

# THIS IS ME

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When I walk into the intensive care ward, people are gathered in small clusters in different sections of the long, brightly-lit waiting room. Because my family has been here the longest, they have the best corner, with a recliner and a lamp. They have brought thin foam mattresses, pillows, and a patchwork quilt, and are eating from a big barrel of Kentucky Fried Chicken. They lick their fingers and come to hug me with their elbows, their greasy hands held high, relieved that I am here, for I am the oldest.

“How is she?” I ask, when the hugging is done.

“About the same,” my sister says.

“Can I get back to see her?” I ask.

My brother says, “Here, I’ll do it for you.” He pushes a red button on the wall, and in a moment a female voice with the Appalachian twang I grew up with comes from the speaker.

“Can I help you?”

“Yes, please,” my brother twangs back, “I’d like a double whammy burger, a scoop of fries, and a Big Gulp.” A moment of silence, and then giggly-stern: “Sir, did you wish to see a relative back here?”

I lean toward the speaker. “Yes, I’m Mrs. McKenzie’s oldest daughter and have just flown in from California. May I see my mother, please?”

“I’ll buzz open the door, and you can come on back,” the voice says in a little hillbilly rhythm that lengthens on the last word.

The door lock clicks, and my younger sister goes back with me. We pass a row of glass rooms; in each is an old man or woman with tubes in their mouths. Television sets drone on from wall mounts, but no one is watching them. My mother is in room six. She looks like the rest of them. I lean down and speak in her ear. “Mom, I’m here. It’s me.” Her eyes flutter open for a startled moment and then close again. We establish our routine. I will stay during the day, sitting in the big recliner my family has claimed, and my sister June will spend the night sleeping in the same chair.

A teenage girl comes in with her boyfriend. She wears a cheerleader jacket and heavy brown make-up on her face and legs. The boy is tall with long legs and arms. He tries to comfort her by patting her and putting his arms around her. He can't keep his hands off her. She knows what he is after and pushes him away. He sits down with a sullen look and opens a newspaper. He has snuff tucked under his lower lip and looks as if someone has hit him on the mouth. He carries a McDonald's cup into which he spits. The girl doesn't seem to be bothered by this. I wonder if later that evening she will kiss him.

A new group comes into the waiting room, one couple at a time, until there are ten or twelve. The men have red cheeks where the blood vessels are close to the surface of the skin; they wear baseball caps and bib overalls drawn tight against their bulging stomachs. The younger women have broad bottoms and thick thighs; they wear baggy nylon jogging suits. The older women are worn away and sit with arms folded. One woman enters alone and joins them. She is in her early fifties, slim and tanned, and her hair is fashionably cut and professionally colored. She wears a well-fitting pair of black slacks and a gray wool jacket that fits her shoulders well. She has a leathery look about her from too much sun, perhaps golf or tennis rather than cornfields and gardens. However, if she wore a shapeless flowered dress and let her hair fall gray and uneven around her shoulders, she would look like one of the women who wait here for their husbands in the ICU. The men take off their caps, pull their chairs close, lean in and speak earnestly to this woman; they try to impress her, even flirt with her in a clumsy way.

One old man who comes in daily to see his wife, says to me, "Honey, you must live here." He tells me that his wife is "back there." He carries his teeth in the bib pocket of his overalls. His granddaughter has multiple rows of fat and looks as if she is wearing concentric inner tubes beneath her clothes. I watch her push herself up from the chair and walk with great difficulty to the phone. I put myself in that body and feel the heaviness of my breasts and the weight of my hips as I walk. I see the puffiness of my forearms and the thickness of my fingers as I reach for the receiver.

We sit here in the waiting room, tensing when the ceiling speakers crackle into sound, watching the door to the ICU, fearing the serious

face of the nurse and her beckoning finger. We keep constant vigil, going to the bathroom to splash perfume on hidden places and apply lipstick to chewed lips, bravely bursting forth to sit and wait again.

A big man, whose pants droop below his belly and show his crack when he bends over, keeps hitting his left shin with his cane. It must be artificial, because he hits it hard, making a solid sound, and he doesn't flinch. His wife has large hips that seem to extend all the way down to the back of her knees. Although she looks to be about 30, she has no teeth. I see the small round imprint from the snuffbox she carries in her back pocket.

The food in the cafeteria always looks darkly overcooked. The bacon is brittle brown, and the sausages are hard black circles. The gravy has a shiny skin on top. The scrambled artificial eggs look like a yellow range of mountains with a lake of melted butter. A boy in front of me asks for a greasy fritter and a cherry Coke for breakfast. I resist ordering biscuits and gravy and settle for a large coffee whose bitterness I try to conceal with lots of non-fat creamer.

My mother once told me that when she was a child, Mamaw took her to the Saturday matinee to see a Shirley Temple movie. Although the admission was only 15 cents and my grandmother had never seen a movie before, she waited outside while my mother went into the dark theater. But the hernia that would eventually kill her began to hurt. When she could stand it no longer, she went up to the glass ticket booth and told the young man that her little girl was in the movie. "I don't feel too good. If I promise to keep my eyes closed, you reckon I could go inside and sit in the back row and wait for her?"

I see my grandmother, a beautiful but stooped woman with black hair and high Cherokee cheekbones, holding her stomach as if to keep it from falling out, sitting in the darkness with closed eyes. She listens to Shirley Temple singing "On the Good Ship Lollypop," but she doesn't peek to see those sweet blonde curls.

My mother always thought there was something saintly about her own mother, and she longed with a sad futility to be like her. Mamaw used to tell her that when she was a child she thought good little girls did not have to go to the toilet, and that was how she knew she was not a good little girl.

Last year at Stanford, I went to a public lecture entitled

“Appalachian Exoticism: Marginal Women.” A dowdy young woman, with straight black hair and a severe look, stepped to the podium and read a paper, most of which I did not understand, about an Eastern Kentucky writer. I went because I wanted to know what was “exotic” about Appalachian women and what made them “marginal.” As best as I could understand, “exotic” meant “foreign” and “different.” And “marginalized” was what people from third world countries were.

Based on what this woman was saying in her serious and impressive way, it seems that if you were born in the hills of Eastern Kentucky you were automatically “exotic” and “marginal.” Being marginal was something that this woman, who had just finished her dissertation at some Midwestern university, obviously admired. At the end of the lecture when everyone was asking questions, I raised my hand and said that I was from a small town in Eastern Kentucky. Did that make me marginalized?

“No,” she said, looking at my dress and hair. “You’re obviously a professional woman, part of the establishment.”

“Let me get this straight,” I said, my voice getting stronger. “When I was a little girl, growing up in the mountains of Eastern Kentucky, wearing dresses made out of hog feed bags and going barefoot, I was exotic and marginalized. Now that I have busted my butt getting an education and making a living, I am no longer exotic or interesting. Is that what you’re saying?” Before she could answer, I pushed on. “Well, let me just ask you one more question. Since being marginalized is so damned interesting to folks like you, just what the hell can I do to be re-marginalized?” The woman stared at me as if I were crazy, and someone in the front row turned around and yelled, “Maybe you could become disabled.”

Both the surgeon who operated on Mom and the pulmonary specialist who now attends her are Indian. I have heard that they get part of their education expenses forgiven if they practice for a while in economically depressed areas. He is old and small, with dark leathery skin and a wispy white beard. She is young and round-faced with hair pulled back in a tight braid. Each day he calls us into the consultation room and shakes his lowered head, saying either “She is worse” or “She is no better.” One day he gave us a mild jolt of hope by saying, “She is not significantly better.” He is a surgeon and acts, now that he

doesn't have a knife in his hand, as if he doesn't know what to do.

The pulmonary doctor comes in and adjusts the machines, changes the antibiotic, and says, "We are going to try a different medicine" or "We are going to try a different setting" or "We are going to set up another kind of iv." We pin our hopes on her and think of the surgeon as a shriveled little messenger of death.

I walk back and look at my mother's swollen face, watching for her color to change, watching for her eyelids to flutter, watching for any sign of the secrets going on within. The other visitors shuffle by to visit their own, curious, wondering if mine is worse than theirs. I understand. I have done the same.

I pull the top of her gown down to see where they have inserted a tube directly into the heart to monitor its activity, and I look at her small, shriveled breasts. I remembered how my own lay against my chest when I lost weight after divorcing Warren. I thought about getting implants for a while. Then one of the few men I had enough confidence in to go to bed with during those years told me about a woman he once dated who had them.

"What were they like?" I asked, leaning on my elbow in bed and looking at his face.

"You mean, what did they feel like?" He was already sorry he had mentioned it.

"Yes, did you like them or not?"

"I don't know," he laughed, "I guess they were all right." He was quiet for a minute, remembering. "They were hard, like I imagine the new breasts of a young girl are," he said. "When she lay on her back, they didn't flatten out against her chest, but pointed up." He laughed again.

After he went to sleep, I lay there and thought about it. If I got them, what would happen when I grew older? Would the rest of my body begin to sag while my breasts stubbornly stayed erect? Would I be a seventy-year old woman with seventeen-year-old tits? When I died and lay rotting in my coffin, would my flesh fall away while those blobs of jelly remained?

I hate the sight of the little conference room with the pathetic pot of dusty silk flowers and the box of Kleenex on the table beside it. Yesterday the room was filled with a family as I passed by. A woman

was crying in that familiar rhythmic high-pitched wail. Her mouth was open, and her head was thrown back, and you could see the gaps where teeth were missing. She had smiled shyly at me in the waiting room a half hour earlier. Each morning we are called back to that little room. We have already been given the sad speech that there is nothing else they can do. But we have decided to ignore it. I hide from the wizened little death messenger. I stop his mouth before he can speak. I take constant notes. They watch me and fear what I write. They do not wish to be held responsible.

When the time comes to decide, it is easier than I expected. For now when I go back to see her, I do not look at her swollen face but at the monitors to see what her blood pressure and heart rate are. I check her blood oxygen and look at her urine bag. I watch her chest rise and fall, but it is the machine that makes it move. She cannot recover, they say. She may be brain damaged from loss of oxygen, they say. She cannot live without the respirator, they say. Perhaps we should think about what is best for her, they say.

So we make our last visit. My sister's legs buckle and her husband catches her. She wants to stay in the room, but I know she will get hysterical when Mom's chest stops moving up and down. So we sit in the small conference room. It takes only ten minutes. We leave the back way so those who still wait will not see us.

June cannot find Mom's teeth at home. They have been lost before because she often takes them out at night. Sometimes, June says, they have slipped down her nightgown, the lower plate lying there in the morning between her breasts. Or she has dropped them accidentally in the trash can. We are worried. They need to be put in before her jaw sets. I drive to the house and go to the bedroom and find them marking her place in a novel she has been reading. I go to the kitchen, rinse them at the sink, put them in a zip lock sandwich bag, and take them to the funeral home.

We go to Walmart to get Mom a bra and panties. June says, "We got to get her a new bra. She would say, 'Lord, you wouldn't take that tatty old bra over to me, would you?'" We buy a Cross Your Heart 34B with Soft Support and white underpants, which come two to a pack. I decide to wear the other one; later when I put them on, I wonder who will be putting Mom's on her.

Mom picked out her funeral dress several months ago. June told me about it one Sunday when I made my weekly call. I now see it for the first time when June gets it out of the closet to take to the funeral home. It is a navy blue skirt with a smock-style top. June said that Mom chose it because the top was long enough to hide her hips, which she always thought were too wide. June said that when she and her little girl Jenny took Mom to the mall to pick it out, Jenny held the top up to her and said, "Here, Mammy, close your eyes so we can see what it would look like on you." June said all three of them laughed.

One of the moments we have dreaded is the initial viewing at the funeral home. It will be the first time we see her without the illusion of life, without the respirator making her chest rise and fall, without the red blood showing under the thin skin of her cheeks. The funeral director meets us at the door and asks if we have a picture of Mom with us. He is uneasy and a little embarrassed. "I done the best I could," he says. "But she was pretty bad swollen. I hope it is all right. You all tell me if you ain't satisfied and I'll see what I can do before the public viewing tonight."

My sister and brother ask me to go in first. They stand at the "Sweet Rest" parlor door, and I walk hurriedly up to the open coffin. I smile, relieved that it doesn't look like her and wave them over. "It's all right; it's not her." And for a second I mean it literally, as if they have made a mistake and sent the wrong woman from the hospital. Her neck is swollen, which makes her face look squeezed on top of her shoulders. Gravity pulls her mouth down toward the pillow. I almost laugh. If Mom were there to look down at herself, she would say, "Hell's bells! Who in the world is that?" I have never seen a more convincing case for my mother's conviction that the body is a twisted illusion, bearing no resemblance or relationship to the reality that lies hidden within.

At the old family cemetery, the cars squeeze off the road, and we follow the coffin up the little hill to the tent. The gravediggers hunker down on the other side of the slope and wait. The minister says a prayer, picks up some dirt and sprinkles it on the coffin, and looks up. "This concludes the graveside services. The family invites you all back to the house for a bite to eat." The neighbors have brought food: fat

chicken dumplings in a rich yellow broth, green beans cooked with a piece of bacon until they are brown and shiny, corn cut off the cob and simmered with sweet cream and butter, sausage dressing rich with sage, coarse white cornbread, and cole slaw heavy with Miracle Whip. Everyone eats and laughs and talks. They go back for seconds. They cut huge slices of ham; they pile on mashed potatoes until their paper plates sag; they drink Pepsi Cola from cans. They cut big pieces of chocolate cake and swallow them down with sweet brown coffee.

After I board the plane, I watch people come down the aisle, thinking, “Oh, Lord, don’t give me some woman who wants to talk all the way to San Francisco, or some guy who wants to buy me a drink and puts his hand on my leg somewhere over Utah.”

A huge young woman comes down the aisle checking her boarding pass; she is so big that she has to walk sideways. “This is me,” she says when she reaches my row. Grunting, she shoves a shopping bag under the seat in front of her and plops down on the aisle seat beside me. Her right hip squeezes under the armrest and presses against me. She has a strong body smell; her huge breasts are heaving. Out of the corner of my eye I see her wave to someone. I look up and see an older woman, almost as large, coming toward us. “Here I am, Momma,” my seatmate calls.

The daughter and I get up in the aisle, and the older woman squeezes herself in to sit by the window. I offer to change seats with one of them. But the daughter has to have the aisle because of a bladder problem, and the mother wants to see the lights of the cities we will pass in the night.

When we all are settled, I can feel their clammy upper arms and the heavy bulk of their hips up against me. It isn’t until the plane has leveled off that I start laughing, softly at first, trying to hide behind my magazine, but then uncontrollably until the tears run down my cheeks.