands in solidarity, in strength and in communion with our friends.

I tip my hat to the profession, with thanks for everything. I hope I don’t have to go back, but I would in a heartbeat if I thought I needed to. I think everyone deserves time with a therapist, and I’ll work to erase the stigma associated with those visits any way I can. There is no substitute for a good therapist when you need one. But today, I think I’ll save myself a dime, and call a friend. I’m in the mood to walk.
I miss you (in Russian)

BY CAROL REMPLÉ

I miss you, Daddy.

Doug always knows before I do. He gave me that look – that knowing look, with a hint of apprehension; uncertain whether he should voice it; uncertain whether he wanted to have it confirmed. I dismissed it; not just because I hate that he knows something is stirring in me before I do, but because I did not know what it was, or if I wanted to let it surface. After a few hours, I felt it. Sadness; grief; longing to go to Ontario. And then emptiness, loss, helplessness, tears. I didn’t know what it was at first – until I realized it was October.

Mum said I cried for three weeks straight after you died. I don’t remember; I was so young. I grew up with no memory of you until – at age nine – I bought a Rum & Butter chocolate bar. As it broke open in my mouth, it broke open my memory of you. I didn’t understand how, but I could see your face as I savoured the taste of rum candy on my tongue. As memory poured in and warmed my heart, a new sorrow began to pour out. I’ve searched for words to describe it. The look of pain in my mother’s eyes when she found me weeping told me I didn’t need words for her to understand what I feel. But still I search, because I am not sure I do. “I miss you” is all I can muster, but seems inadequate.

On my first trip back to Ontario with Mum, when we went to your grave, Robert came with us and witnessed our sorrow. He opened his home and his heart to us. We sat on his stairs and felt each other’s pain when there were no adequate words. And after we left, we told him we missed him. That felt inadequate, too – until he explained that in Russian “I miss you” is translated “I grieve without you.” I do.

October is the hardest; everything dies this month in memory of your death. But spring will come, and when it does I will return to Ontario and to Peacefull Lane to spend some time near you and the ones you loved. And perhaps I will eat a rum candy to conjure up my own memory of you . . . because I miss you, Daddy – in Russian.
I hear a woman’s cry
she is lonely.
I listen to her
singing
she is scared.

Her face is wrinkled
with deep creases of fear
her eyes
wandering without any rest.

Her fat body is moving
without any joy
between naked walls and empty pots.
I hear her speak syllables
without any words.

She is terrified of footsteps
the heavy, dim sound of boots
but
she still wears heavy boots
on her own feet
as if it was her victory.

She sings a tune without any melody,
in a high and hoarse voice
to calm her wounded heart
to forget her loneliness.

Her hands
that I see hanging by her side
just slam the front door in my face
without any sound of hope.

I hear a woman’s cry
between thick walls of a white house
I listen to her singing
now
behind a locked door.

Background
A lonely woman, almost unknown, unseen, was my neighbour in a high rise building, in Be’er Sheva Israel. I say unknown and unseen because most of her time was spent inside her apartment. She didn’t speak with anyone, was not involved with any of the neighbours. She didn’t have any family. No one visited her, like a shadow lady, as if she didn’t exist.

This woman, whose name I do not know, was a survivor of the Holocaust. When I approached her, as a neighbour, to talk to her, and to see how she was doing, she remained aloof, quiet, and not interested in contact with people, or actually not interested in anything.

Sometimes you could hear noises from her apartment, and whenever I saw her, she was always dishevelled, sad, and full of despair.

I, as a second generation of survivors, was born and raised in Israel, in a healthy atmosphere with a happy and varied life. Even from a young age, I heard, knew, and learned about the atrocities of war, about the torture, the forced labour, the humiliations, the sickness and the oppression. Most of the survivors that I knew, and met, built themselves new lives, and most of them appeared healthy, with hope and dreams for the future.

When I met this woman, I understood that not everyone, even though they survived, was able to overcome the memories of that horrible time. They may have survived the atrocities, physically but mentally, they became handicapped for the rest of their lives.
Simple mental health reminder

BY WADE BELL

It’s all in your head
she told him

I am all in my head
he said

to no one
because no one

was left
to hear

Moments later
he thought to say

where else could I be
or you, or anyone

but she’d ridden away
on her cloud of cliche

Edge of winter

BY VIRGINIA BOUDREAU

it is dawn
the huge cloud suspended
in pearl sky
is a stain of black ducks
it lingers then drops
with uniform precision
to drape the skim of lake ice
it is a strange and beautiful symmetry

a shadowed pallet of smoke on glass

the ward behind me is dim
almost silent, shuffling soft
shoes and hushed whispers
i am grateful for this
window, frost edged and obscured
i need a place to view

the magic of ordinary miracles
Flowers and dreams

BY AMBER-DAWN COLWELL

The flowers and dreams are so simple yet so unique. Inspirations come to mind sometimes never come true. Hopeless it seems.

There are flowers of sadness and dreams of love and courage for you and me. As I watched my baby walk away. I prayed he would come back my way, to have the beauty of flowers of feeling and dreams of the mind come true, and be here to stay, me and you.

Oh baby, my sweet, tickling your toes, picking you up off your feet! I'll be back, not to trip or make you fall, but to hug and kiss and caress you, to talk, make you laugh. Listen, in your heart I'm not missin'.

The flowers and dreams are so simple yet so unique. Inspirations come to mind wild and untamed but kind. I'll be there.

Rain song

BY GREG BUTTON

the world goes round
rain begins its revelation

i see sunlight
moonlight

stars shining
on shattered glass

i see towers and flowers
rubble where once the roses grew

we are all
wounded

once mud
now music

song of songs
of broken bells
Ode to Bishop
(He still hasn’t found the receiver he was looking for)

BY DARREL DOWNTON

Interception, sack, fumble,
he still hasn't found the receiver he was looking for.

He's been standing there, hanging onto the ball, and gets sacked,
he still hasn't found the receiver he was looking for.
It's coming, wake up, and Bishop down,
he still hasn't found the receiver he was looking for.

Interception, sack, fumble,
he still hasn't found the receiver he was looking for.

The receiver is wide open,
he still hasn't found the receiver he was looking for.
He throws the ball without looking to a B.C. Lions offensive back,
he still hasn't found the receiver he was looking for.
He finishes it off with a vintage interception for a touchdown,
he still hasn't found the receiver he was looking for.

Interception, sack, fumble,
he still hasn't found the receiver he was looking for.

In the stands you can hear a chant, a rant for Durant,
he will find the receiver he was looking for.
So into the game goes Durant to a chorus of cheers,
and he finds the receiver he was looking for.

But it's too late because the Lions are too far ahead,
so I still haven't found the poem I was looking for.
A week later the Lions bite the dust,
and that was the poem I was looking for.

So Bishop is now out of work,
because he couldn't find the receiver he was looking for.
The party

BY MATTHEW DRUMMOND

There’s a party in my mind, everyone’s invited.
Plenty to eat, to drink.
No need to think.
Friends both imaginary and real.
Hugs for those for whom I feel.

Loud music, a variety of such.
Fun for all ages, oh so much.
Conversations galore.
So many I adore.

Some I long for,
People missed evermore.

Girls from my past, women from my future.
All gathered around the beautiful furniture.

So to you I call
“Come in, we’ll have a ball!”

After all, fun is in the mind of the beholder.

Homeing

BY LISA FREDMAN

Che chhe a branch snaps underfoot.
Brittle, crack, another, and you
step forward the wind sifts between
trees and you push hair, tangled, out of your
eyes, widened, the rocks grow closely
twigged, foot slips, crack, snap one more
chk a branch, the wind is rushing.

The trail, mixed shadow and blurred green,
leaves, rocks, feet scampering slid
where to set down
flat patch of grass whoosh
and your feet hit,
rest for a moment pause shh.

Breath, the stop dead of rolling earth
bent and nearing. Why, you ask the ground
still sliding under your feet
but for a moment you feel calm
the trees, bend farther apart shh
and sun shines golden rays
stream down
on your face, golden,
and the trail winds
into the mass of trees
and leaves hush hush

And green your thoughts fly
with the song that the wind makes
whistling in your ears
reaching deep down into that place
hollow in between your ribcage,
that place where your lover wasn’t
and never could be.

And your feet fly forward,
the sun rays streaming down
onto the leaves
and the trail and the trees
and all around is the peace, hush
and the silence hush
and the wind and the fear
the heartbeat races towards safety
collides with reason and there is
no bear, there is no bear, there is
Maybe with some distance

I know
I’ll never see you again.
That’s good.
Maybe with some distance
I can forgive.

You’ll never know
The pain I’ve felt.
That’s good.
Maybe with some distance
I can heal.

I think of
The laughter we’ve known
And the tears we’ve shared.
That’s good.
Maybe with some distance
I can forget.

BY ANGELA GALIPEAU

PHOTO BY JAMES SKELTON
DON'T TOUCH

BY KATE HARGREAVES

you don't don't touch it yes yes I am I am talking to you yes you don't don't touch that didn’t your mother ever tell you ask you ask yourself where has it been where have you been touching that piece of dirty don't you know what could be in there right deep down crawling around through cracks and crevices saw someone buy a fridge once I was there an old one cracks and crevices falling open and full yes brimming full of roaches I’m telling you bugs roach roaming all over there was roaming all through your house roaming all over you could catch them catch something you don’t want to get caught up with that no catching you don't touch that and touch your eyes and definite-ly don't you dare touch there what if you move into your your home roaming roaches rabies rickets Deep Vein Thrombosis Human Papilloma Virus Extrasensory Perception Toxic Shock Syndrome The Sports Network Pelvic Inflammatory Disease DVT HPV ESP TSS TSN PID oh OCD hands to mouth and mouth to fingers and eyes and hand and don't you dare touch it I don’t you don’t I don’t I don’t you dare
Framed memory

BY JAN WOOD

My brother was a pale water colour on rich rag paper
colours carefully muted
with no distinction of line.
His mistakes purposefully diluted
in a pastel haze
he became a bare landscape
more canvas than paint.
One day in a bold primary stroke
he covered it all in crimson.

The neighbours whispered, unforgivable.
The priest kept his portrait from view.
My mother believed
he painted over a Rembrandt
that his hidden masterpiece
once uncovered
went to the highest bidder
Who hung him above the fireplace
in a mansion with many rooms.

Thunder strikes twice

BY JAN WOOD
(for Ilia J and her little sister)

Trapped inside a storm cloud
Lightning played hopscotch
jumped rope to the rhythm
of old Thunder’s heartbeat
her little sister
slurped flavoured hailstones
innocently spilled cherry-red
on snow white sheets

The mood altered
Lightning was snatched
from her childhood games
forced to tango cheek-to-cheek
clutched in Thunder’s embrace
she was danced across the sky
where in one searing hot stroke
he split her

Raindrops followed the sound
swelled and multiplied
darkened in their fury
est black warnings
a torrent of tears
pooled at her grounding
liquefied the earth there
to hide the shame

Cocooned in ice clouds
her sister counted seconds
measured distance
between anger and receding rumbles
furiously scrubbed her stains
the eerie calm
precedent
to another onslaught

ART BY JAMES SKELTON
knock at my door. I lie on my bed, motionless, then hear a second knock. I pull myself up, drag my feet across the hardwood floor. Fumble with the lock. Almost give up. Finally the door opens.

“I’m so glad to see you. I was worried.” It is June. She walks in and examines each room. She spots a long handwritten letter sitting on my bedside table next to a razor blade. A bottle of vodka. Three full bottles of unopened pills.

“I want to die,” I whisper. June looks at me. I touch the bones of my face. Drawn, hollow. Last night I opened up a bottle of sleeping pills. I was going to die. Going to die. Going to drift off to my father, who had died two months before. The pills seemed bigger than normal, like bullets, as I put them in my mouth, swallowed – one, two, three, four, five, six. Then stopped at six. If I drifted off, so much the better. But I didn’t.

Dirty dishes are scattered on the kitchen counter and in the sink. Cereal, dry, stuck in the bowls. June opens the curtains to let the outside light in. “That’s better,” she says. I sit on my wooden rocking chair, the cat on my lap. I am speechless. My head one big fog. “Close the curtains,” I say. “It’s too bright.”

“We’re going to the hospital,” she says and goes to my closet, grabs my brown leather jacket and hands it to me. “It’s cool out.”

I follow her to her used BMW, my feet heavy on the ground. “Did you get my messages?” she says. My face remains like stone. She gives me a long look and adds, “You’ve lost weight, you look so pale.”

I don’t respond. Can’t.

As she speeds along the road, she glances at my legs loosely clad in black jeans, my right leg swinging from one side to the other. “Your legs are skinny, not thin. You haven’t eaten in a while,” she says.

“I haven’t put food into my stomach for over four days. I’m tired, so tired.” My eyes grow soft and teary. I stare into space. Silence, except the sound of traffic. No more words. Lips sealed. Muffled roar on the highway as she speeds past trucks, motorcycles. For a moment, I think of opening the car door and jumping out.

We walk through the door of the Emergency Department, register, and then wait six hours to see a doctor. June reads outdated magazines. I don’t. Can’t. I want to hide somewhere, close my eyes, sleep forever. My thin body remains motionless, my head rests on June’s shoulder, heavy as a boulder. For long moments, I am oblivious to the world around me. My name is called through a microphone.

“Let’s go,” June says. A nurse ushers us into a small office.

“What brings you here?” asks the nurse. Deep lines show on her forehead. Her hands grip a pen, waiting to write something down.

“She wrote a suicide note,” June says.

“Do you have it?”

“Sorry. I . . . I forgot it.”

The nurse lifts her glasses, rubs her eyes then looks at me and says, “What day and date is it today?”

“What is today’s date?”

“Tuesday, September twenty third,” I say and add, “I know this because I saw today’s paper in the waiting room.” I try so hard to be alert. A doctor opens the door and June and I follow her into a small office with a desk and two chairs. The walls are bare. I sit down. June stays on her feet and speaks first. “I believe that Marilyn’s a danger to herself.”

The doctor looks me in the eyes and says calmly, “We would like to keep you here.”

I want to protest, shout. Instead the sound of my cry grows louder and louder. It comes from deep within my chest. June wraps her arms around me.

“I’ll bring you music and clothes tomorrow.” She pauses and adds, “I’m doing this for you.” She hugs me once more then walks away, the door flapping closed with a thud. My mind feels helpless. My body flutters. I think: feathers in the wind.

On my first night, I sleep in the Psychiatric Emergency Ward. The nurses are snappy and short with the patients. “Get out of my way!” I hear one shout.

“You will move to the seventh floor as soon as a room becomes available,” a nurse says to me. An orderly gives me a blue hospital gown and says, “Remove your clothes.” I think: concentration camp. There are six beds all in a row; mine is number five. Much Music blasts on the TV in the smokers’ room. Nowhere to hide. No quiet, peaceful spot. No place to retreat. I sit in a chair. Smoke cigarettes: one after another. I get up and pace the floor, shaking, nervous, always nervous. I feel my brain. I always feel my brain these days. Swollen, hurting. I flick a match. They let me have this for some reason, this book of matches, though I could burn my wrists, set fire to my eyelashes. Cigarettes are my only pleasure.

The nurse holds water in a cup and hands me two white pills. “What is it?” I ask.

“Anti-psychotic medication. It will calm you down. Take it.” She watches me put them into my mouth, then leaves me the paper cup and walks away.

I have fears. Fears that people are spying on me. The room is tapped. Cameras hidden. They can hear my thoughts. Always someone out to hurt me. My body feels like it could be tipped
over by a touch, blown away in the wind. I want to get out, put my clothes back on, run out the door, be healthy and free. I run down the hallway to the main Emergency Exit door. It is locked. My heart beats fast. I gasp for air.

I walk back into the smokers’ room with a two-year-old issue of Time magazine I found on the table. I see words on the printed page but can’t make sense of them. An elderly woman sits down next to me. After a moment, she says,

“You remind me of a thin bird. A hummingbird.” She wears yellow plastic sunglasses. She lowers the glasses, stares at me over the rims, then picks up a sheet of white paper from the side table. She slowly folds it in two and I watch as she draws three flowers with a dull pencil... simple, round, clover-like flowers, like a child would draw.

“What is your name?”

“Marilyn,” I whisper.

Inside her handmade card she writes, “To Marilyn: This is a good luck card. Signed, Marie.” She removes her glasses and says, “I got these at the dollar store. Would you like a pair? It makes it a lot easier with these lights. I used to sleep on the street. I’m an alkie, here to dry out.” She rolls her own cigarettes, taking big puffs and flicking her ashes onto the floor. She smiles. Yellow teeth. Gums, inflamed. A front tooth missing.

“I’m seventy and look how solid and smooth my legs are.” She lifts her skirt to show off her thighs and circles around the room to the rhythm of the music on the TV.

A young woman walks in and sits down. She is no more than nineteen, with a black eye, cuts on her cheeks, blood on her lips. But she is still pretty. I assume that she tried to kill herself. Maybe she jumped in front of a car or from a balcony. I don’t ask her any questions.

Patients are admitted at all hours to the Psychiatric Emergency Ward. At three a.m., I lie drenched in sweat. I am woken out of a drowsy fog. “You fucking asshole!” Two men wrestling on the floor. An older man and a younger man. I soon gather they are a father and a son he is trying to admit. It takes five orders to pull them apart. After a few cries and shouts, they sit down on a bench in the hallway and wait silently to see a doctor. I watch all this from a distance. Then look away. I cannot rest. I cannot sleep. I feel as though my mind and body could break like glass.

A few days pass. I am transferred to the seventh floor, into another room with bare walls, this time with two beds. A woman much older than me talks in her sleep. Or is she awake? The other day, I can’t remember which day, I watched her have a conversation with herself in the mirror.

At first glance, no one in the hospital would believe that I am sick. My illness is inside, invisible.
hard to handle. I am extra careful to be good, say thank you and please after I witness a patient being locked up because his howling and crying is loud, hysterical.

A woman chants repeatedly, “I’m sixty. I’m sixty. I’m sixty.” She hears voices, the nurse tells me, drags her feet around and around a large brown table. I can see that she had once been pretty, beautiful even, but now her eyes are glazed and empty. No one comes to visit her. She’s been here too long. Forgotten.

In Intensive Care we are allowed one cigarette an hour. Breakfast, lunch and dinner arrive at precisely the same time every day. An orderly with a nose ring and long hair tied back reads *Le Journal de Montréal* in the morning, then plays crossword puzzles between his daily chores. I knock gently three times on the large glass window dividing us. He seems a little bothered since he is in the middle of the sports section. He gets up and opens the door.

“Can I have a cigarette?” I ask politely.

“Not now!” he yells and walks back to his chair. I wait a few seconds then turn to the nurse and ask her the same thing. The orderly glares at me, comes toward me, his face bright red.

“Go to your room. Now!”

“Yes sir,” I say feigning calm, fearing that if I don’t comply, he might force me into the room, strap me to the bed, lock me up all night.

On Monday morning, I am ushered back to the seventh floor by an orderly. My mind and body feel exhausted yet I feel the cloud in my head lifting. Have the drugs my doctor prescribed begun to work? I sit on a chair by my bed and flip through a fashion magazine that a patient before me has left behind. I turn pages filled with ads for shoes, perfumes and cosmetics. I lean back and close my eyes. I think about the fears, the marauders in the dark. They seem like half-forgotten dreams. A friend brings me the Sunday edition of the *New York Times* and I read a few articles that catch my attention. A patient who has been following me everywhere has a day pass and returns in the evening with a gift for me. He hands me a bag with two children’s books inside.

“This is to help you find the child,” he says softly. “The child within you.” I accept his gift. It is such a cliché, but his tone, his gentle eyes, are not. He tells me that on his way back to the hospital, he saw two extra-terrestrials on the bus. That’s how he knows it is time to return here where it is safe. I realize that for some, this is a better place than home. They feel secure here, they know the staff well, they keep coming back.

I am granted a few hours out of the hospital to breathe the city air. It is a cool night. A friend comes by and we walk along the sidewalk on Ontario Street. I spot a small café: the desserts in the window look voluptuous. I order a large piece of chocolate cake and a tall glass of milk. The cake is so fresh, it dissolves inside my mouth. My friend orders a Boréale. We sit in the non-smoking section and I don’t crave a cigarette, not one.

“You look good,” says my friend. I wear lipstick and blush on my cheeks.

A week later, I am released. June sleeps on my sofa during my first night home. I turn on the lamp and walk quietly towards the washroom. She opens her eyes. We smile at one another. She goes into her bag and takes out a powder blue hard cover journal, a green felt pen and hands them to me. I sit down next to her, open the journal to page one. Pen in hand, I write, grateful for the movement of my hand, the blood flowing through my veins.

*A knock . . .*
The shaman’s mother

BY MARY EARHART

N ot like he ever really needed her. Later, they named his sister Patience. Had Lila and Steven known to use descriptive nouns as names when he was born they might have called him Independence. Another name that came to mind when the boy was a toddler was Samson, because he was big and strong and out to prove it. Old Testament names appealed to his parents, though neither was religious. If they’d known what they were in for when the boy reached adulthood . . . well, they wouldn’t have done things much differently.

The boy was the couple’s fourth child and second home-birth. Unplanned but not unwanted, the pregnancy was evidence of the chaos in their lives. From the time she learned to read her fertility signals, it was Lila’s responsibility to monitor her body and enlist Steven’s cooperation. She became the boy’s mother when she got distracted and carelessly failed to journal signs on her calendar.

Lila was in a university nursing program and she worked nights at the hospital. So Isaac attended Anatomy, Chemistry, Physiology and Microbiology in the womb. Lila believed it formed the basis of his super intelligence.

Near her due date, the boy’s mother was stressed by the demands of work and school. For weeks false contractions cheated her of rest and wore down her resolve to birth naturally. She and Steven planned a type of homebirth that is now called “freebirth.” Then it was simply known as “unattended.” A better name would have been “self-attended.” No one but the couple and their children were there. No equipment other than towels and extra bedding were on hand.

Lila went to bed on her left side and refused to move. The real contractions were unbelievably hard. Slow and deep, her breathing was quiet and deliberate; all she could do was provide oxygen for her baby. At the end of three hours she felt her body pushing, opening, and her husband saw the crown of black hair.

Lila told Steven, “I don’t want to do this.” They looked into each other’s eyes. Fear and pain turned into love, the necessary ingredient for Isaac’s birth.

Steven replied, “But you have to, Honey.”

She knew it was true. The baby’s head emerged slowly. His face turned toward her left leg, the top shoulder cleared Lila’s pubic bone, followed quickly by his other shoulder. The baby’s eight-and-a-half pound body was on top of her now, a thick umbilical cord pulsing strong life into him.

It was a boy, they hadn’t known for certain until his arrival. They greeted Isaac and possible girls’ names were put away. After two more boys they would finally need one, but no one knew that yet. Isaac looked out of his blue skin with dark surreal eyes. His mother caressed him, helping him breathe but knowing he could take his time. The newborn baby eventually made a decision and wailed a lusty call to all his relations. His parents were protected then and unable to realize who he was.

The birth took place on Saturday and a very pale Lila returned to school on Tuesday. When her short sick leave ended she also returned to work. Thus, Isaac was given his mother’s pumped breast milk in a bottle by his father, who snuggled him against a feather pillow while he tended to three other children.

At the age of three, Isaac demanded respect, insisting his parents call him “Mr. Isaac.”

When he started public school, Isaac told his father he had made a decision never to ask for what others had, no matter how much he wished for or wanted it. The vow would stick even when it meant not eating at all or dining dumpster-side.

As a young man Isaac was opposed to any form of dishonesty. As the experienced mother of four sons by then, one of which was a truly gifted liar (she had to use her peripheral vision to catch him smirking), Lila accepted silence from Isaac when he could not comfortably tell her who did it. She never used this process of elimination against him. Isaac’s mother learned self-control in the presence of her son’s dedication to truth.

The young boy never complained of pain or illness. The summer after second grade, the boy was out exploring and stepped in a pile of agricultural ashes; its cool surface hid a bed of hot coals. Both the soles of his feet and the tops of his toes were badly burned. Steven took him to the hospital where Lila met them. The child was softly talking to himself so that at first they thought he was in shock. Listening closely, they heard him affirming that life is an illusion and therefore pain is not a real experience. His parents marveled at his courage and wisdom.

When Lila brought groceries home, Isaac carried the heaviest items while the other boys hid with laziness. Isaac had his first summer job at age 12. He was asked to start digging out some bushes and single-handedly cleared the whole hedge in an afternoon.

If Isaac had one shortcoming it was that he never admitted mistakes. If he failed to make the winning basket it was because the sun was in his eyes. If his science project did not win it was because the judges lacked imagination. Coaches in the many sports he went out for found Isaac to be the most dedicated player because he truly focused on and aimed for perfection. When training began he was clumsy, but diligent practice developed his wrestling, football, basketball, weight training, baseball and swimming skills. He also showed talent for coaching teammates.

Teachers loved his almost perfect test scores. In fact, he had a photographic memory and seldom studied. He saw solutions automatically and could explain his work. His math teacher named a new method after him.

No one thought there was anything abnormal in a teenager who was self-disciplined. Teachers and coaches tended to think it was some excellent early guidance from his mother and father that produced Isaac. Lila and Steven thought it was the raw vegan diet Isaac adopted in high school that inspired him.
As parents, they were very proud and happy to accept credit in spite of what they knew.

The truth was that both Steven and Lilacame from loving but dysfunctional families, so that is naturally what they formed when they came together. Isaac had spent nine months in state-run foster homes while his parents got clean and sober. When it was all over, the family was, in some ways, more dysfunctional than ever. Isaac suffered because of his sensitive nature; the boy the court returned to Lilahad been forced to clean his plate and spanked for bedwetting. His eyes now flashed with resentment where before they had been calm pools of trust.

Foster care was more than a decade behind them when Isaac left home for college. His scholarships paid for everything. His major was computer programming and he hoped to compete as a swimmer. The college team had spawned Olympic stars. That summer he won an Iron Man triathlon in his age category.

No one could have predicted the depression that followed. On the swim team, other young men trained half as hard and swam twice as fast as Isaac. Programming classes proved impossible; Isaac found himself unable to concentrate or finish tasks.

Lila and Steven thought the depression was due to a rocky transition from high school to college and that he would find his own way of dealing with being a little fish in a big pond. His difficulty concerned them but they had no reason to think it would spiral out of control. Perhaps there was nothing they could have done, yet they regretted doing nothing.

Isaac’s mother had a dream of her son in a canoe, paddling far away in dark water where a crocodile god lived. The croc wore a headdress of feathers and fishbones and made a rattling sound with his breath. Lila could not see the shore but she knew sacrifices were made in the stone temples that stood there.

Isaac dropped out of college. He turned scholarship money into tickets to Central America, planning to search the world for new purpose. In Guatemala he leapt from waterfalls, swam rivers and hiked through jungles. He quickly learned Spanish. It was also in Guatemala that he tried cocaine. This was the beginning of Isaac’s descent into the Underworld.

There followed a return trip through Mexico at a time when younger brothers and friends were leaving home or joining the military. Isaac’s new friends were drug addicts.

Always shy, even aloof with the opposite sex, drug use for him was no social lubricant. Isaac either ignored women or came on too strong. Either approach added to his isolation. He lashed out, angry and confused. He thought Lila and Steven were cruel and controlling. He fought them, setting fires, breaking windows, damaging property. Isaac’s mother called the police. The police took him to the psych ward. Isaac got released and slept in the park.

Isaac’s mother had a dream in which Isaac told her, “I will not stay here, and I will become a doctor.”

Isaac’s mother told the dream to her friend, who laughed.

Lila was aware that sharing her grief and bewilderment with friends had two results—nervous laughter that meant “Woman, you are in deep denial that your boy is anything but a degenerate bum. You should have expected it from the beginning because you yourself are nothing special.”

Or the friends commiserated because their own children were lawless immoral street scum. Lila’s response to them was a nervous laugh that meant “But your children were already screwed up and destined to be nothing. My child is really someone special and I am truly martyred.”

Isaac’s mother got a restraining order. Isaac journeyed deeper into the Underworld and went to jail. He learned to eat hotdogs and got pepper-sprayed. A few inmates were kind to him; he became a trustee in the kitchen where his hard work was valued.

Upon his release Isaac became a homeless man. He stayed drug-free and regained his honesty, which made panhandling impossible. The beloved son and brother was now a man who lived under bushes by a bridge. He slept in dirt and talked to himself. Isaac acquired a long beard and matted hair.
Lila grieved until she saw on television a mother who lost her perfectly healthy son to an overseas war fueled by corporate greed. The only appropriate thing to do in the face of such horror was to allow gratitude to replace self-pity. Isaac’s mother learned that things could be worse.

Lila read in the newspaper of an unidentified body found near the freeway. Without telling Steven, she left a message for detectives asking them to call if the body was that of a six foot, hundred-and-forty pound twenty-five year old male. Detectives left a message in reply, saying the body had been identified—at this point it was Steven listening to the answering machine, expecting the worst—and that it was a fifty year old man.

Shortly thereafter, Steven was hospitalized for a painful inflammation in his gut. For months he ate little, slept less and began relying heavily on narcotic pain killers.

Homelessness was Isaac’s plan to free himself of drug addiction. With 90 days clean, Isaac returned and Lila and Steve welcomed him home, worried that he made startling noises, laughed at nothing, and talked endlessly to himself.

The family asked Isaac to try County Mental Health. He had no problem getting in, but the long list of medicines and side effects turned a now sweet-natured misfit into an anxious zombie. Eventually, the family decided he could stop the failed experiment and not go back. One thing garnered from County Mental Health was a “working” diagnosis— Schizoaffective disorder. It was not due to drug use, but existed on its own, and had stalked Isaac from the quiet shadows of his childhood.

Isaac requested a bag of charcoal. He used it to fill bowls which he set on the floor in the corners of his room to absorb negativity. He took several showers a day to better hear his spirit guides. After Isaac’s older sister discovered the family’s gluten intolerance, a genetic destroyer of immune systems and brain chemistry, he ate mostly rice tortillas and beans.

Isaac’s mother researched other dietary treatments and found that salicylates and amines found in some foods could wreak havoc with sensitive brains. Swimming pool chlorine was one of the dangerous substances.

Isaac’s mother read that fruits such as tomatoes are picked green for shipping and naturally contain high levels of salicylates to protect the fruit from insects and fungi before it ripens. Cucumbers are known for the insecticidal properties in their peellings. Avocados contain a substance that is deadly to birds. Cherries contain aspirin-like compounds. Sensitive people react to these chemicals in a dose-dependent and cumulative way.

It was not easy, but Isaac developed a safe diet of a few neutral foods he could return to if his system got overwhelmed. Isaac began to reason and relate to the world in a less bizarre way.

Isaac’s mother bought distilled water for him and stocked up on romaine lettuce, celery, Golden Delicious apples and rutabagas. Making changes helped her develop compassion for herself and for Isaac’s father and brothers and sisters. They all cared deeply and were suffering because they wished things were different. She reached out to them and the result was the end of isolation. Isaac’s brothers opened their homes to him despite being afraid he would set fires, damage wiring and frighten their friends. Isaac thanked them for their kindness but opted to stay with his parents.

Isaac made speeches to the rising sun. He found a plastic whistle left in the yard by his nephews and it became his holy instrument. He used a bag of glass marbles to gently tap his mother’s back and shoulders whenever he saw her brooding. The sound of the whistle and the rattle of the marbles replaced some of Isaac’s noises as he became more skilled at directing energy.

Isaac’s mother did not have faith in the bowls of charcoal. She wanted Isaac to have financial independence by applying for disability benefits from the government. Isaac did not care if his parents fed him or housed him or if he returned to live in the bushes. It was not in his nature to complain, and therefore not in him to care one way or another. In that way his mind was free.

Slowly it happened that, perhaps because of the absence of gluten in his diet, Isaac’s ability to read returned. He began to read books. He chose three important volumes: the big books of Alcoholics Anonymous and Narcotics Anonymous and Autobiography of a Yogi.
The first time Isaac healed a physical ailment was on Mother’s Day. He tapped the bones in Lila’s wrist with the marble rattle. He blew a few notes on the whistle. Her arm felt warm and then the carpal tunnel pain she had learned to live with was completely gone. Isaac next began to hover around his father’s recliner and talk to him while he watched TV. Steven’s CT scans began to show improvement and his pain decreased. He started using less medication.

Isaac’s mother took Isaac to the grocery store. When she noticed he was waving at the overhead fluorescent lights she asked him to pick a watermelon. The distraction worked, but Lila’s own thoughts healed her shame. She realized her son was giving others the opportunity to learn compassion.

In a dream Lila saw Isaac’s eyes, actually dark brown like her own, as bright crystalline blue. She realized waiting and hoping for him to become himself was unnecessary. It was simple, as truth always is. He was himself now, living his purpose to heal and teach others. Her own suffering stopped. Coincidentally, a book on brain chemistry fell off the shelf of her internet bookstore and into her shopping cart. She bought it with one-click.

The book explained that Orthomolecular Psychiatry (O.P.) is an alternative branch of science. Pioneered by the Nobel Prize winning researcher Linus Pauling, O.P. uses specimens of blood, urine, sweat, hair and stool to analyze body chemistry. Nutritional supplements, sometimes in mega doses, are then given to correct imbalances that affect brain function.

Isaac was found to be high in copper and low in folic acid, B12, B6 and manganese. Supplements were started by a naturopath. The doctor was reassuring and respectful so Isaac committed to the regimen.

Within days, Isaac began to have dream recall. The voices receded during daylight hours now that he was open and receptive to them in his sleep. Isaac’s mother gave him a journal to write down his dream-messages. He began to share them with her, and together they tried to interpret the meanings.

Isaac’s mother realized that her son would be revered in a culture where differences were valued with a mixture of fear and respect. In a tribal setting, for example, her son would have been given his own hut apart from the others and his visions would be important messages from the spirit world.

Isaac had not needed goals when he lived under bushes by the bridge. Now, he thought of creating. He decided to let Lila help him to apply for disability.

Isaac taught himself how to remain awake while dreaming. He learned how to leave his body through drumming beats and to journey to lands where truth would be revealed to him. When he had appointments with the state disability doctors, he told them these things and his case moved forward.

When a determination was finally made in his disability case, the retroactive check was enough to pay off his parents’ mortgage and to finance Isaac’s international search for apprenticeships. He traveled to study under other healers and Isaac’s mother’s dream was thus fulfilled.
Catherine looked up from her work. Someone had just brushed past her dislodging a stack of papers from the library desk. A thin, dark-haired man, his jacket wrapped tightly around him, paused and then continued down the center aisle to the exit. Something in his movements made Catherine want to run after him, touch his shoulders so she could see his face. When he did turn, just for a moment, to look back down the library, she saw that he was a stranger after all.

Catherine reached down to collect the papers from the floor and sat back, the thick volume lying open before her now unreadable. Someone opened a window. A cold rush of air fluttered the edges of the notes and drawings scattered across her desk. Outside, clouds moved across the city sky, darkening the afternoon. The pain came, as strong as it had ever been, as it had always been.

“You must look for him then, Cathy. Leave it. Leave the book and go outside and bring him in. Now!”

Catherine reached out to the voice. She reached for him as she fell. She felt for his hands and they slipped from her grasp. She was falling. She couldn’t find him. He was gone.

The summer sky was a brilliant blue, the earth smelled of burning and the high grass was brittle and dry. She heard the hum of a dragonfly as it jumped from her hand, a blue vibration that disappeared. Where was he? Six years old and still helpless.

She walked along the path to the work shed at the end of the back yard first and through the summer garden to the paddock, then on to the western pasture. She hated looking for him like this in the heat with Mum back in the kitchen cooking and the good book lying there wasted on the kitchen table. It seemed as if the sun would never move again. It sat there at two o’clock blazing.

She stood at the fence, shifted her weight from one foot to the other and looked up into the sky. There wasn’t a cloud anywhere. She felt the sweat trickling down her face, heard the whine of a cicada rising. It was so still – no breeze, no sound of birds. It seemed there was nothing in the world but the heat and the dry green-brown field stretching before her.

She turned around to look back at the house. The curtains were drawn against the afternoon sun. She suddenly felt frightened. Where was he? It was stupid of her to come looking for him this far from the house. Stupid Cathy, looking for him where he wouldn’t go. But where was he? Peter, her little brother, who would sit for hours on the long flat rocks at the edge of the pond, his little legs stretched in front of him, his t-shirt a wet bundle at his side. He would sit there, watching the minute green frogs jump in the thick grass, then stand up, squinting at the water, looking for the bump of a green forehead and the eyes staring back at him.

The pond. She started to run back tumbling down the dirt track beyond the old barn. I’m sorry. I’m sorry. Scrambling up the slight rise of land, she ran headlong toward the lip of the pond almost sliding over its edge. The gray earth crumbled away beneath her as she looked down grasping for breath. It was dry. There was an inch of stagnant water at the most.

Catherine felt the tears rolling down her face, there in the library. Someone had closed the window and rain was sliding down it in waves. She couldn’t breathe. She stood up, pushed her papers into her bag and pulled her jacket from the back of the chair, walked carefully along the aisle to the exit, pushed the heavy doors open and stepped outside.

It didn’t matter. As soon as she got home she would call him. Call Peter. Where was he? Where had she left him last? Her mind was a harsh, white emptiness. She stood immobilized, looked at the traffic lights at the corner blinking to red, to yellow, to green, at the cars as they hissed past her in the downpour. The cold rain stinging her face finally pushed her on. She crossed the busy intersection and walked the few blocks home.

“It’s so hot today!” Catherine’s mother pushed an errant wisp of her daughter’s hair back into place. “Do go and get him. We have to get this picture done today and we can’t wait here forever.”

Catherine looked over her mother’s shoulder to the second floor windows of the house.

“He’s gone back in.”

The moving van had left only a few hours ago. The house was empty of everything except a few garbage bags that they would load on the truck and take to the dump on their way to the city.

Catherine’s footsteps sounded sharp and quick on the bare floorboards and she purposefully slowed and softened her gait as she walked up the stairs to the second floor landing. Peter was where she had expected him to be, staring out the back window to the fields. Looking at him now, his tall straight posture, soft curly brown hair, she thought that he wasn’t so different really from anyone’s younger brother. He would adjust, grow stronger, more sure of himself. People said that children grew out of these things and he was still a child, only fourteen.
And then, well, things would be different. She walked up beside him and gently touched his hand.

“Come on darling, Mum wants your picture.”

Peter turned to look at her then. His gaze was straight, unwavering, and unreadable. As if they were strangers. As if he had never seen her before.

Catherine couldn’t understand it. She stood, phone in hand, just inside her apartment door. Peter’s line was ringing out of service. She had paid the phone bill hadn’t she? She couldn’t think, couldn’t honestly remember the last time she sat in his room, bills and checks laid out on the little coffee table, the sound of the television humming behind her. She put down the phone, turned to close and lock her door, then ran down the stairs to the street. How could she have forgotten? She walked the two blocks to the streetcar that ran to the other side of the city, to the neighbourhood of tired, old houses where Peter lived.

Catherine heard the click of the outside door closing as she walked out of the kitchen. She looked across the living room. Her mother was watching television, a blanket pulled up over her beige uniform, brown men’s socks pulled over her stocking feet. She hadn’t noticed. Catherine walked quietly behind her and slipped outside. Peter stood on the sidewalk in front of the apartment building, their mother’s raincoat wrapped around him. Something in the road caught his attention and he bent over to look at it. Catherine walked up to him carefully. He was staring down at a pool of water collected beside the curb where a grate had been plugged with leaves. It was a windy, rainy night and she could see the dark arc of the nearby trees there, their reflection rippling, appearing and disappearing as the wind grazed the surface of the water. She stood beside him, saying nothing, knowing he was lost to her. She slipped her hand into his. He didn’t pull away and so she stayed quietly beside him, not feeling the wind or the rain, searching for the world within the water that only he could see. Finally, their mother’s tired, impatient voice found them and Catherine tightened her hold on Peter’s hand. As gently as she could, she pulled him away from his dream.

The streetcar shuddered when it started the left turn at the end of its route. She stood quickly, stumbling against the empty seats. The driver saw her and began to brake. Her heart pounding, she stepped down to release the doors and down again onto the busy sidewalk. She pulled her jacket tightly around her, walked quickly back to the missed corner and then turned out of the light and noise onto the avenue that would lead her to Peter’s flat. Puddles had formed wherever the sidewalk dipped toward the road and as she looked down, the streetlights came on and the branches of the trees lay reflected there.

By the time she reached his building, she was out of breath and shivering with cold. She looked through the glass panel down the dim hallway to his door. There was someone reflected in the glass, a thin woman in a jacket, dark rain soaked hair tumbling over her shoulders. She stepped back in shock, sat down heavily on the front steps and willed herself back to the hot dry farm summers of childhood. She had found him that day and all the others. She had watched him grow unchanging into a silent teenager and then young man. Every time he ran away she brought him back. She reached for the sound of the cicada in the sun, found only darkness.

The small car skidded against the snow bank piled in one corner of the icy parking lot. Catherine left it there and half slid, half ran to the entrance of her mother’s apartment building. She laid her finger on the intercom and kept it there until the click of the inner door finally sounded. The apartment door was unlocked. She went in, pulled off her boots and threw her heavy winter jacket on a chair.

Her mother sat in the kitchen with her head in her hands, her elbows on the worn metal of the kitchen table. Her neat brown pantsuit fit her thin frame to perfection, but her hair was uncombed and she wore no make-up.

“Don’t be angry with me, Cathy. You were there. You heard what they said. He can’t take care of himself. They told us. And now he’s run away. It’s not my fault.” She started to cry.

Catherine walked over to the window and watched the
snowflakes falling, whipped around by gusts of wind. Her mother’s voice faded to a barely heard monotone in the background. He had no place of his own. He had a light spring jacket and running shoes, what he was wearing two months ago when he was put in the hospital. This wasn’t the farm, this was a city and a snowstorm and there was no safety anywhere.

She turned back to her mother who had stopped crying and now stood, blowing her nose. The kitchen felt stifling. Catherine couldn’t breathe.

“Do you know where he is?”

Catherine shook her head.

“Well, there’s nothing to be done this time. They’ll find him. It’s their job. They will find him and bring him back.”

“They won’t know where to look.”

The sharp, hard voice of an elderly man made Catherine jump. “Excuse me! Are you going in or out or what?”

She hadn’t realized that she was now standing in the lobby of Peter’s building. She backed quickly out of the way so the man could step around her, then watched him walk slowly down the hall to Peter’s door. She could see the room as clearly as if she was standing in its doorway: the old gray fabric couch pushed against the wall below the small window; the electric clock on the table beside it, red numbers flashing; the television on as always, black and white images on a screen, the sound turned off; dishes piled unwashed in the small sink, some left sitting on the cracked top of the hotplate; the bed pushed against the opposite wall unmade, clothes piled on top of it; Peter standing beside it wearing his thin black sweater, holes in the elbows, whispering, “Have to go home, Catherine. Go home, Catherine.” The elderly man’s key grated in the lock and the door opened. In the room beyond there was nothing that she recognized.

Twelve-year-old Cathy held Peter’s little hand as the two of them stood at the edge of a wide pool of water. She smiled as she bent toward him.

“It looks like another world down there doesn’t it?”

Suddenly he pushed her, his little hand pushed her so hard she had to step back. He stepped away from her to the edge of the water.

“Peter? He wouldn’t answer her and she was frightened.

“Peter! Stop it!” She started to walk away from him but couldn’t, couldn’t leave him.

She knew even then. She knew, bending toward him, smiling as she reached for his hand, knew as she watched him let go of her, push her hand away. Every time she brought him back, even as she felt his hands push against her.

She had searched for him. All her life, she had searched. And all he had wanted was for her never to find him.

It was late by the time she got home. She went straight to the bedroom, let her wet jacket fall on the floor, undressed quickly, pulled her nightgown over her head. Her mind still seemed to be working against her circling in confusion. She went to the bathroom and took a long drink of water from the tap then straightened up, looked down at her hands gripping the white sink. There was no unpaid phone bill, nothing she had forgotten to do. Go home Catherine. Peter was gone, had been gone now for over a year. She stood in front of the mirror staring at her own pale face, tried to understand what had happened to her. She was too tired. She turned out the light and got into bed.

As she drifted off to sleep, she remembered the photograph; taken by a neighbor that long ago summer day. It had been there in all the apartments and hospitals and rooming houses he had lived. He had left it behind this time, laid it flat on the bedside table. It was a poor photograph really, in its cheap silver frame. The farm was just a blur behind them. Their mother stood behind her children, her face half-hidden by the brim of her straw hat. Catherine stood slightly to one side looking down. Peter was there beside her, his image a little blurred because he had moved. One hand was slightly above the other, as if he had just unclasped them to reach out.
Mr. Penny’s experiment

BY ROLLI

Latey, Mr. Penny hadn’t been feeling well, not by a long shot. He didn’t have a cough or a headache or a sore throat - nothing like that. But he felt so glum and sleepy in general that he spent day after day slouching on the Chesterfield, and sometimes didn’t bother getting out of bed at all. When Mrs. Mickleson (from across the hall) was still home, she’d taken his temperature and looked at his tongue, but said nothing was wrong with him, that it was only the “blue devils.” Though she’d explained what the expression meant (Mr. Penny had looked more confused than usual), he still wished she’d found another way of saying it. “Blue devils” made him think of horned things bounding around his skull. “Take it easy for a few days, Mr. Penny,” she’d told him, “and you’ll be fit as a fiddle. Just wait. By the time I get back from Ireland, you’ll be a new man.” At the time, she’d been preparing for a long-hoped-for trip to Dublin, to visit her sister. Though Mrs. Mickleson was reluctant to leave Mr. Penny - she’d mothered him for the past ten years, at least, and he did seem to be in a bad way - still, she’d already purchased her ticket; she and her sister were getting on in years; and besides, Mr. Penny would almost certainly be fine on his own for a few weeks. So she did what she could to comfort him, made him a big pot of soup, even, and reminded him to take his medicine every morning. “A little of my beet soup, Mr. Penny, and you’ll feel better in no time.”

This wasn’t the case, unfortunately. His friend had been gone for a week, now, and though Mr. Penny had taken the soup liberally, he felt worse than ever. Now his head didn’t ache. His appetite left him. If it hadn’t been for Guy, his dachshund - he needed to be let out, of course - or to use the toilet himself, he wouldn’t have stirred from his bed at all. He grew thinner, and ragged-looking, but wouldn’t have realized it if he hadn’t glanced in the bathroom mirror, once, in passing. After that, he avoided shiny surfaces altogether.

He didn’t sleep, exactly, but lay there all day and night, very still. To pass the time, at first, he imagined he was an Eskimo, hiding from polar bears in a dome of bedspread and sheet. But when he started hoping the bears would hurry up already and break in, he decided it was best to think of something else. For a long while he pretended - or was it really the case (it was getting hard to tell) - that there was a small boy in the pit of his stomach, sitting on a lump of something, and dangling his feet in the water. “What are you going to do?” the boy would ask him, from time to time. But Mr. Penny could never think of a satisfactory answer.

By the eighth morning, he found himself practically unable to think. He forgot about the boy, the bears, even the dog, which spent most of the day whimpering at the side of the bed. So Mr. Penny passed the time by looking at things. The armchair; the lamp, which had been on for several days and nights, now, drawings he’d tacked onto the wall. And a picture. Not a photograph, no, and not a painting, but something he’d clipped out of a magazine, once, and put in a frame that Mrs. Mickleson had given to him. It was a picture, an etching of an angel - or. Mr. Penny found himself sitting up in bed. No. It wasn’t an angel, exactly. It was ... His thoughts were so muddy and thick that it was hard to come up with the right word. A monk, maybe? Some holy-looking person in a coarse robe, at least. Eyes closed, hands clasped, the figure floated through the air, rooftops and cathedral spires far below. Flying. It was the flying part that made Mr. Penny assume, long ago, that it was a picture of an angel. Looking closely, though, there were no wings, or columns of light; nothing too angelically, really. Just a scruffy old man serenely gliding over the cityscape.

The next day, Mr. Penny felt much better. He didn’t realize it at first; had bounded out of bed and was half-way through making breakfast before it struck him. “Well,” he said, looking into the dog’s buttony eyes, and flipping the bacon, “it looks like the soup worked after all. Sent those blue devils packing.” Guy looked up at him, as happily as a dreary little sausage of a dog can. Mr. Penny gave him a piece of bacon, even though Mrs. Mickleson always cautioned him against this (“it bungs them up”). After downing his breakfast and cleaning the dishes, Mr. Penny threw on his favourite orange coat, and put Guy on his leash; then the two of them stepped out the door.

Mr. Penny had always thought of himself as a man of ideas. A lanky, shaky, and badly-made man, he’d have had little to recommend himself if it weren’t for his imagination. Like the time - it was at a town meeting - when the Mayor had asked if anyone could think of a way of raising money for a new library, and Mr. Penny had suggested they could sell their houses. And when someone asked where they’d all live if they had no houses, Mr. Penny thought for a while, then said they could just build new ones. Everyone was speechless, after that.

Right now, he had another idea. It was the angel - or the monk, or whatever it was - that had given it to him. “I ... am going ... to fly,” he said to himself, relishing every word like a mint under the tongue. Guy looked up at him, sceptically.

His first attempt was in Victoria Park. There were no big trees near Mr. Penny’s building, but the park had plenty of them. He picked a tall one with red leaves and sturdy boughs, tied Guy to the trunk, and set about climbing it. After twelve feet or so, he stopped (“Good enough, for a first try”). But before he could jump -

“Now, what on earth are trying to do, there, Mr. Penny?” said a knobbly old woman, crossing her arms. It was Agnes Schmidt.

“Fly,” said Mr. Penny, trying not to look at her. She was a nice woman. It’s just that her skin was so withered, and her teeth so like a skeleton’s teeth, that her appearance was - upsetting. Her arms and hands were so veined and spotted and
prune-like that to watch her play the piano at church was to give up sleep till next Sunday. She never stopped moistening her lips, either. It was the sound of someone endlessly licking envelopes, or sucking gum, and Mr. Penny couldn’t tolerate it.

“Young man, have you lost your head?” This was another old lady. It was sunny, so the park was filled with them.

“No,” said Mr. Penny.

“Says he’s gonna fly,” explained Agnes to the other woman.

“Fly? Puh! Good Lord.”

“Mr. Penny, I think you should come down here, this instant.”

“Why?”

“Because you’ll break your bloody head, that’s why,” snapped the other woman.

Holding a branch with one hand to steady himself, Mr. Penny swung back his free arm.

“Don’t you even think about it!”

He did think about it. And then, springing off the limb, with his arms outstretched . . .

A crackling, several gasps, and a thud.

“You damned crazy fool!”

“Oh! Are you all right?”

Mr. Penny got to his feet, untied Guy, and ran away.

At home, Mr. Penny sat in bed, wondering what had gone wrong. Now and then, he looked up at the picture of the flying man, then jotted something down in his notebook. Could it have been the weather? But that was silly. For a while, he thought maybe he wasn’t holy enough to pull it off; the man was a monk after all. But no. He went to church every Sunday (you can’t go more often than that); he was as holy as the next person. It had to be something else.

Mr. Penny got out of bed, and stood very close to the picture. He inspected every inch, top to bottom, side to side, looking for clues, some wonderful hidden something. And finally . . .

“Ah! I’ve got it, Guy. See.”

“Gold-coloured foil? Hmmm . . .”

The proprietor of Service Electric smoothed his mustache. His name was Donald, but everyone in town called him Turkey (behind his back) because of his red complexion, and dangling neck fat. As for the shop, no one could really figure why the word “electric” appeared in its name, since hardly anything electrical was sold in it. Ditto “service,” a rarity there, too. Mr. Penny was hoping the man wouldn’t say, “Hmmm . . . not at present. But I just ordered some,” which was what he always said when he didn’t have what people were looking for. Not wanting to look superstitious or silly, Mr. Penny didn’t physically cross his fingers - but he did so mentally, as best he could.

“Hmmm . . .” Turkey repeated, walking away. “There might be some in the back,” vanishing behind a curtain that hung at the far end of the room.

As he waited, Mr. Penny looked around the shop. There were so many things crowded onto every shelf that it was a wonder Turkey wasn’t able to summon forth anything a person cared to mention, presto, like some flabby, red magician. Pricey junk, mostly: wind chimes, fake jewellery and such. There was even a dust-covered figurine of a superhero (the
name escaped him) Mr. Penny had been fond of as a boy. He thought about buying it - but it's way too much, really - then did his best to think about other things. He remembered that, when he first came into the shop, Turkey had been flipping through a magazine that he quickly placed under the counter. Looking around carefully, first, to be sure the man wasn’t coming, Mr. Penny stepped behind the counter, retrieved the magazine, opened it - and shut it, swiftly.

It was full of - well, nude people.

A shuffling, and a flapping of curtain. By the time Turkey made it back to the counter, gold foil in hand, Mr. Penny was smiling innocently on the other side of it.

It was exciting, spreading things out on the table exactly how one wanted them. Several times a week, Mr. Penny added to his scrapbooks - pictures of dogs and cats, mostly - and the setup for the present task was very much the same. The glue was at his left elbow, the scissors to his right, and in between, the gold foil, neatly smoothed out. He’d assumed the whole task would take a few minutes, at most, and he could try his creation out right away; but it took so long to get things how he wanted them it was already pretty dark, and any testing would have to wait until morning.

“What do you think?” he said to Guy, waving the finished product - a makeshift halo of cardboard and foil.

That night, Mr. Penny was so excited, he could hardly sleep. But - it’s strange the way things work out - when morning came, he felt just awful. His alarm clock went off, as usual, at seven-thirty; but he let it ring down to silence without stirring. Ditto the telephone, even though he rarely received, and normally relished, any calls. Time passed (minutes or hours, he neither knew nor cared), and then -

A knock at the door.

“Mr. Penny? Are you there?”

It was Nurse Audrey. He could tell by her high nasal voice - like someone was squeezing her nostrils shut.

“Mr. Penny? I just want to talk.”

That got him out of bed. Nurse Audrey - everyone has their oddities - generally only liked to talk to him after he’d been held down and poked with a needle.

“Are you alright?”

“Oh dear,” he said aloud, wondering what on earth to do.

“I’ve heard some very distressing things, Mr. Penny. Very distressing.”

As quickly as he could, he gathered up his clothes - no. There was no time for that. He put his slippers on, though, and Guy on his leash.

“Do you feel like hurting yourself?”

As quietly as he could, he opened the window, and removed the screen.

“Have you been taking your medication?”

“I almost forgot,” he muttered, running to the kitchen, where he grabbed, not pills, but the halo.

“Step back from the door, sir,” said a deep male voice.

Dog in arms, Mr. Penny climbed out the window.

Small towns are, for the most part, dull, uneventful places - or safe and quiet, as small-towners prefer to call them. That doesn’t mean extraordinary things don’t happen, on rare occasion - and when they do, they’re relished all the more. A robbery barely makes page ten in a city; in a small town, it’s worth a month of table talk, at the very least. So the sight of a man in pajamas racing through the streets, practically dragging a small dachshund behind him, hotly pursued by a nurse and two assistants was bound to arouse a little curiosity.

“Good Lord!” said - any number of people.

“Stop him! Stop him! Stop that man!” This was Nurse Audrey.

Being elderly, the bulk of the onlookers were much too frail to do anything as dramatic as that, but just frail enough to make their way after the other chasers, in a kind of rapid struggle, eager to see what would happen next.

Mr. Penny, slowed down more than a little by Guy, still had a healthy head start. By the time he crossed the train tracks at the extreme south end of town, the mob had grown to nearly two dozen members; one would have thought the man was a celebrity, except that instead of crying for autographs, people murmured about the bluffs - a logical destination for any lunatic jumper, plunging as they did 200 feet down into the sea.

As it happened, Mr. Penny was headed for the bluffs; and it seemed likely he’d reach them without being stopped. There was a close call, when he stumbled on a clump of dirt (“Grab his legs,” he’d heard Nurse Audrey say), but he managed to get up quickly and keep going. When he came very close to the precipice, he slowed to a stop, then turned about and faced his pursuers, who themselves stopped, afraid of his next move.

“It’s alright, Mr. Penny,” said Nurse Audrey, badly out of breath.

“What’s alright?” said Mr. Penny.

“Everything,” she replied. “Everything’s just fine. Why don’t you come away from that cliff? We can have a nice talk.”

“No thank you,” said Mr. Penny.

“He thinks he can fly, poor soul,” said someone.

“I can,” said Mr. Penny, irritated.

“Mmm hmm,” said Nurse Audrey, solemn, nodding her head.

“You don’t believe me,” he said, glumly.

“You’re a very sick man,” she said.

Mr. Penny placed the halo on his head . . .

“Mr. Penny?” said the nurse, raising an eyebrow.

Picked up Guy . . .

“Mr. Penny?”

Turned about . . .

“Mr. Penny!”

And sprang over the cliff.

A medley of oaths, cries, declarations . . .

Then gasps, moans, and awed hush . . .

As Mr. Penny, serene, floated into the clouds.
Double-edged sword: Facing Postpartum Depression head on

BY GLORIA MORIN


The Smiling Mask is the kind of book I wish someone had placed in my hands sixteen years ago when I was diagnosed with postpartum depression (PPD). What this book manages to accomplish is to break the silence and offer hope to the many mothers out there who have experienced, or are currently experiencing, the symptoms of PPD. These symptoms include, especially, excessive worry about the baby’s health, well-being and safety. Feeling incompetent, having low self esteem, being unable to cope, and having overwhelming guilt, are further symptoms that contribute to and exacerbate the illness. Not only is the new mother struggling with a debilitating illness, but she also has to deal with society’s expectations as to how a new mother should appear, think, feel and behave. Consequently, the approximately thirteen percent of new mothers who experience PPD are often misunderstood and harshly judged.

In comparison with other books I’ve read, which for the most part have only dealt with an individual woman’s experience with PPD, this particular book offers the reader much more. This book is unique for several reasons. For starters, it’s written by three Saskatchewan women who bravely decided to collaborate on a book enabling them to share their stories with us. This in itself bears testimony to the healing power of shared experience. Having had the privilege of meeting these women in person, I witnessed firsthand the amazing support and understanding these women gave to each other. Now, through speaking engagements, support groups, and their book, they’re offering the same to other mothers out there. These three women share the pain and suffering of having to hide what was truly going inside because of the fear of being regarded as a bad mother. Fortunately for them, their family members and friends were supportive, loving and accepting. This made it easier to remove the smiling mask, speak out and seek support for themselves. Eventually the pain lifted, hope was restored and this book was written.

Secondly, the voice of these women’s husbands, as written by Peggy Collins, editor and publisher of The Smiling Mask, is heard as they share their personal struggles in coming to terms with their wives’ depressions. This reminds us not to overlook the fact that PPD affects the entire family, making the book important reading for everyone. Chapter 6 of this book offers several strategies for supporting mothers with PPD. Everyone plays an important part in the recovery process, and this book gives everyone a better understanding of what the mother is actually going through and how they can help.

Lastly, a chapter of the book is devoted to the debate on whether or not a mother, having been diagnosed with PPD, should have more children. All three women had their say in this debate. Unfortunately, if a woman has had PPD, there is a 50 to 80 percent chance of recurrence, thus the need for this debate to be included in this book. In summary, all three women agree that the decision to have a child is up to the individual mother, but only after consulting with a spouse, support systems, and the medical community. All three women advise the mother to “know thy self” and to give herself space and time to heal before broaching this important question.

I found this to be a well-rounded, informative, and above all a hope-filled book. I would highly recommend this book to anyone who is, or knows someone who is, currently experiencing postpartum depression.

PHOTO BY JAMES SKELTON
Our readers say . . .

GORD (Yorkton SK) writes:
Thanks to you and Lynn Hill for Transition Magazine. I am enjoying reading the latest one . . . there is a truly human story in the writings. It is something I wish I could find more of elsewhere.

I'm sure the content could be for everyone, not just (active) sufferers, but everyone. And everyone would be the better for having read the material you've provided.

LAURA (Springside, NS) writes:
I've been asked to read a story for the Red Hatters in our area on Thursday and I plan to read [my story published in TRANSITION].

Also, I want to say I appreciate your [Lynn's] note. How nice of you to take the time to explain the process [of in-house publishing]. To those of us not involved behind the scenes we really have no idea.

VICTOR (Winnipeg MB) writes:
I've just finished reading TRANSITION from cover to cover. You wanted a professional opinion, but I'm not sure I can give one as I felt drawn in and closer than I wanted to the contents. I cried reading the research article . . .

The work you publish is of quality, I could tell from the issue I downloaded before, and it was confirmed with what I've read this morning.

I think the prose was more accomplished than the poetry, while the poetry may be more emotionally immediate. I was glad you took care in the story of Wes Harker, very professional and ethical. Well done.

I appreciated the art work, especially that of Henry Peters . . . You should be proud of the work you are doing on the magazine . . . There's probably not another publication like it in Canada, and another reason why Saskatchewan is such a great place.

VILLAGE BY JAMES SKELTON
Notes on contributors

Cover

BARKAIE, Rachel:
Moose Jaw artist and poet.

Artwork

PETERS, HENRY
Winnipeg MB artist who has been contributing to TRANSITION since 1989

SKELTON, JAMES:
Writer and artist from Saskatoon SK. Artwork prominently featured in previous TRANSITIONS.

Authors

BARKAIE, RACHEL:
Moose Jaw artist and poet. First publication of her Hebrew poetry in translation into English (with Bill Barkaie).

BELL, WADE:
Clinically diagnosed depressive in Calgary. Author of three short story collections, most recently No Place Fit for a Child (Guernica Editions, 2009). Previously published in TRANSITION.

BIRCHAM, DORIS:
Ranches with husband Ralph in the Cypress Hills region. Well-published author or Where Blue Gama Grows (Hagios, 2006).

BOUDREAU, VIRGINIA:
Lives and writes in Yarmouth NS.

BUTTON, GREG:
Member of CMHA Writers (Moose Jaw). Frequent contributor to TRANSITION and author of Inside of Midnight (Thistledown, 1993).

COLWELL, AMBER-DAWN:
Moose Jaw writer and collage artist. See cover of Fall 2008 issue.

DUBOIS, JOCELYNE:
Widely published short story writer and poet from Montreal. Published a poetry chapbook based on her bipolar experience, Hot Summer Night (Sky of Ink Press, 2008).

DOWNTON, DARRELL:
Member of Consumer Advisory Committee CMHA (SK). CMHA board member at local, provincial, and national levels. Fanatical Saskatchewan Roughrider fan.

DRUMMOND, MATTHEW:
Member CMHA (Swift Current) for six years. Currently enjoys working in the community.

EARHART, MARY:
New writer published in the Tiny Lights print journal as well as tinylights.com. Spends her time with her family in California or writing on the beach in Costa Rica.

EWEN, DOLORES:
Lives and writes in Regina SK.

FREEDMAN, LISA:
Lives and writes in Winnipeg MB.

GALipeau, ANGELA:
Lives in Winnipeg. Writes to express and understand her feelings.

HARGREAVES, KATE:
English and creative writing student, University of Windsor. Published in The Windsor Review and other magazines. Co-editor of the student publication Generations.

HURDLE, CRYSTAL:

MORIN, GLORIA:
Member CMHA Writers and previously published in TRANSITION.

PARKER, BARBARA:
Lives in Canmore, in the Alberta Rockies. Tries to write and walk every day.

PLACE, ROSALIND:

REMPLE, CAROL:
Member of CMHA Writers (Moose Jaw).

ROLLI:
Writes for adults (Quarterly West, CBC Radio) and children (Spider, Ladybug). Visit his blog - www.rolliwrites.blogspot.com.

WOOD, JAN:
Lives and writes in Big River SK.
Resource Centre available on-line

Hundreds of books, articles, videos, games and programs are available for loan from the Friends for Life Resource Centre. Topics include (along with many others):

◆ Anger Management
◆ Anxiety Disorders
◆ Balanced Lifestyle
◆ Bipolar Disorder
◆ Bullying ◆ Conflict Resolution
◆ Cutting (Self-Harm)
◆ Depression
◆ Eating Disorders
◆ Girls’ Issues ◆ Grief
◆ Homophobia ◆ Laughter
◆ Mental Illness ◆ OCD
◆ Relationships ◆ Self Esteem
◆ Separation & Divorce
◆ Social Skills
◆ Stigma ◆ Stress
◆ Suicide ◆ Suicide Prevention

All materials can be borrowed directly through our web-site at www.cmhask.com
(Click on the Library button)
visit us in person or call 1-800-461-5483
2009 Annual Provincial Conference and Annual General Meeting

Against All Odds

Thursday, Friday, Saturday
June 18, 19 & 20
Weyburn, SK

PROVINCIAL CONFERENCE

PRESENTATIONS:
Friday am workshop CRAZY presented by Third Story Window

FRIDAY pm ‘Partnership Program’ presented by the Schizophrenia Society of Saskatchewan

KEYNOTE: Friday pm CEO of CMHA National Dr. Taylor Alexander.

SATURDAY a.m. see the Video Stop Pointing addressing the stigma association with mental health issues

ANNUAL GENERAL MEETING
Saturday am 10:15
(you must be a paid up member of CMHA in SK to vote at the AGM)

NOTE: The Slate of Officers for elections to the CMHA Board of Directors will be available online (www.cmhask.com) Monday, May 25, 2009

REGISTRATION DEADLINE: Monday, June 1, 2009

CONTACT:
1-800-461-5483 (in SK) 306 525-5601 (in Regina)
for information or to register